

Report in Brief

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U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF INSPECTOR GENERAL



Why OIG Did This Audit

Previous OIG audits identified Federal Medicaid reimbursement for managed care payments that were not claimed in compliance with Federal requirements. Specifically, some individuals enrolled in Medicaid managed care had more than one identification number. As a result, Medicaid managed care organizations (MCOs) received unallowable monthly Medicaid payments for these beneficiaries. An analysis of New York Children Health Insurance Program (CHIP) data indicated that New York may have made similar unallowable, duplicate CHIP payments to MCOs.

Our objective was to determine whether New York claimed Federal reimbursement for duplicate CHIP payments made to MCOs.

How OIG Did This Audit

We limited our audit to potential CHIP payments New York may have made to MCOs for the same enrollee for the same month of coverage. Specifically, we identified 104 enrollee-matches with payments totaling \$594,492 (\$389,704 Federal share) that New York claimed for the period January 1, 2020, through December 31, 2022. For purposes of this audit, we defined an enrollee-match to be an individual for whom selected personal information (i.e., identical first five characters of first name, middle name initial, last name, and date of birth) was the same for more than one claim for the same month of coverage.

New York Generally Identified and Corrected Duplicate Children's Health Insurance Plan Payments Made to Managed Care Organizations

What OIG Found

New York generally did not claim Federal reimbursement for duplicate CHIP payments made to MCOs. New York identified and corrected duplicate CHIP payments associated with 100 of the 104 enrollee-matches we reviewed. Specifically, New York (1) appropriately determined that the CHIP payments associated with sampled enrollee-matches were for two different enrollees or (2) timely identified and corrected the duplicate CHIP payments made to MCOs. However, New York did not identify and correct duplicate CHIP payments to MCOs for the remaining four enrollee-matches totaling \$24,679 (\$7,026 Federal share).

What OIG Recommends and State Agency Comments

This report does not contain any recommendations because New York generally identified and corrected duplicate CHIP payments made to MCOs, and the amounts associated with the improper payments we identified were immaterial. We provided New York with our findings for the four enrollee-matches we identified to contain duplicate CHIP payments to MCOs so that it can evaluate these claims and decide whether to recover the improper payments in accordance with New York's policies and procedures.

In written comments to our draft report, New York thanked OIG for the opportunity to comment on our audit.