



PROVIDER ALERT

ALL PROVIDERS

July 1, 2015

Change in Audit Procedure

Effective August 1, 2015, the practice of allowing providers to submit missing documentation within 24 hours post audit will be discontinued. This practice discontinuation is the Department's effort to align the audit process to industry best practices.

Maryland Medicaid and the Behavioral Health Administration have determined that the current procedure of granting providers up to 24 hours to locate missing documentation is not consistent with the intent of the audit process and is not a requirement in regulation to allow. The Policy and Procedures for Provider Audit within the Public Behavioral Health System is being updated to reflect this change and is posted on the ValueOptions' website <http://maryland.valueoptions.com/provider/compliance/BHA-Office-Managed-Care-Compliance-Policy-Procedure-for-Provider-Audits.pdf>.

ValueOptions will request that providers complete a Records Attestation at the conclusion of the on-site audit. Providers will be attesting to the accuracy and completion of the members' records submitted for review, and additional information will not be accepted once ValueOptions has completed the on-site audit and left the premises. A copy of the Records Attestation can be found at <http://maryland.valueoptions.com/provider/compliance/Record-Attestation.pdf>

Providers are reminded that participation in the Public Behavioral Health System requires providers to maintain adequate records and make them available to the Department or its designee to carry out required activities (COMAR 10.09.36.03 A). Furthermore, providers shall maintain records on all individuals enrolled in a program and the records shall contain, at a minimum, the information outlined in COMAR for the pertinent levels of service.