Report Name: **Program Integrity Audits and Investigations**
Version **2.0**
Report Code: **MO-PI1**
Submission Date: **11/29/2019**
Code Citation: **IC 12-15-30.5-4 (a)(3)(D)**

Experience Period >> 10/01/19-10/31/19

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Date Initiated	**Provider Name**	**Driver(s), if Appropriate**	**Summary of Reason for Audit/Investigation**	**Actions Taken**	**Date Completed**	**Recoupment/Repayment Schedule**	**Projected Activity for Next Month**
	Comment: No referrals were made to FSSA/OMPP Program Integrity office in October 2019.						

Note: Data reflects the cases referred to FSSA/OMPP Program Integrity unit during the reporting month.