IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

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IHCP reminds providers of the Program Integrity self-disclosure process

The Indiana Health Coverage Programs (IHCP) reminds providers of the Program Integrity self-disclosure protocol for providers that need to report Medicaid and Children's Health Insurance Program (CHIP) fee-for-service (FFS) overpayments they have identified.

Providers should follow these notable guidelines from the self-disclosure process:

- Secure file transfer protocol (SFTP) is the preferred way of submitting self-disclosures and can be used for submitting protected health information (PHI) securely.
- The SFTP form and instructions are located on the <u>Protocol for Voluntary Self-Disclosure of Provider</u> <u>Overpayments</u> page at in.gov/medicaid/providers.
- Only one National Provider Identifier (NPI) should be submitted per disclosure for Provider Group submissions.
- Do not send checks with self-disclosures; claims must be verified before submitting payment.
- A Final Calculation of Overpayment (FCO) letter to request payment will be sent after claims are validated.



Providers can access the self-disclosure form and instructions on the <u>Protocol for Voluntary Self-Disclosure of Provider Overpayments</u> page at in.gov/medicaid/providers. Providers are required to fill out all required fields (shown with an asterisk) on the self-disclosure form. Supporting documentation for the self-disclosure should include explanations of benefits (EOBs) from third-party payers to ensure proper calculation of the refund and for claim validation. Self-disclosures sent without supporting documentation for the refund are unable to be processed.

Additionally, self-disclosures cannot be processed if the provided contact is not sufficient or if there is no available contact for questions regarding the submitted disclosure. Providers should ensure that the provider contact information is for someone who can answer questions about the submitted self-disclosure.

For questions or concerns related to self-disclosure, providers may call the IHCP Provider and Member Concerns Line at 800-457-4515, option 8 for Audit Services or email ProgramIntegrity.FSSA@fssa.in.gov.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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