



Federal Fiscal Year 2010  
State Program Integrity Assessment (SPIA)



State of Massachusetts

Program Characteristics		
Medicaid Enrollment:	Fee-for-service recipients:	483,438
	Comprehensive managed care:	475,929
	Primary care case management:	300,272
	Other:	0
	Total:	1,259,639
Organizational structure for Medicaid Integrity activities:	Hybrid Model	
Activities that the State includes under the scope of Medicaid Integrity:	Audits, Investigations, SURS/Data Mining, Provider Enrollment, Provider Education/Communications, Managed care oversight, Other Other: OCA-UM Non-Institutional Provider Review	
Medicaid Integrity activities that the State contracts out:	Audits, Investigations, SURS/Data Mining, Provider Enrollment, Provider Education/Communications, Other Other: OCA-UM Non-Institutional Provider Review has contract with MassPro for peer reviews	
Estimate of expenditures (\$) for Medicaid Integrity activities:		\$10,000,000.00
Planning		
Staffing		
Total number of full-time equivalent employees (FTEs) for all functions considered to be Medicaid Integrity:	<b>Audits:</b>	
	Filled:	6.00
	Vacant:	0.00
	<b>Investigations:</b>	
	Filled:	7.00
	Vacant:	0.00
	<b>SURS/Data Mining:</b>	
	Filled:	15.00
	Vacant:	0.00
	<b>Provider Enrollment</b>	
	Filled:	15.00
	Vacant:	1.00
	<b>Provider Education/Communications:</b>	
	Filled:	6.50
	Vacant:	2.00
	<b>Other: NR</b>	
	Filled:	5.00
	Vacant:	0.00
Strategic Planning		
State has a documented strategic plan to address Medicaid Integrity:	For its Fee-For-Service program(s)?:	NA
	For its managed care program(s)?:	NA

Prevention		
Total number of participating Medicaid providers:		37,572
Number of providers applied for enrollment in Medicaid:		7,438
Number of providers denied enrollment in Medicaid:		3,811
Pre-enrollment screening conducted on individuals/entities applying for Medicaid provider numbers:	In-state licensing board, Out-of-State licensing board, HHS OIG's List of Excluded Individuals and Entities (LEIE), GSA's Excluded Parties List System, National Practitioners Data Bank, On-site visits, Criminal background investigations, Credentialing, Check if provider has another provider number under which the provider made inappropriate payments	
	Other: NA	
	State maintains its own list of providers who have been involuntarily dis-enrolled:	Yes
Detection		
State typically extrapolates overpayments:		Yes
Total number of provider audits conducted:	<b>Desk Audits</b>	
	State staff:	287
	Contractor staff:	6
	<b>Field Audits</b>	
	State staff:	1
	Contractor staff:	68
	<b>Provider Self-Audits</b>	
	State staff:	0
	Contractor staff:	0
	<b>Combination Desk/Field audits</b>	
	State staff:	355
	Contractor staff:	13
	<b>Cost report Audits</b>	
	State staff:	0
	Contractor staff:	0
	<b>Total</b>	
	State staff:	643
	Contractor staff:	87
Overpayments (\$) identified as a result of provider audits:	<b>Desk Audits:</b>	
	\$1,000,000.00	
	<b>Field Audits:</b>	
	\$10,600,000.00	
	<b>Provider Self-Audits:</b>	
	\$ 0.00	
	<b>Combination Desk/Field Audits:</b>	
	\$5,142,395.00	
	<b>Cost Report Audits:</b>	
	\$ 0.00	
<b>Total:</b>		\$16,742,395.00

Investigation and Recovery		
Referrals to Law Enforcement		
Number of referrals accepted by the MFCU:		16
Number of referrals made to the MFCU:		19
Provider Suspensions & Sanctions		
State imposes provider payment suspensions due to inappropriate or fraudulent activities:		Yes
State imposes provider sanctions due to inappropriate or fraudulent activities:		Yes
Cost Avoidance		
State calculates the dollars cost avoided from terminating providers:		No
State calculates the dollars cost avoided from providers that withdrew due to program integrity concerns:		No
State calculates cost avoidance dollars due to changes in payment systems:		Yes
State measures cost avoidance dollars due to policy changes:		No
Recoveries		
Total recoveries (\$) from provider audits:	<b>Desk Audits:</b>	\$1,000,000.00
	<b>Field Audits:</b>	\$10,600,000.00
	<b>Provider self-audits:</b>	\$ 0.00
	<b>Combination desk/field audits:</b>	\$12,228,036.00
	<b>Cost report audits:</b>	\$ 0.00
Total dollars recovered from ALL Medicaid Integrity activities	<b>Total:</b>	\$17,228,036.00
		\$46,512,000.00