



Federal Fiscal Year 2010  
State Program Integrity Assessment (SPIA)



State of New Hampshire

Program Characteristics		
Medicaid Enrollment:	Fee-for-service recipients:	0
	Comprehensive managed care:	0
	Primary care case management:	0
	Other:	0
	Total:	0
Organizational structure for Medicaid Integrity activities:	Report Not Received	
Activities that the State includes under the scope of Medicaid Integrity:	Report Not Received Other:	
Medicaid Integrity activities that the State contracts out:	Report Not Received Other:	
Estimate of expenditures (\$) for Medicaid Integrity activities:	\$ 0.00	
Planning		
Staffing		
Total number of full-time equivalent employees (FTEs) for all functions considered to be Medicaid Integrity:	Audits:	
	Filled:	0.00
	Vacant:	0.00
	Investigations:	
	Filled:	0.00
	Vacant:	0.00
	SURS/Data Mining:	
	Filled:	0.00
	Vacant:	0.00
	Provider Enrollment	
	Filled:	0.00
	Vacant:	0.00
	Provider Education/Communications:	
	Filled:	0.00
Vacant:	0.00	
Other: Report Not Received		
Filled:	0.00	
Vacant:	0.00	
Strategic Planning		
State has a documented strategic plan to address Medicaid Integrity:	For its Fee-For-Service program(s)?: <b>Report Not Received</b> For its managed care program(s)?: <b>Report Not Received</b>	

Prevention		
Total number of participating Medicaid providers:		0
Number of providers applied for enrollment in Medicaid:		0
Number of providers denied enrollment in Medicaid:		0
Pre-enrollment screening conducted on individuals/entities applying for Medicaid provider numbers:	Report Not Received Other:	
State maintains its own list of providers who have been involuntarily dis-enrolled:	Report Not Received	
Detection		
State typically extrapolates overpayments:	Report Not Received	
Total number of provider audits conducted:	Desk Audits	
	State staff:	0
	Contractor staff:	0
	Field Audits	
	State staff:	0
	Contractor staff:	0
	Provider Self-Audits	
	State staff:	0
	Contractor staff:	0
	Combination Desk/Field audits	
	State staff:	0
	Contractor staff:	0
	Cost report Audits	
	State staff:	0
Contractor staff:	0	
Overpayments (\$) identified as a result of provider audits:	Desk Audits:	\$ 0.00
	Field Audits:	\$ 0.00
	Provider Self-Audits:	\$ 0.00
	Combination Desk/Field Audits:	\$ 0.00
	Cost Report Audits:	\$ 0.00
	Total:	\$ 0.00

Investigation and Recovery		
Referrals to Law Enforcement		
Number of referrals accepted by the MFCU:	0	
Number of referrals made to the MFCU:	0	
Provider Suspensions & Sanctions		
State imposes provider payment suspensions due to inappropriate or fraudulent activities:	Report Not Received	
State imposes provider sanctions due to inappropriate or fraudulent activities:	Report Not Received	
Cost Avoidance		
State calculates the dollars cost avoided from terminating providers:	Report Not Received	
State calculates the dollars cost avoided from providers that withdrew due to program integrity concerns:	Report Not Received	
State calculates cost avoidance dollars due to changes in payment systems:	Report Not Received	
State measures cost avoidance dollars due to policy changes:	Report Not Received	
Recoveries		
Total recoveries (\$) from provider audits:	Desk Audits:	\$ 0.00
	Field Audits:	\$ 0.00
	Provider self-audits:	\$ 0.00
	Combination desk/field audits:	\$ 0.00
	Cost report audits:	\$ 0.00
Total dollars recovered from ALL Medicaid Integrity activities	Total:	\$ 0.00