



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

November 28, 2018

Mr. Kenneth Shulman
Assistant Comptroller
New York State Office of the State Comptroller
110 State Street, 10th Floor
Albany, New York 12236

Dear Mr. Shulman:

Pursuant to the provisions of Section 170 of New York State Executive Law, I hereby transmit to you a copy of the New York State Department of Health's comments related to the Office of the State Comptroller's final audit report 2016-S-54 entitled, "Medicaid Payments to Medicare Advantage Plan Providers."

Please feel free to contact Estibaliz Alonso, Assistant Commissioner, Office of Governmental and External Affairs at (518) 473-1124 with any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Sally Dreslin".

Sally Dreslin, M.S., R.N.
Executive Deputy Commissioner

Enclosure

cc: Estibaliz Alonso

**Department of Health
Comments on the
Office of the State Comptroller's
Final Audit Report 2016-S-54 entitled,
Medicaid Payments to Medicare Advantage Plan Providers**

The following are the Department of Health's (Department) comments in response to the Office of the State Comptroller's (OSC) Final Audit Report 2016-S-54 entitled, "Medicaid Payments to Medicare Advantage Plan Providers."

Recommendation #1

Review the actual (\$770,935) and potential (\$562,356) Medicaid overpayments we identified and recover as appropriate.

Response #1

The Office of the Medicaid Inspector General (OMIG) is performing analysis on the identified overpayments, and will determine an appropriate course of action.

Recommendation #2

Formally instruct the three providers identified in this report to bill Medicare Part C claims in accordance with existing requirements.

Response #2

The Department will remind and instruct the three providers identified in this report on billing requirements for Medicare Part C claims that are submitted to Medicaid for payment of patient responsibility. Additionally, the Department will refer the providers to the OMIG for investigation and follow-up.

Recommendation #3

Develop a risk-based approach to identify and prevent inappropriate Medicaid claims for Medicare Part C cost-sharing liabilities.

Response #3

The Department will review the payment and reasonability edits currently in place for Medicare Part C claims, such as eMedNY edit 02255, and assess if they can be strengthened to help mitigate provider billing errors that may result in Medicaid overpayments.