

**Department of Community Health**  
**SFY 2021 DOAA Audit - Corrective Action Plan Updates**  
**March 9, 2023**

<u>Finding</u>		<u>Recommendation</u>	<u>Status</u>
1.	<b>FS-419-21-01 &amp; FA-419-21-01.</b> Continue to Strengthen Application Risk Management Program.	DCH does not have adequate controls in place over its application risk management program related to the claims and payment processing or Medicaid benefits.	Partially Resolved
2.	<b>FA-419-21-02.</b> Improve Controls over Inpatient Medicaid Payments.	Field audits of participating inpatient hospital providers were not performed as required by the current State Plan.	Resolved
3.	<b>FA-419-21-03.</b> Improve Controls over Medicaid Eligibility Determinations for Ex-Parte Members.	DCH & DHS did not have effective internal controls in place to ensure the required continuing Medicaid eligibility determinations are performed for Supplemental Security Income Ex Parte members.	Resolved
4.	<b>FA-419-21-04.</b> Improve Controls over Managed Care Organization Financial Audits	DCH should improve controls over MCO audited financial reports.	Unresolved

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	<u>Finding</u>	<u>Recommendation</u>	<u>Status</u>
<p>5. <b>FA-419-21-05.</b> Improve Controls over Medicaid Payments after Date of Death.</p>	<p>DCH made improper payments to Medicaid providers after beneficiaries' deaths.</p>	<p>DCH management should continue to dedicate the necessary resources and execute their plan to ensure that modifications to the date of death processes within GAMMIS are implemented appropriately and that Medicaid benefit payments to providers are not made after beneficiaries' deaths.</p>	<p>Partially Resolved</p>
<p>6. <b>FA-419-21-06.</b> Improve Controls over Medicaid Capitation Payments for Medicare Members.</p>	<p>DCH made improper capitation payments for Medicaid Managed Care members with Medicare insurance coverage.</p>	<p>DCH management should continue to dedicate the necessary resources and execute their plan to ensure that modifications to retroactively recoup capitation payments from its MCOs upon receipt of notice that a member is eligible for Medicare are implemented appropriately within GAMMIS.</p>	<p>Partially Resolved</p>

updated 2/27/2023