

Indiana FSSA Audit Frequently Asked Questions

Contact Information

Organization	Fax Number	Contact Address	Service Hours
HMS – Audit Department	310-642-1701	100 Corporate Pointe, Suite 395 Culver City, CA 90230	Monday through Friday 8:00 am – 7:30 pm ET

<i>Topic or Issue</i>	<i>Question</i>	<i>Answer</i>
<i>Audit Processes and Specific Audited Claim Questions</i>	<i>Audit Responses – Contact</i> <i>Can I call HMS with the information about the prescription in question?</i>	All audit responses must be sent to HMS in writing. You may either fax them to HMS at 310-642-1701, or send them to the address indicated on the letter. Auditors cannot accept verbal responses to audit requests. Auditors cannot accept verbal appeals to findings; all appeals must be submitted in writing, as directed in the Final Determination Letter.
	<i>Documentation Requested</i> <i>Exactly what documentation is being requested or is required for each prescription?</i>	Initial Audit Request Letter: Two types of documentation will be accepted. For retail pharmacies, a copy of the original prescription must be provided. This includes a scanned computer image of the original prescription. For long term care pharmacies, a copy of the original prescription or drug order will be accepted. If notations were made on the back of the prescription or drug order, a copy of both sides will need to be provided. If notes were made in the computer system, these will need to be provided as well. The Initial Audit Request Letter has several check boxes on the right-hand side indicating the actual information being requested. Additional information can be found on our website at: http://www.hms.com/our_services/services_provider_info.asp
		Notice of Final Determination – Final Findings Letter: The Notice of Final Determination – Final Findings Letter will provide the pharmacy with any findings identified through the initial request phase. The Final Findings Letter provides legal notice to pharmacies regarding overpayments and outlines the provider’s options regarding resolution of the audit findings, including appeal rights. The Overpayment Option Form and Statement of Issues will need to be submitted to both INFSSA and HMS to ensure timely resolution of the issues

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	<p><i>Receipt of Response</i> <i>Did you receive my audit response (either via mail or fax)?</i></p>	<p>Please call HMS to request the status of your audit response at 866-642-0622 (inside Indiana) or 310-642-1700 (outside Indiana). Pharmacies are notified of all audit findings that result in the recovery of money, and are provided an opportunity to appeal all findings.</p>
	<p><i>Duplicate Audit Request</i> <i>We have already responded to this audit request, why am I receiving another request?</i></p>	<p>These inquiries should be forwarded to HMS Rx: Attn: Audit Department 100 Corporate Pointe, Suite 395 Culver City, CA 90230 Phone: 866-642-0622 (inside Indiana) or 310-642-1700 (outside Indiana) Email: pharmacyaudit@hms.com</p>
	<p><i>Submission Deadlines</i> <i>What is the deadline for the submission of my audit responses?</i></p>	<p>Central Script Review: Copies of all requested prescriptions and/or additional documentation must be provided within 30 calendar days from the date of the Initial Request Letter and 60 calendar days for the Notice of Final Determination.</p> <p>On-site Audit Review: A pharmacy has 30 calendar days to submit any additional documentation that was missing during the On-Site Audit Review.</p>
	<p><i>Audit Codes</i> <i>What does this audit code mean?</i></p>	<p>The Audit Results letter has a legend printed at the bottom that defines the audit code determination assigned to each claim. Please call HMS to be provided with a more comprehensive explanation of the audit codes. You may contact HMS by calling. Phone: 866-642-0622 (inside Indiana) or 310-642-1700 (outside Indiana) Email: pharmacyaudit@hms.com. Please visit our website where additional information on audit findings can be found.</p>
	<p><i>Audit Findings or Results</i> <i>What should I do if I have a question about the audit findings?</i></p>	<p>If you are unsure of what information is being requested of you, or if you have a question about an audit code, you may request clarification in writing or by calling HMS. Attn: Audit Department 100 Corporate Pointe, Suite 395 Culver City, CA 90230 Phone: 866-642-0622 (inside Indiana) or 310-642-1700 (outside Indiana) Email: pharmacyaudit@hms.com</p>

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	<i>Audit Periods</i> <i>Will the process continue to be a quarterly audit process?</i>	It is anticipated that the audits will be performed quarterly; however, the Office of Medicaid Policy and Planning may choose to modify the cycle.
<i>Audit Adjustments & Interest Calculations</i>	<i>Failure to Respond to Initial Request</i> <i>What should I do if I didn't respond to the initial audit request?</i>	A provider may still respond to the audit during the Notice of Final Determination Process. A Notice of Final Determination Letter will be sent if the provider did not respond to the Initial Request Letter within 30 calendar days.
<i>Interest Calculation</i>	<i>How is the interest calculated?</i>	Per Indiana regulation 405 IAC 6-9-3, interest is calculated from the date of the overpayment to the provider to the date of the notification letter. The interest is set by the State annually: <ul style="list-style-type: none"> • 2002: 6% • 2003: 4% • 2004: 4% • 2005: 1% • 2006: 2% • 2007: 3% • 2008: 7% • 2009: 7% • 2010: 5% • 2011: 9% Interest rates can change every January. For more information, you may go to http://www.in.gov/legislative/iac
<i>Disagreements, Appeals Process & Repayment Options</i>	<i>How do I appeal the findings in the Final Determination letter?</i>	A provider may appeal to the audit during the Final Determination Period. All appeals must be filed within 60 calendar days of Notice of Final Determination by following the process outlined in this Notice, including a Statement of Issues and the Overpayment Option Form.
	<i>Repayment Options</i> <i>What are my repayment options?</i>	Overpayments and interest can be repaid by having them withheld from future payments for services. Other options are to send a check to repay the overpayment and interest and appeal the findings, which stops the interest accrual; or you may elect to

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		<p>appeal the findings and not submit payment, in which case interest continues to accrue in the event the overpayment stands.</p> <p>These options are explained in more detail on the Overpayment Option Form which was included with your results letter you received.</p>
	<i>What is the process to resubmit a claim that has been recovered in full?</i>	<p>Not all claims are eligible for resubmission, but claims that do qualify, if less than a year old, may be resubmitted on line. If the claim is more than a year old, please submit the paper claim and overpayment option form to HMS.. Please refer to Chapter 9 of the Indiana Health Coverage Programs Provider Manual for additional information regarding this process.</p>
<i>Resubmission of Recovered Claims</i>	<i>Does HMS have written authorization from the patients to receive copies of the prescriptions?</i>	<p>INFSSA has authority to conduct audits and review records, including prescriptions as specified in 405 IAC 1-5-1 and in the Indiana Health Coverage Programs Provider Manual.</p>
<i>HIPAA Issues</i>		