## MEM – PRV – Potential Fraudulent Call

# **Purpose:**

To be in compliance with Federal Code in handling possible fraud or abuse of the Medicaid program. If the agency received a complaint of the Medicaid fraud or abuse from any source or identifies any questionable practices, it must conduct a preliminary investigation to determine whether there is sufficient basis to warrant a full investigation.

### **Identification of Roles:**

Customer Service Representative (CSR) Unit Lead Program Integrity Unit

#### **Performance Standards:**

Quality Assurance for the call center must be at least 85%.

### **Path of Business Procedure:**

Step 1: Verification of Provider (Enter into OnBase Workview)

- a. Verify National Provider Identifier (NPI)
- b. Obtain contact name
- c. Obtain contact phone number

#### Step 2: Determine Reason for Call

- a. Claim Status
- b. Eligibility
- c. Service Limits
- d. Inquiry
- e. Fraud

#### Step 3: Potential Fraud

- a. If potential fraud, go to Step 4
- b. If not, go back to Step 2

Step 4: The Customer Service Representative (CSR) escalates call to Unit Lead and provides lead with

- a. NPI
- b. Contact name
- c. Contact telephone number
- d. Relevant information

Iowa Department of Human Services Iowa Medicaid Enterprise (IME) Member

Step 5: If the potential fraud relates to an Iowa Medicaid provider, the Unit Lead provides the caller with

- a. The telephone number for the Program Integrity Unit (515-256-4615)
- b. Refers the information obtained from the provider via e-mail to Don Gookin (<u>DGookin@dhs.state.ia.us</u>), supervisor in Program Integrity

Step 6: If the potential fraud relates to an Iowa Medicaid member, the Unit Lead obtains

- a. Member name
- b. Member ID
- c. Circumstances
- d. Name of caller
- e. Telephone number of caller
- f. Email information above to Vicki Shearer in Member Services (csheare@dhs.state.ia.us)

Forms/R	eports:
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N/A

## **RFP References:**

N/A

### Interfaces:

OnBase

### **Attachments:**

N/A