

Employees' Manual Title 14, Chapter P(1)

Revised February 14, 2020

Overpayment Recovery Detail

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Overpayment Recovery Detail Overview

The Overpayment Recovery Detail screen was created to give workers the ability to search for Medicaid expenses paid for members. This access is granted so workers can determine the amount of Medicaid public assistance debt when submitting a complete claim to the Department of Inspections and Appeals (DIA).

This new process allows workers to search by a member's state identification number for Medicaid paid amounts. A search for each person who is considered a member of the household during the overpayment period needs to be completed and then grouped together to determine the total debt amount.

Workers need to export a copy of the paid expenses as an Excel spreadsheet or PDF file then upload the document to the electronic case file in the event of an appeal. The Excel spreadsheet or PDF document can also be sent electronically, if needed. These tasks are accomplished by using the Export drop down menu on the Report Viewer taskbar shown below.

End Service Date		
		Export drop down menu
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Overpayment Recovery D	etail	
$ \langle \langle 1 $ of $1 \rangle \rangle $	100%	
Overpayment Recovery Deta	ail	Word
State ID:		Excel
Name:		PowerPoint
Start Search Date: End Search Date:		- PDF
Transaction Control Number First Service D	ate Last Service Dat	TIFF file
		MHTML (web archive)
		CSV (comma delimited)
		XML file with report data
		Data Feed

Access to Overpayment Recovery Detail

Income maintenance (IM) workers, Health Insurance Premium Payment (HIPP) Program staff, Department of Human Services (DHS) policy staff, and DIA staff have access to the Overpayment Recovery Detail screen.

Depending on which computer settings are used, users may need to use the double set of scrollbars to navigate the screen.

Workers can access Overpayment Recovery Detail on the Field IM Staff page located at: <u>http://dhssp/fo/IM/default.aspx</u>. Click the OVERPAYMENT RECOVERY DETAIL link to display the CORE MMIS reports page. Select the Overpayment Recovery Detail option.

Search Screen

The Search screen is displayed by clicking the link. A sample of the search page is shown below.

SQL Server Reporting Services	ŝ	$\overline{\mathbf{A}}$?		
★ Favorites 🔲 Browse					
Home > Production > MSDW > Medicaid > CORE MMIS > Overpayment Recovery Detail					
State ID Start Service Date				View Report	
End Service Date					

The parameters (search) section contains the following fields:

- **STATE ID**: Enter the member's state identification (ID) number.
- **BEGIN DATE (MM/DD/CCYY)**: Enter the first day of the claim period to be searched or use the calendar icon to select the correct date.
- END DATE (MM/DD/CCYY): Enter the last day of the claim period to be searched or use the calendar icon to select the correct date.

NOTE: The Parameters (search) section can be minimized or expanded by clicking the small blue pointer located in the center of the gray bar at the bottom of the Search section.

Overpayment Recovery Detail Screen

The Overpayment Recovery Detail screen displays the results of the search. All searches will return a result of either:

- No Records Found, or
- Results Found with a list of all Medicaid reimbursements paid during the search timeframe parameters.

If no records are found, the screen will display the following:

SQL Server Reporting Services						
★ Favorites 🔲 Browse						
Home > Production > MSDW > Medicaid > CORE MMIS > Overpayment Recovery Detail						
State ID #######X Start Service Date 1/1/2019 Twee Report						
End Service Date 9/13/2019						
$ \langle \langle 1 \rangle \text{ of } 1 \rangle \rangle \rangle \otimes 100\% \vee \Box \vee \Box$						

Overpayment Recovery Detail

No Records Found

When a No Records Found report is generated, staff need to document the SID and date range used for the search parameters and the no records found result in a case narrative.

When Medicaid reimbursements are found, the results screen will appear similar to the example shown below.

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SQL Server Reportin)								
★ Favorites 🛛 Browse									
Home > Production > MSDW >	Medicaid > CORE MM	MIS > Overpayment	Recovery Det	ail					
State ID #######X		Start Service Date 1/1	1/2019						View Report
End Service Date 9/13/2019	f								
< <u>1</u> of 1 > ▷	>I Ü 💮	100%	∃ ~ ⊕	Find Next					
Overpayment Reco									
	-								
State ID: ########X	-								
State ID: #######X Name: LASTNAME, FI	-								
State ID: #######X	-								
State ID: #######X Name: LASTNAME, FII Start Search Date: CCYYMMDD	-								
State ID: ########X Name: LASTNAME, FII Start Search Date: CCYYMMDD	-	Last Service Date	Provider #	Provider Name	Cat Srv	Acct Cd	Clm Stat	Charged	Reimburse
State ID: ########X Name: LASTNAME, FII Start Search Date: CCYYMMDD End Search Date: CCYYMMDD Transaction Control Number	RSTNAME		Provider #	Provider Name	Cat Srv ##	Acct Cd X	Cim Stat X	Charged S###.##	
State ID: #######X Name: LASTNAME, Fil Start Search Date: CCYYMMDD End Search Date: CCYYMMDD Transaction Control Number	RSTNAME First Service Date	Last Service Date						-	\$##.
State ID: #######X Name: LASTNAME, FII Start Search Date: CCYYMMDD End Search Date: CCYYMMDD Transaction Control Number	RSTNAME First Service Date	Last Service Date	****	****	##	x	х	\$###.##	\$##. \$##.
State ID: ########X Name: LASTNAME, FII Start Search Date: CCYYMMDD End Search Date: CCYYMMDD	RSTNAME First Service Date CCYYMMDD CCYYMMDD	Last Service Date CCYYMMDD CCYYMMDD	******	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	##	x x	x x	\$###.## \$##.##	Reimburse

The Parameters (search) section can be minimized or expanded by clicking the small blue pointer located in the center of the gray bar at the bottom of the search section.

The Overpayment Recovery Detail screen with results displays information in the following fields:

- **STATE ID**: Displays the member's state identification number (ID) under which claims were searched.
- NAME: Displays the member's name in last name, first name format.
- **START DATE**: Displays the first day of the claim period searched in CCYY/MM/DD format.
- END DATE: Displays the last day of the claim period searched in CCYY/MM/DD format.

The screen also displays information on the paid Medicaid reimbursed claims under the following column headings:

- TRANS CONTROL #: Displays the transaction control number assigned by Iowa Medicaid Enterprise (IME) to this service claim.
- **FIRST SERVICE DATE**: Displays the first day the service was provided to the member.
- LAST SERVICE DATE: Displays the last day the service was provided to the member.
- **PROV** #: Displays the provider's number.
- **PROV NAME**: Displays the provider's name.

- CAT SRV: Displays a code for the provider category of service. Valid codes are:
 - 10 Inpatient hospital care
 - 15 Outpatient hospital care
 - 16 Child partial hospitalization
 - 17 Child day treatment
 - 18 Adult partial hospitalization
 - 19 Adult day treatment
 - 20 Skilled nursing care
 - 25 Nursing home
 - 26 ICF/MR
 - 27 Nursing home/mentally ill
 - 30 Home health services
 - 31 Lead inspection
 - 35 Physician services
 - 40 Clinic services
 - 42 MEP case management
 - 45 Laboratory and X-ray
 - 46 Habilitation services
 - 48 Remedial services
 - 49 Rehabilitative support services
 - 50 Ambulance
 - 51 Local education agency services
 - 52 Early access services
 - 55 Prescribed drugs
 - 57 Drug capitation
 - 59 Indian health services
 - 60 Family planning services
 - 62 Iowa Plan
 - 63 Managed substance abuse care

- 64 MH access plan
- 65 EPSDT screening (Care for Kids)
- 66 HMO services
- 67 PACE
- 68 Patient management
- 69 HIPP
- 70 Medical supplies
- 75 Other practitioner services
- 76 Family-centered services
- 77 Family preservation
- 78 Treatment foster family care
- 79 Group treatment therapy
- 80 Dental services
- 82 Optometrist services
- 84 Chiropractic services
- 86 Podiatric services
- 88 Physical disability waiver services
- 89 Brain injury waiver services
- 90 Psychiatric care
- 91 Residential care facility
- 92 Intellectual disabilities waiver services
- 93 Children's mental health waiver services
- 94 AIDS/HIV waiver services
- 95 Elderly waiver services
- 96 III & handicapped waiver services
- 97 County office reimbursement
- 98 MEP services
- 99 Unassigned

NOTE: Based on monitor settings, it may be necessary to minimize the Parameters section to view the following column headings:

- ACCT CD: Displays the accounting code associated with this service. Valid codes are:
 - А Credit: claim adjustment
 - В Credit: claim credit
 - С Credit: mass adjustment
 - D Credit: mass credit
 - Е Adjust: claim adjustment
 - F Adjust: mass adjustment
 - G History only: credit from adjustment
 - History only: credit from credit Н
 - L History: credit from mass adjustment
 - J History: credit from mass credit
 - Κ History: adjustment from adjustment
 - L History: adjustment from mass adjustment
 - 0 Normal: pay provider
 - 1 History only: no provider pay
 - 2 Debit: gross adjustment
 - 3 Credit: gross adjustment
 - History only: debit gross adjustment 6
 - 7 History only: credit gross adjustment
- **CLM STAT:** Displays the payment status of the claim. Valid codes are:
 - В In process (being keyed)
 - С Suspended
 - D Suspense ready to process
 - Е Suspense to be deleted
 - н Held
 - To be paid L
 - To be denied Κ
 - Ν Paid
 - Р Denied
- CHARGED: Displays the amount of charges submitted by the provider for the services provided to the member.
- **REIMBURSED**: Displays the amount of payment issued for the services submitted by the Medicaid provider.

- **CHARGED TOTAL**: Displays the total amount of charges submitted by all providers for the services provided to the member.
- **REIMBURSED TOTAL**: Displays the total amount of payments issued for the services submitted by all Medicaid providers. Use this amount when determining the debt total.

Completing a Search

To complete a search for paid reimbursement claims, follow these steps:

Step	Action
1	Access Overpayment Recovery Detail on the Field IM Staff page at: http://dhssp/fo/IM/default.aspx. Click the OVERPAYMENT RECOVERY DETAIL link.
2	On the search page, locate the Parameters (Search) entry fields on the right side of the screen. Complete the following fields:
	• STATE ID : Enter the state identification number of the member for whom the claims search is being completed.
	• BEGIN DATE : Enter the first day of the claim period to be searched or use the calendar icon to select the correct date.
	• END DATE: Enter the last day of the claim period to be searched or use the calendar icon to select the correct date.
	Click on the VIEW REPORT button to generate the Search Report.
	NOTE: For Medically Needy with a spenddown claim, ongoing certification periods can be for only one or two months and retroactive certification periods can be for no more than three months. A search needs to be completed for each certification period.
3	Print or export the Search Report, then:
	 If additional searches need to be made, go to Step 2. If all searches are completed, close the browser window by clicking the 'X' in the upper right hand corner.

Exporting Search Reports to Excel or Acrobat (PDF) File

To export a Search Report to an Excel or Acrobat (PDF) file, follow these steps:

Step	Action
1	With the generated report showing, click the EXPORT DROP DOWN MENU button and select EXCEL or PDF.
2	A dialog box appears asking the user to open the document, save the document, or cancel the operation. If you click:
	 OPEN,: This allows viewing the document in the selected format. You can save the file using normal procedures. Close document by clicking the 'X' in the upper right hand corner.
	 SAVE,: This saves a copy to the user's downloads folder and displays a new dialog box with options to open the document, open the downloads folder, or view downloads in a pop-up window.
	NOTE: The SAVE button has a drop list with other options. Click the arrow to display options and select SAVE AS to open a SAVE AS dialog box. Using the SAVE AS dialog box, select the folder where the document is to be saved and enter a new file name, if desired. Then click SAVE. The dialog box disappears when the download is complete.
	• CANCEL,: This allows the user to cancel the export operation.
	NOTE: Exported files need to be uploaded to the electronic case file using the Document Upload feature.
3	If additional searches are to be completed, repeat Steps 1 and 2 for each additional Search Report. When all searches are completed, close the Overpayment Recovery Detail screen by clicking the 'X' in the upper right hand corner.

Printing Search Results

To print a Search Result screen, follow these steps:

Step	Action
1	With the generated report showing, click the PRINT button.
2	A PRINT pop-up appears with fields to select page size and orientation. Make any needed changes and click PRINT to open the Print dialog box.
3	In the Print dialog box, check the printer name and properties, then click ок to print the Search Report.
	NOTE: To have the entire report print on one page, change the printer properties to show "landscape" orientation on the Finishing tab.
4	If additional searches are to be completed, repeat Steps 1 and 3 for each additional Search Report. When all searches are completed, close the Overpayment Recovery Detail screen by clicking the 'X' in the upper right corner of the screen.

Totaling Claims for OPR Entry

To determine the total amount of the debt claim, users must combine the REIMBURSED TOTAL for each household member for the corresponding timeframes and enter the grand total on the OPR Medicaid Overpayment Calculation screen.

The B household consists of Mr. B, Mrs. B, and child B. The household was determined ineligible for all coverage groups except for Medically Needy with a spenddown for the months of January through April.

The worker determines the Medically Needy certification periods are January/February and March/April. The worker completes a claims search for each household member's state ID number for both of the certification periods (total of six searches).

After all searches are completed, the worker adds the REIMBURSED TOTAL from the January/February and the March/April reports to determine the debt claim amount for each of the respective certification periods. The worker enters the grand total for each certification period on the OPR Medicaid Overpayment Calculation screen.