

New: December 31, 2010

State: Vermont

**4.5b Medicaid Recovery Audit Contractor Program**

Citation

Section 1902(a)(42)(B)(i)  
of the Social Security Act

The State has established a program under which it will contract with one or more recovery audit contractors (RACs) for the purpose of identifying underpayments and overpayments of Medicaid claims under the State plan and under any waiver of the State plan.

The State is seeking an exception to establishing such program for the following reasons:

The State/Medicaid agency has contracts of the type(s) listed in section 1902(a)(42)(B)(ii)(I) of the Act. All contracts meet the requirements of the statute. RACs are consistent with the statute.\*

Section 1902(a)(42)(B)(ii)(I)  
of the Act

Place a check mark to provide assurance of the following:

The State will make payments to the RAC(s) only from amounts recovered.

The State will make payments to the RAC(s) on a contingent basis for collecting overpayments.

Section 1902  
(a)(42)(B)(ii)(II)(aa) of the Act

The following payment methodology shall be used to determine State payments to Medicaid RACs for identification and recovery of overpayments (e.g., the percentage of the contingency fee):

The State attests that the contingency fee rate paid to the Medicaid RAC will not exceed the highest rate paid to Medicare RACs, as published in the Federal Register.

The State attests that the contingency fee rate paid to the Medicaid RAC will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The State will only submit for FFP up to the amount equivalent to that published rate.

\* DVHA is currently in the process of amending an existing contract that will meet these requirements.

TN No. 11-005  
Supersedes  
TN No. None

Effective Date: 04/01/11  
Approval Date: 02/16/11

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- Section 1902  
(a)(42)(B)(ii)(II)(bb)  
of the Act
- Section 1902 (a)(42)(B)(ii)(III)  
of the Act
- Section 1902  
(a)(42)(B)(ii)(IV)(aa)  
of the Act
- Section 1902  
(a)(42)(B)(ii)(IV)(bb) of  
the Act
- Section 1902 (a)(42)(B)(ii)(IV)(cc) Of  
the Act
- The contingency fee rate paid to the Medicaid RAC that will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The State will submit a justification for that rate and will submit for FFP for the full amount of the contingency fee.
- The following payment methodology shall be used to determine State payments to Medicaid RACs for the identification of underpayments (e.g., amount of flat fee, the percentage of the contingency fee): Underpayments methodology will be a percentage of the contingency fee that will be established in contract.
- The State has an adequate appeal process in place for entities to appeal any adverse determination made by the Medicaid RAC(s).
- The State assures that the amounts expended by the State to carry out the program will be amounts expended as necessary for the proper and efficient administration of the State plan or a waiver of the plan.
- The State assures that the recovered amounts will be subject to a State's quarterly expenditure estimates and funding of the State's share.
- Efforts of the Medicaid RAC(s) will be coordinated with other contractors or entities performing audits of entities receiving payments under the State plan or waiver in the State, and/or State and Federal law enforcement entities and the CMS Medicaid Integrity Program.

TN No. 11-005  
Supersedes  
TN No. None

Effective Date: 04/01/11  
Approval Date: 02/16/11