Payment Integrity Scorecard

Program or Activity Military Health Benefits

Reporting Period Q2 2021

Change from Previous FY (\$M)

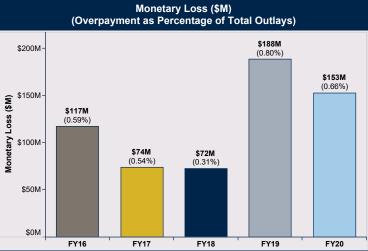
-\$36M



DOD Military Health Benefits

Brief Program Description:
Payments disbursed by the Defense Health Agency to private sector contractors for delivery of health care services to TRICARE eligible beneficiaries.

Key I	Key Milestones		ECD
1	Develop mitigation strategies to get the payment right the first time	Completed	Jun-20
2	Evaluate the ROI of the mitigation strategy	Completed	Jun-20
3	Determine which strategies have the best ROI to prevent cash loss	Completed	Jun-20
4	Implement new mitigation strategies to prevent cash loss	Completed	Jun-20
5	Analyze results of implementing new strategies	Completed	Jun-20
6	Achieved compliance with PIIA	On-Track	May-22
7	Identified any data needs for mitigation	Completed	Mar-21



Goals towards Reducing Monetary Loss			Status	ECD		Recovery Brief Description of Plans to Recover Method Overpayments		Brief Description of Actions Taken to Recover Overpayments
1	Q2 2021	Perform quarterly reviews of all Contractors by monitoring and assessing healthcare claims processing performance.	On-Track	Mar-21	1	Recovery Activity	Continue scheduled compliance reviews conducted by EIC. Payment errors are identified and refunds made to the Government through the submission of an adjusted TED record or by direct payment.	Post payment compliance reviews identify payment errors for the purpose of reporting improper payment estimates. Private sector care Contractors are notified of payment errors for correction and to assess processes and procedures.
					2	Recovery	Continued recoupments occurring in the course of routine healthcare claims processing and adjustments as identified, Non-underwritten healthcare claims greater than \$600, if not collected or offset, are referred to the DHA General Counsel.	Recoupments/refunds occurring in the course of routine healthcare claims processing, healthcare claim adjustments or corrections as identified by
		Require TRICARE private sector regional Contractor perform an assessment of their claims processing system to determine programming errors and make necessary system modification.	On-Track	Mar-21		,		calm adjustments or corrections as identified by civilian providers or TRICARE beneficiaries.
2	Q2 2021				3	Recovery Activity	Annual Cost of Healthcare Audit requires the regional private sector care Contractors to recoup unallowable costs. These costs are extrapolated estimated overpayments to providers. Both regions have recouped unallowable costs for OP2.	Contractual requirement for TRICARE private sector regional Contractors to recoup unallowable costs.

Accomplishments in Reducing Monetary Loss				
1	Due to actions taken by the Contractor, error rates progressively reduced below contractual standard for Q1, Q2, Q3 and Q4 of FY19. Q1 and Q2 of FY20 error rates are also well below the contractual standard of 1.75% at 0.81% and 0.56% respectively.	Mar-21		
2	The Annual Cost of Healthcare Audit recoupments validation for OP2 was completed for both of the TRICARE private sector regional Contractors.			
3	TRICARE private sector regional Contractor deployed Sprints 38, 39, and 40, which delivered 20 system updates to identified issues in claims processing.			

Amt(\$	Root Cause of Monetary Loss	Root Cause Description	Mitigation Strategy	Brief Description of Mitigation Strategy and Anticipated Impact
\$143N	Administrative or process errors made by: others (participating lender, health care provider, or other organization administering Federal dollars)	TRICARE healthcare claim payments were incorrectly processed by Humana, one of our private sector contractors, which consisted of errors such as cost-share/deductible, duplicate payments, inaccurate invoices, and payments made to incorrect payee.	Mitigating strategy is to use mechanism in the contracts to recover erroneous payments.	Full recovery: Overpayments to providers and hospitals will be credited back to the government on future claims payments.