

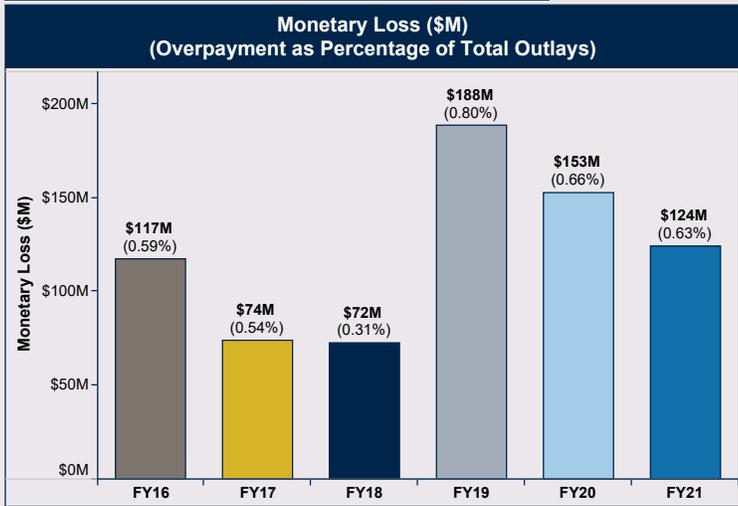
# Payment Integrity Scorecard

<b>Program or Activity</b> Military Health Benefits	<b>Reporting Period</b> Q1 2022
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<b>Change from Previous FY (\$M)</b>	<b>-\$29M</b>	
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**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 Milestones		Status	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	Oct-24
7	Identified any data needs for mitigation	Completed	Jun-21

Goals towards Reducing Monetary Loss			Status	ECD
1	Q1 2022	Create an initial SOP to review payment errors at the completion of each 2nd rebuttal of the compliance reviews. Create templates that will relay root cause findings and recommendations to Contracting Officers and their representatives.	On-Track	Apr-22
2	Q1 2022	Continue to pull samples and audit existing samples for the FY21 outlays of administrative costs to report in the next AFR.	On-Track	Oct-22

Recovery Method	Brief Description of Plans to Recover Overpayments	Brief Description of Actions Taken to Recover Overpayments
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.	Incremental compliance reviews conducted by an External Independent Contractor.
2 Recovery Activity	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.	Contract and policy requirements for private sector contractors to recover improper payments.
3 Recovery Activity	Annual Cost of Healthcare Audit requires regional Contractors to recoup unallowable costs. Costs are extrapolated est. overpayments to providers. Regions have a finalized un-allowed cost determination and is being validated and finalized currently.	Annual Cost of Healthcare Audit

Accomplishments in Reducing Monetary Loss		Date
1	Pulled second set of samples for CAP-DME. Independent auditors will begin auditing these samples for PIIA compliance and develop an SOP that will cover these types of payments.	Jan-22
2	Refining the recordable mechanism for root causes of payment errors and trends. External claims reviewer will provide findings, and finalized reviews will be analyzed to provide summary and rec's to contracting, their rep's and others to address	Jan-22
3	The Annual Cost of Healthcare Audits for OP3 of the managed care contracts are both complete. East contract was notified to provide proof of recoupments and has done so. West contract is in the process of being notified of recoupment amount.	Jan-22

Amt(\$)	Root Cause of Monetary Loss	Root Cause Description	Mitigation Strategy	Brief Description of Mitigation Strategy and Anticipated Impact
\$124M	Overpayments within agency control that occurred because of a Failure to Access Data/Information Needed.	Root cause stems from errors including, but not limited to, Long Term Care Facility or Skilled Nursing Facility Per Diem Rates Miscalculated, DRG Reimbursement Errors, Duplicate Payments, and Provider Discount Rates Miscalculated/Not Applied.	Change Process altering or updating a process or policy to prevent or correct error.	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.

**Monetary Loss** - Monetary loss to the Government includes amounts that should not have been paid and in theory should/could be recovered.