



STATE OF NEW YORK
OFFICE OF THE MEDICAID INSPECTOR GENERAL
445 Hamilton Avenue, Suite 506
White Plains, New York 10601

ANDREW M. CUOMO
GOVERNOR

JAMES C. COX
MEDICAID INSPECTOR GENERAL

July 17, 2013

Ms. Patricia Hollister-Doyle, Executive Director
Search for Change, Inc.
115 East Stevens Avenue, Suite 203
Valhalla, New York 10595-1200

RE: AUDIT SUMMATION
Provider [REDACTED]
Audit #12-6502

Dear Ms. Hollister-Doyle:

The New York State Department of Health is the single state agency responsible for the administration of the medical assistance (Medicaid) program. The Office of the Medicaid Inspector General (OMIG) is an independent office within the Department responsible for a variety of Medicaid program integrity functions. As part of its responsibilities, the OMIG conducts audits and reviews of various providers of Medicaid reimbursable services, equipment and supplies. These audits and reviews are directed at assessing provider compliance with applicable laws, regulations, rules and policies of the Medicaid program as set forth in New York Public Health Law, New York Social Services Law, the regulations of the Department of Health and the Department of Mental Hygiene (Titles 10, 14 and 18 of the Official Compilation of Codes, Rules and Regulations of the State of New York) and the Department's Medicaid Managed Care Model Contract, Medicaid Management Information System (MMIS) Provider Manuals and Medicaid Update publications.

A review of payments to Search for Change, Inc. (the Provider) for Office of Mental Health (OMH) Rehabilitative services paid by Medicaid from January 1, 2008, through December 31, 2010, was recently completed. During the audit period, \$10,197,334.46 was paid for 4,039 claims reimbursed. This review consisted of a random sample of 100 claims with Medicaid payments of \$247,502.07. The purpose of the audit was to determine whether: services were rendered in accordance with the patient's service plan; the agency had sufficient documentation to substantiate billed services; appropriate documentation was maintained in patient and personnel related records; and claims for payment were submitted in accordance with New York State laws, Department regulations and the Provider Manuals for OMH Rehabilitative Services. Our audit revealed that, for the period and scope reviewed, the Provider generally adhered to applicable Medicaid billing rules and regulations.

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Please be advised that pursuant to 18 NYCRR 517.3(h) the OMIG hereby concludes its review related to the above-referenced audit objective and scope. The OMIG has determined that no further action is warranted. We thank you for your continued interest and participation in the Medicaid program.

The OMIG reserves the right to conduct further reviews of your participation in the Medicaid program, take action where appropriate, and recover any associated overpayments. If you have any questions regarding the above, please contact [REDACTED] or by email at [REDACTED]. Thank you for your cooperation.

Sincerely,

[REDACTED]
Division of Medicaid Audit, White Plains
Office of the Medicaid Inspector General

HS/mm

CERTIFIED MAIL 7010 1060 0000 6033 1019
RETURN RECEIPT REQUESTED