



STATE OF NEW YORK
OFFICE OF THE MEDICAID INSPECTOR GENERAL
800 North Pearl Street
Albany, New York 12204

ANDREW M. CUOMO
GOVERNOR

JAMES C. COX
MEDICAID INSPECTOR GENERAL

October 22, 2014

[REDACTED]
Atlantis Rehabilitation and Residential Health Care Facility
140 Saint Edward Street
Brooklyn, New York 11201

Re: Audit Summation
Provider # [REDACTED]
Audit #14-3357

Dear [REDACTED]

The New York State Department of Health (DOH) is the state agency responsible for the administration of the Medicaid program. As part of its responsibility as an entity within DOH, the Office of the Medicaid Inspector General (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 (Titles 10, 14 and 18 of the New York Codes Rules and Regulations), the Department of Health's Medicaid Provider Manuals and *Medicaid Update* publications.

An audit of bed reserve claims paid to Atlantis Rehabilitation and Residential Health Care Facility (the Facility) by Medicaid for service dates included in the period beginning October 1, 2010 through June 30, 2012 was recently completed. The purpose of the audit was to assess the Facility's adherence to Title 18 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (NYCRR) Section 505.9(d). Our audit revealed that, for the period and scope reviewed, the Facility generally adhered to applicable Medicaid billing rules and regulations.

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.

[REDACTED]
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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 through email at [REDACTED]

[REDACTED] Thank you for your cooperation.

Sincerely,

[REDACTED]
Bureau of Medicaid Rate Audit
Office of the Medicaid Inspector General

Certified Mail Number: [REDACTED]
Return Receipt Requested