STATE OF NEW YORK
OFFICE OF THE MEDICAID INSPECTOR GENERAL
221 South Warren Street, Suite 410
Syracuse, New York 13202

ANDREW M. CUOMO
GOVERNOR

JAMES C. COX
MEDICAID INSPECTOR GENERAL

November 16, 2012

[redacted]
Saratoga Hospital
211 Church Street
Saratoga Springs, New York 12866

Re: Final Audit Report
Audit #: 12-2394
Provider #: [redacted]

Dear [redacted]:

This letter constitutes the Office of the Medicaid Inspector General's (OMIG) Final Audit Report of Saratoga Hospital, covering the period of December 1, 2009, through December 31, 2011.

The New York State Department of Health (Department) is the single state agency responsible for the administration of the medical assistance (Medicaid) program. The 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 assess 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.

The OMIG recently completed a review of Medicaid claims for dual eligible Medicare/Medicaid recipients with payment dates from December 1, 2009, to December 31, 2011. Specifically, provider submitted Medicaid claims were matched to the Medicare crossover claim payments generated by the eMedNY computer system. The review identified instances where, based upon claims you submitted to the New York Medicaid program, Medicaid payments you received for a dual eligible recipient were not subsequently voided by the eMedNY system, resulting in potential overpayments to you. The purpose of the audit was to ascertain whether overpayments were made to you.

Per our draft audit report, the amount of the overpayments totals $3,187.00. You did not provide any further documentation in response to the draft report; however, you processed voids and adjustments. OMIG has determined that for the period and scope reviewed, Saratoga Hospital generally adhered to applicable Medicaid billing rules and regulations. The OMIG has concluded that no further action is required pertaining to this audit.

Saratoga Hospital has the right to challenge this action and determination by requesting an administrative hearing within sixty (60) days of the date of this notice. In accordance with 18 NYCRR Section 519.18(a), if Saratoga Hospital wishes to request a hearing, the request must be submitted in writing to:

General Counsel
Office of Counsel
New York State Office of the Medicaid Inspector General
800 North Pearl Street
Albany, New York 12204

Questions regarding the request for a hearing should be directed to Office of Counsel, at

Issues you may raise shall be limited to those issues relating to determinations contained in the Final Audit Report. Further, issues must be limited to those you raised in any written response to the Draft Audit Report. The hearing request may not address issues regarding the methodology used to determine the rate, or any issue that was raised at a proceeding to appeal a rate determination.

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 at or by email at . Thank you for your cooperation.

Sincerely,

Division of Medicaid Audit, Syracuse
Office of the Medicaid Inspector General

CERTIFIED MAIL #
RETURN RECEIPT REQUESTED