



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

Volume 8 No. 58

September 1998

TO: Federally Qualified Health Centers (FQHCs)

SUBJECT: Collection of Overpayments Resulting from FQHC Medicaid Cost Report Settlements

EFFECTIVE: Immediately

BACKGROUND: The Division of Medical Assistance and Health Services (DMAHS) recovers overpayments made to Federally Qualified Health Centers resulting from cost report settlements.

PURPOSE: The purpose of this Newsletter is to formally notify FQHCs of the DMAHS policy regarding collection of overpayments resulting from cost report settlements.

ACTION: DMAHS will begin recovery of overpayments made to FQHCs resulting from cost report settlements thirty days after the date of the provider's receipt of the Notification of Final Settlement. The recoveries will be processed through DMAHS' fiscal agent's claims processing system.

The only exception to this recovery policy will be when a provider files a fully documented appeal within thirty days of the date of notification of overpayment, **and** the appeal identifies the specific items of disagreement and the amount(s) in question, and provides reasons and documentation to support the provider's position. If the appeal contains insufficient information to document the provider's position, recovery will be initiated thirty days after the date of provider notification of final settlement. The provider will be so notified of the denial of the appeal. However, if the appeal requires additional DMAHS review in order to determine if a revision to the settlement is necessary, the collection may be delayed until DMAHS finalizes its' review.

Appeals shall be filed with the Director, Administrative and Financial Services, Division of Medical Assistance and Health Services, Mail Code #23, P.O. Box 712, Trenton, New Jersey 08625-0712 no later than the 180th day following the date of the provider's receipt of the Notification of Final Settlement.

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