

Supporting Documentation

Along with the above information, include any *relevant* supporting documentation for an investigation, which may include:

- Encounter Data/Claims Data for date spans of suspected fraud (starting at first date of service for the period of time that the suspected fraud occurred, with 6 months of run-out after last date of service)
 - Ensure at least the following fields are included in the provided data:
 - ICN
 - Billing Provider NPI
 - Billing Provider ID
 - Rendering Provider Name
 - Rendering Provider ID
 - Client ID
 - Procedure Code
 - Modifiers
 - First Date of Service
 - End Date of Service
 - Units
 - Paid Amount
 - Paid Date
- Care plans for Medicaid clients involved (that were active during the suspected fraud)
- Agreement Between the Contractor and the Provider
- Relevant Medical Record(s)
- Relevant Prior Authorization(s)
- Any research or findings from your analysis that lead to this fraud referral
- Any other relevant documentation not listed here