



STATE OF MARYLAND
DHMH

Maryland Department of Health and Mental Hygiene
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

MEMORANDUM

To: Nursing Home Facilities

From: Division of Recoveries and Financial Services

Re: Quarterly Self-Reporting Process Update

Date: December 14, 2011

We have completed two quarters of the nursing facility self-reporting process. Based on concerns and comments from facilities and DHMH staff, we would like to clarify and refine some portions of the process. Our goal is to make the process more efficient for nursing facilities and DHMH staff who are responsible for processing the work related to quarterly self-reporting.

Effective for the quarterly report due January 31, 2012, facilities may choose one of two ways to report and settle credit balances:

1. Check

If the facility is refunding overpayments by check, they will complete the “Long Term Care Self-Reporting Adjustment Request Form” (See attachment #1). This form will be available on our link at <http://dhmh.maryland.gov/mma/drafts/index.html>. An adjustment reason code has already been entered on the form indicating that all entries on the form are nursing facility self-reporting credit balances. The check will be mailed to the **Division of Recoveries and Financial Services P.O. Box 13045 Baltimore, Maryland 21298-9892 ATTENTION: Patrick Wheeler**. The facility will e-mail the Long Term Care Self-Reporting Adjustment Request Form to the Division of Recoveries at CreditBalanceAudits@dhmh.state.md.us. The check will be matched to the self-reporting adjustment form and forwarded to DHMH adjustment unit for processing. This method will help the DHMH Adjustment Unit identify more clearly nursing home overpayment self-reporting. If this method is used, the current goldenrod Adjustment Request form (ARF) will NOT be necessary for overpayment reporting.

2. Request credit balances be taken back from future payments

If facilities wish the adjustments be taken from future payment payments please complete the goldenrod adjustment request form (ARF). In the space indentifying the adjustment reason code (section D on the ARF) the reason code will be entered add **“/LT”**. This will identify this adjustment as a nursing facility self-report credit balance. The ARF’s are to be mailed to the **Division of Recoveries and Financial Services P.O. Box 13045 Baltimore, Maryland 21298-9892 attention Patrick Wheeler**. The information on the ARF’s is to be entered onto the revised credit balance worksheet (see attachment #2). Some of the columns on the worksheet have been eliminated in order to make it more user friendly for the nursing facilities. The drop down box on the worksheet has also been revised. The adjustment reason codes on the worksheet will now correspond to the adjustment codes on the ARF. The revised worksheet will be available on our web link <http://dhmh.maryland.gov/mma/drafs/index..html> . The worksheet will be e-mailed to the Division of Recoveries at CreditBalanceAudits@dhmh.state.md.us . The division of Recoveries will match the ARF’s with the worksheets and forwarded to DHMH adjustment unit.

All adjustments reported for quarters ending 6/30/2011 and 9/30/2011 will be reviewed to make sure they have been processed correctly.

We hope that theses adjustments to the credit balance self-reporting process will help it to run more efficiently for all involved. Once again thank you for your cooperation.