LOUISIANA MEDICAID PROGRAM

CHAPTER 14: CHILDREN'S CHOICE SECTION 14.9: PROGRAM MONITORING

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PROGRAM MONITORING

Services offered through Louisiana Children's Choice Waiver are closely monitored to assure compliance with Medicaid's policy as well as applicable state and federal regulations. The Department's Health Standards Section (HSS) staff conducts on-site reviews of each provider agency as needed for compliance with licensing regulations.

A provider's failure to follow State licensing standards and Medicaid policies and practices could result in the provider's loss of licensure, removal from Medicaid participation, federal investigation, and prosecution in suspected cases of fraud.

Fraud and Abuse

When HSS staff detects patterns of abusive or fraudulent Medicaid billing, the provider will be referred to the Program Integrity Section of the Medicaid Program for investigation and sanctions, if necessary. Investigations and sanctions may also be initiated from reviews conducted by the Surveillance and Utilization Review System (SURS) of the Medicaid Program. LDH has an agreement with the Office of the Attorney General to investigate Medicaid fraud. The Office of the Inspector General, Federal Bureau of Investigation (FBI), and postal inspectors also conduct investigations of Medicaid fraud.

Quality Management

Direct service providers and support coordination agencies must have a quality enhancement process that involves:

- 1. Learning;
- 2. Responding;
- 3. Implementing; and
- 4. Evaluating.

Agency quality enhancement activities must be reviewed and approved by the regional Office for Citizens with Developmental Disabilities as described in the *Quality Enhancement Provider Handbook*. (See Appendix D for information regarding this handbook).