



# Health Law Diagnosis

## Monitoring the Pulse of Health Care and Life Sciences

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### [Two Pathways for Medicaid Self-Disclosures Announced by OMIG](#)

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The New York Office of the Medicaid Inspector General (OMIG) recently announced updates to its Self-Disclosure Program in response to feedback from Medicaid stakeholders after its revised posting in January 2023. OMIG revised its disclosure process to have two pathways for healthcare providers to report, explain, and return overpayments by creating an “Abbreviated Self-Disclosure Process” in addition to the existing full disclosure process.

New York law requires healthcare entities and providers to report, return, and explain any overpayments of Medicaid funds within the later of (1) sixty (60) days after the date of identification of the overpayment, or (2) the date any corresponding cost report is due, if any. SSL§ 363-D(6)(b). Under this new process, when a healthcare entity or provider identifies an overpayment, it may be able to use the streamlined reporting process if the overpayment results from “routine and transactional errors or meet other defined characteristics and have already been voided or adjusted.” Self-Disclosure Frequently Asked Questions are available [here](#). The Abbreviated Self-Disclosure Process also allows the healthcare entity or provider to aggregate submissions in a monthly report that will be submitted the following month in which the claims were voided or adjusted. OMIG identified the following examples that can be self-disclosed using the Abbreviated Self-Disclosure Process:

- Routine credit balance/coordination of benefits overpayments;
- Typographical human errors;
- Routine Net Available Monthly Income (NAMI) adjustments;
- Instance of missing or faulty authorization for services due to human error;
- Instance of missing or insufficient support documentation due to human error;
- Use of inappropriate rate, procedure, or fee code due to typographical or human error;
- Routine recipient enrollment issue.

OMIG Self-Disclosure Program Requirements: Instructions and Guidelines (Aug. 2023) are available [here](#). While OMIG has indicated that the initial identification steps are the same for identifying the who, what, when, and why, the report that’s required to be filed with OMIG under the Abbreviated Self-Disclosure Program requires significantly less information than the Full-Disclosure process. *Id*; see also Self-Disclosure Frequently Asked Questions are available [here](#). As part of the process, healthcare entities or providers will be required to submit an [abbreviated statement](#) with a fillable spreadsheet that was prepared by OMIG.

OMIG expects that it will start receiving disclosures under the Abbreviated Self-Disclosure Process in October. For those issues that are unsuited for this process, healthcare entities and providers will still use the full disclosure pathway to report.

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