CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET
Region: 03 Philadelphia

Review ID: 7677

MRT Number / Name: M0017 MRT Bravo Health
Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4
Auditing Element: GV03
Review Type: Routine
Review Status: Confirmed
MCO Response Received Date: 10/16/2006
Element Accepted Date: 12/15/2006
Element Release Date: 08/16/2007
CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006
Exit Conference Date: 08/25/2006
Date Report Issued: 09/01/2006
Date Report Due: 10/09/2006
CAP Accepted Date: 04/23/2007
Audit Closed Date: 09/14/2007
Element Projected Completion Date: 06/30/2007
MCO Response Due Date: 10/16/2006

Requirement:

Grievance Decision Notification (Timeliness) The MAO must notify the member of its decisions as expeditiously as the case requires based on the member's health status but no later than 30 days after the receipt date of the oral or written grievance. If the compliant involves an MAO's decision to invoke an extension relating to an organization determination or reconsideration, or the compliant involves an MAO's refusal to grant an enrollee's request for an expedited organization determination or expedited reconsideration, the MAO must respond to an enrollee's grievance within 24 hours. Exception: If the member requests an extension, or if the MAO justifies the need for information and documents that the delay is in the interest of the member, the MAO may extend the 30-day timeframe up to an additional 14 days. In this case, the MAO must immediately notify the member in writing of the reasons for the delay.

Deficiencies:

In four of fifteen cases the MAO did not process the grievance timely.

Corrective Action Required:

The MAO must process grievances within the required timeframe. In addition, the MAO must conduct a self-audit monthly of at least five Grievances, including completing the WS-GV1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 08/16/2007

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/23/2007

Element Release Date: 07/31/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

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CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Grievance Decision Notification (Notice Content) The MAO must inform the member of the disposition of the grievance. For quality of care issues, the MAO must also include a description of the member's right to file a written compliant with the QIO.

Deficiencies:

In seven of fifteen cases, the MAO did not properly all issues raised by the member.

Corrective Action Required:

The MAO must properly address all issues raised in the grievance. In addition, the MAO must conduct a self-audit monthly of at least five Grievances, including completing the WS-GV1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/23/2007

Element Release Date: 07/31/2007

CAP Released Date: 09/14/2007

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/23/2007

Element Release Date: 07/31/2007

CAP Released Date: 09/14/2007

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: GV04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/23/2007

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 11/13/2006

Element Release Date: 07/31/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

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Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Appropriate Submission and Distribution of Marketing Materials -The MAO follows the requirements contained in the regulations and the Medicare Guidelines for submission and distribution of marketing materials, including appropriate timelines and content of model, non-model, and File & Use materials.

Deficiencies:

During the review period 67% of materials submitted were disapproved.

Corrective Action Required:

The MAO must follow CMS' marketing guidelines when submitting materials.

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 11/13/2006

Element Release Date: 07/31/2007

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Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

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Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR01

Review Type: Routine

Review Status: Confirmed

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Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR05

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 02/16/2007

Element Release Date: 02/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

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Audit Closed Date: 09/14/2007

Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Marketing Materials: Enrollment and Understanding of Plan Rules - The MAO establishes and maintains a system for confirming that enrolled members are enrolled in an MA plan and that they understand the rules applicable under the plan.

Deficiencies:

The MAO has not established a system for confirming that enrolled members are enrolled in the MA plan and that they understand the rules applicable under the plan.

Corrective Action Required:

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Auditing Element: MR05

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Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR05

Review Type: Routine

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Region: 03 Philadelphia

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Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR05

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Review Status: Confirmed

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Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR10

Review Type: Routine

Review Status: Confirmed

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MCO Response Due Date: 10/16/2006

Requirement:

Materials Provided For Significant Non-English Speaking Population - For markets with a significant non-English speaking population, the MAO provides materials in the language of these individuals.

Deficiencies:

The MAO does not provide materials for significant Non-English speaking population.

Corrective Action Required:

The MAO must develop materials for the significant Non-English speaking population in the Texas market.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR10

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Materials Provided For Significant Non-English Speaking Population - For markets with a significant non-English speaking population, the MAO provides materials in the language of these individuals.

Deficiencies:

The MAO does not provide materials for significant Non-English speaking population.

Corrective Action Required:

The MAO must develop materials for the significant Non-English speaking population in the Texas market.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR10

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Materials Provided For Significant Non-English Speaking Population - For markets with a significant non-English speaking population, the MAO provides materials in the language of these individuals.

Deficiencies:

The MAO does not provide materials for significant Non-English speaking population.

Corrective Action Required:

The MAO must develop materials for the significant Non-English speaking population in the Texas market.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: MR10

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Materials Provided For Significant Non-English Speaking Population - For markets with a significant non-English speaking population, the MAO provides materials in the language of these individuals.

Deficiencies:

The MAO does not provide materials for significant Non-English speaking population.

Corrective Action Required:

The MAO must develop materials for the significant Non-English speaking population in the Texas market.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/03/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reasonable Reimbursement for Covered Services - The MAO must provide reasonable reimbursement for: Services obtained from a non-contracting provider when the services were authorized by a contracted provider or the MAO, Ambulance services dispatched through 911, Emergency services, Urgently needed services, Post-stabilization care services, Renal dialysis services that Medicare members obtain while temporarily out of the service area, and Services for which coverage has been denied by the MAO but found to be services the member was entitled to upon appeal.

Deficiencies:

Based on a complaint received in our office, the MAO is not making reasonable reimbursement for covered services.

Corrective Action Required:

The MAO must make timely and reasonable payment to, or on behalf of the plan enrollee from a provider or supplier that does not contract with the MAO to provide services covered by the MA plan.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/03/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reasonable Reimbursement for Covered Services - The MAO must provide reasonable reimbursement for: Services obtained from a non-contracting provider when the services were authorized by a contracted provider or the MAO, Ambulance services dispatched through 911, Emergency services, Urgently needed services, Post-stabilization care services, Renal dialysis services that Medicare members obtain while temporarily out of the service area, and Services for which coverage has been denied by the MAO but found to be services the member was entitled to upon appeal.

Deficiencies:

Based on a complaint received in our office, the MAO is not making reasonable reimbursement for covered services.

Corrective Action Required:

The MAO must make timely and reasonable payment to, or on behalf of the plan enrollee from a provider or supplier that does not contract with the MAO to provide services covered by the MA plan.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/03/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reasonable Reimbursement for Covered Services - The MAO must provide reasonable reimbursement for: Services obtained from a non-contracting provider when the services were authorized by a contracted provider or the MAO, Ambulance services dispatched through 911, Emergency services, Urgently needed services, Post-stabilization care services, Renal dialysis services that Medicare members obtain while temporarily out of the service area, and Services for which coverage has been denied by the MAO but found to be services the member was entitled to upon appeal.

Deficiencies:

Based on a complaint received in our office, the MAO is not making reasonable reimbursement for covered services.

Corrective Action Required:

The MAO must make timely and reasonable payment to, or on behalf of the plan enrollee from a provider or supplier that does not contract with the MAO to provide services covered by the MA plan.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/03/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reasonable Reimbursement for Covered Services - The MAO must provide reasonable reimbursement for: Services obtained from a non-contracting provider when the services were authorized by a contracted provider or the MAO, Ambulance services dispatched through 911, Emergency services, Urgently needed services, Post-stabilization care services, Renal dialysis services that Medicare members obtain while temporarily out of the service area, and Services for which coverage has been denied by the MAO but found to be services the member was entitled to upon appeal.

Deficiencies:

Based on a complaint received in our office, the MAO is not making reasonable reimbursement for covered services.

Corrective Action Required:

The MAO must make timely and reasonable payment to, or on behalf of the plan enrollee from a provider or supplier that does not contract with the MAO to provide services covered by the MA plan.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Timely Payment of Non-Contracting Provider Clean Claims - The MAO must pay 95 percent of "clean" claims from non-contracting providers within 30 calendar days of receipt.

Deficiencies:

Six of fifty-six (including five from your delegated entity) clean claims were not paid timely to Non-Contracting providers.

Corrective Action Required:

The MAO's delegated entity must timely pay Non-Contracted provider clean claims within thirty days. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted Provider Paid Claims processed by your delegated entity, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Timely Payment of Non-Contracting Provider Clean Claims - The MAO must pay 95 percent of "clean" claims from non-contracting providers within 30 calendar days of receipt.

Deficiencies:

Six of fifty-six (including five from your delegated entity) clean claims were not paid timely to Non-Contracting providers.

Corrective Action Required:

The MAO's delegated entity must timely pay Non-Contracted provider clean claims within thirty days. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted Provider Paid Claims processed by your delegated entity, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Timely Payment of Non-Contracting Provider Clean Claims - The MAO must pay 95 percent of "clean" claims from non-contracting providers within 30 calendar days of receipt.

Deficiencies:

Six of fifty-six (including five from your delegated entity) clean claims were not paid timely to Non-Contracting providers.

Corrective Action Required:

The MAO's delegated entity must timely pay Non-Contracted provider clean claims within thirty days. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted Provider Paid Claims processed by your delegated entity, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Timely Payment of Non-Contracting Provider Clean Claims - The MAO must pay 95 percent of "clean" claims from non-contracting providers within 30 calendar days of receipt.

Deficiencies:

Six of fifty-six (including five from your delegated entity) clean claims were not paid timely to Non-Contracting providers.

Corrective Action Required:

The MAO's delegated entity must timely pay Non-Contracted provider clean claims within thirty days. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted Provider Paid Claims processed by your delegated entity, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Interest on Clean Claims Paid Late - If the MAO pays clean claims from non-contracting providers in over 30 calendar days, it must pay interest in accordance with § 1816 (c)(2)(B) and § 1842 (c)(2)(B).

Deficiencies:

Interest payment on six of seven (including five from your delegated entity) claims was incorrect.

Corrective Action Required:

The MAO must pay the correct interest amount on all clean claims processed over thirty days. In addition, the MAO must conduct a self-audit monthly of at least five clean claims from Non-contracted provider, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Interest on Clean Claims Paid Late - If the MAO pays clean claims from non-contracting providers in over 30 calendar days, it must pay interest in accordance with § 1816 (c)(2)(B) and § 1842 (c)(2)(B).

Deficiencies:

Interest payment on six of seven (including five from your delegated entity) claims was incorrect.

Corrective Action Required:

The MAO must pay the correct interest amount on all clean claims processed over thirty days. In addition, the MAO must conduct a self-audit monthly of at least five clean claims from Non-contracted provider, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Interest on Clean Claims Paid Late - If the MAO pays clean claims from non-contracting providers in over 30 calendar days, it must pay interest in accordance with § 1816 (c)(2)(B) and § 1842 (c)(2)(B).

Deficiencies:

Interest payment on six of seven (including five from your delegated entity) claims was incorrect.

Corrective Action Required:

The MAO must pay the correct interest amount on all clean claims processed over thirty days. In addition, the MAO must conduct a self-audit monthly of at least five clean claims from Non-contracted provider, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Interest on Clean Claims Paid Late - If the MAO pays clean claims from non-contracting providers in over 30 calendar days, it must pay interest in accordance with § 1816 (c)(2)(B) and § 1842 (c)(2)(B).

Deficiencies:

Interest payment on six of seven (including five from your delegated entity) claims was incorrect.

Corrective Action Required:

The MAO must pay the correct interest amount on all clean claims processed over thirty days. In addition, the MAO must conduct a self-audit monthly of at least five clean claims from Non-contracted provider, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC05

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Timely Adjudication of Non-Clean Claims - The MAO must pay or deny all non-contracted claims that do not meet the definition of "clean claims" within 60 calendar days of receipt.

Deficiencies:

The MAO did not timely adjudicate six of fifty-four claims within sixty days.

Corrective Action Required:

The MAO must adjudicate non-clean claims from Non-Contracted providers within sixty days. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted provider paid claims, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC05

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Timely Adjudication of Non-Clean Claims - The MAO must pay or deny all non-contracted claims that do not meet the definition of "clean claims" within 60 calendar days of receipt.

Deficiencies:

The MAO did not timely adjudicate six of fifty-four claims within sixty days.

Corrective Action Required:

The MAO must adjudicate non-clean claims from Non-Contracted providers within sixty days. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted provider paid claims, including completing the WS-OC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC05

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC05

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

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Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Claim Denials (Notice Content) - If an MAO denies payment, the written denial notice (CMS-10003-Notice of Denial of Payment (NDP)), or an RO-approved modification of the NDP, must be sent to the member. The written denial must clearly state the service denied and the denial reason.

Deficiencies:

The MAO did not distribute the correct CMS approved denial notice to the member in eighteen of forty-eight cases.

Corrective Action Required:

The MAO must use the CMS approved denial notice. In addition, the MAO must conduct a self-audit monthly of at least five Non-contracted denied provider claims, including completing the WS-OC2 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OC06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

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Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Requests for Expedited Organization Determinations (Timeliness) - The MAO must promptly decide whether to expedite an organization determination based on regulatory requirements. If the MAO decides not to expedite an organization determination, it must automatically transfer the request to the standard timeframe, provide oral notice to the member of the decision not to expedite within 72 hours of receipt of the request for an expedited organization determination, and provide written notice within 3 calendar days of the oral notice. If the MAO makes an expedited organization determination (favorable or adverse), it must notify the member in writing as expeditiously as the member's health requires, but no later than 72 hours after receiving the request (or an additional 14 calendar days if an extension is justified). If the MAO first notifies the member of its expedited determination orally, it must mail written confirmation to the member within 3 calendar days of the oral notification.

Deficiencies:

The MAO's delegated entity did not process eight out of eight cases timely.

Corrective Action Required:

The MAO must process requests for Expedited Organization Determinations timely. In addition, the MAO must conduct a self-audit monthly of at least five Requests for Expedited Organization Determinations, including completing the WS-OP2 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP04

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 09/14/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 05/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Organization Determination Extensions (Notice Content) - If an extension is granted for an organization determination, the written notice to the member must include the reasons for the delay, and inform the member of the right to file an expedited grievance if he or she disagrees with the decision to grant an extension.

Deficiencies:

The MAO does not have a written notice template for Organization Determination Extensions.

Corrective Action Required:

The MAO must develop a written notice template for Organization Determination Extensions.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

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MCO Response Due Date: 10/16/2006

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Review ID: 7677

Region: 03 Philadelphia

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Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

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MCO Response Due Date: 10/16/2006

Requirement:

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Deficiencies:

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Corrective Action Required:

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Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

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MCO Response Due Date: 10/16/2006

Requirement:

Organization Determination Extensions (Notice Content) - If an extension is granted for an organization determination, the written notice to the member must include the reasons for the delay, and inform the member of the right to file an expedited grievance if he or she disagrees with the decision to grant an extension.

Deficiencies:

The MAO does not have a written notice template for Organization Determination Extensions.

Corrective Action Required:

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

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MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP07

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

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Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Decision Not to Expedite an Organization Determination (Notice Content) - If the MAO decides not to expedite an organization determination, the notice to the member of the decision not to expedite must explain that the MAO will process the request using the 14-day standard timeframe, inform the member of the right to file an expedited grievance if he or she disagrees with the decision not to expedite, inform the member of the right to resubmit a request for an expedited determination with any physician's support, and provide instructions about the MAO grievance process and its timeframes.

Deficiencies:

The MAO does not have a written notice of Decision Not to Expedite an Organization Determination.

Corrective Action Required:

The MAO must develop a notice for cases in which the decision was not to expedite the Organization Determination.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

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MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

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Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP07

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Decision Not to Expedite an Organization Determination (Notice Content) - If the MAO decides not to expedite an organization determination, the notice to the member of the decision not to expedite must explain that the MAO will process the request using the 14-day standard timeframe, inform the member of the right to file an expedited grievance if he or she disagrees with the decision not to expedite, inform the member of the right to resubmit a request for an expedited determination with any physician's support, and provide instructions about the MAO grievance process and its timeframes.

Deficiencies:

The MAO does not have a written notice of Decision Not to Expedite an Organization Determination.

Corrective Action Required:

The MAO must develop a notice for cases in which the decision was not to expedite the Organization Determination.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP07

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Decision Not to Expedite an Organization Determination (Notice Content) - If the MAO decides not to expedite an organization determination, the notice to the member of the decision not to expedite must explain that the MAO will process the request using the 14-day standard timeframe, inform the member of the right to file an expedited grievance if he or she disagrees with the decision not to expedite, inform the member of the right to resubmit a request for an expedited determination with any physician's support, and provide instructions about the MAO grievance process and its timeframes.

Deficiencies:

The MAO does not have a written notice of Decision Not to Expedite an Organization Determination.

Corrective Action Required:

The MAO must develop a notice for cases in which the decision was not to expedite the Organization Determination.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP07

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

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Element Projected Completion Date: 08/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Decision Not to Expedite an Organization Determination (Notice Content) - If the MAO decides not to expedite an organization determination, the notice to the member of the decision not to expedite must explain that the MAO will process the request using the 14-day standard timeframe, inform the member of the right to file an expedited grievance if he or she disagrees with the decision not to expedite, inform the member of the right to resubmit a request for an expedited determination with any physician's support, and provide instructions about the MAO grievance process and its timeframes.

Deficiencies:

The MAO does not have a written notice of Decision Not to Expedite an Organization Determination.

Corrective Action Required:

The MAO must develop a notice for cases in which the decision was not to expedite the Organization Determination.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP12

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Detailed Explanation of Non-Coverage of Provider Services (Timeliness) -- The MAO (upon notification by the QIO that an enrollee has filed a request for a fast-track appeal) must send a detailed notice to the enrollee by the close of business of the day the QIO notification is received.

Deficiencies:

The Detailed Explanation of Non-Coverage of Provider Services was not timely in five out of ten cases.

Corrective Action Required:

The MAO must send the Detailed Explanation of Non-Coverage of Provider Services timely. In addition, the MAO must conduct a self-audit monthly of at least five QIO Review of Termination of Services, including completing the WS-OP5 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP12

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP12

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

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Requirement:

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP12

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Detailed Explanation of Non-Coverage of Provider Services (Timeliness) -- The MAO (upon notification by the QIO that an enrollee has filed a request for a fast-track appeal) must send a detailed notice to the enrollee by the close of business of the day the QIO notification is received.

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP13

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Detailed Notice of Non-Coverage of Provider Services (Notice Content) - The MAO must include in the Detailed Notice of Non-Coverage of Provider Services an explanation as to why the provider services are no longer reasonable or necessary, or are no longer covered; the applicable Medicare rule, instruction or policy including citations, and how the enrollee may obtain copies of such documents; and other facts or information relevant to the non-coverage decision.

Deficiencies:

In nine of ten cases the MAO did not use the correct Detailed Explanation of Non-Coverage of Provider Services (CMS-10095-B).

Corrective Action Required:

The MAO must use the correct Detailed Explanation of Non-Coverage of Provider Services (CMS-10095-B). In addition, the MAO must conduct a self-audit monthly of at least five QIO Review of Termination of Services, including completing the WS-OP5 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP13

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP13

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

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Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: OP13

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

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Detailed Notice of Non-Coverage of Provider Services (Notice Content) - The MAO must include in the Detailed Notice of Non-Coverage of Provider Services an explanation as to why the provider services are no longer reasonable or necessary, or are no longer covered; the applicable Medicare rule, instruction or policy including citations, and how the enrollee may obtain copies of such documents; and other facts or information relevant to the non-coverage decision.

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: PR03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Credentialing Requirements for Physicians and Other Health Care Professionals - The MAO must follow a documented process for physicians and other health care professionals regarding initial credentialing and recredentialing.

Deficiencies:

The MAO does not review the Medicare Opt Out list during the initial or recredentialing process.

Corrective Action Required:

The MAO must establish policies and procedures to review the Medicare Opt Out list during the initial and recredentialing process. In addition, the MAO must conduct a self-audit monthly of at least five initial and/or recredentialing files, including completing the WS-PR1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: PR03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Credentialing Requirements for Physicians and Other Health Care Professionals - The MAO must follow a documented process for physicians and other health care professionals regarding initial credentialing and recredentialing.

Deficiencies:

The MAO does not review the Medicare Opt Out list during the initial or recredentialing process.

Corrective Action Required:

The MAO must establish policies and procedures to review the Medicare Opt Out list during the initial and recredentialing process. In addition, the MAO must conduct a self-audit monthly of at least five initial and/or recredentialing files, including completing the WS-PR1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: PR03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

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Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

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Deficiencies:

The MAO does not review the Medicare Opt Out list during the initial or recredentialing process.

Corrective Action Required:

The MAO must establish policies and procedures to review the Medicare Opt Out list during the initial and recredentialing process. In addition, the MAO must conduct a self-audit monthly of at least five initial and/or recredentialing files, including completing the WS-PR1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: PR03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

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Element Projected Completion Date: 07/31/2007

MCO Response Due Date: 10/16/2006

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Deficiencies:

The MAO does not review the Medicare Opt Out list during the initial or recredentialing process.

Corrective Action Required:

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Favorable Claims Reconsiderations (Timeliness) - If the MAO makes a reconsidered determination on a request for payment that is completely favorable to the member, it must issue written notice of its reconsidered determination to the member and pay the claim no later than 60 calendar days after receiving the reconsideration request.

Deficiencies:

The MAO did not process nine out of ten Favorable Claims Reconsiderations timely.

Corrective Action Required:

The MAO must process Favorable Claims Reconsiderations in a timely manner. In addition, the MAO must conduct a self-audit monthly of at least five Favorable Claims Reconsiderations, including completing the WS-RC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Favorable Claims Reconsiderations (Timeliness) - If the MAO makes a reconsidered determination on a request for payment that is completely favorable to the member, it must issue written notice of its reconsidered determination to the member and pay the claim no later than 60 calendar days after receiving the reconsideration request.

Deficiencies:

The MAO did not process nine out of ten Favorable Claims Reconsiderations timely.

Corrective Action Required:

The MAO must process Favorable Claims Reconsiderations in a timely manner. In addition, the MAO must conduct a self-audit monthly of at least five Favorable Claims Reconsiderations, including completing the WS-RC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Favorable Claims Reconsiderations (Timeliness) - If the MAO makes a reconsidered determination on a request for payment that is completely favorable to the member, it must issue written notice of its reconsidered determination to the member and pay the claim no later than 60 calendar days after receiving the reconsideration request.

Deficiencies:

The MAO did not process nine out of ten Favorable Claims Reconsiderations timely.

Corrective Action Required:

The MAO must process Favorable Claims Reconsiderations in a timely manner. In addition, the MAO must conduct a self-audit monthly of at least five Favorable Claims Reconsiderations, including completing the WS-RC1 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 12/15/2006

Element Release Date: 08/16/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

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Element Projected Completion Date: 01/31/2007

MCO Response Due Date: 10/16/2006

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Deficiencies:

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Corrective Action Required:

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Adverse Claims Reconsiderations (Timeliness) - If the MAO affirms, in whole or in part, its adverse organization determination, or fails to provide the member with a reconsideration determination within 60 days of receipt of the request (which constitutes an affirmation of its adverse organization determination), it must forward the case to CMS' independent review entity no later than 60 calendar days after receiving the reconsideration request. The MAO concurrently notifies the member that it has forwarded the case to CMS' independent review entity.

Deficiencies:

The MAO did not process eight out of eight Adverse Claims Reconsiderations timely.

Corrective Action Required:

The MAO must process Adverse Claims Reconsiderations timely. In addition, the MAO must conduct a self-audit monthly of at least five Unfavorable Claims Reconsiderations, including completing the WS-RC2 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

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MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC02

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Effectuation of Third Party Claims Reconsideration Reversals - If the MAO's determination is reversed in whole or in part by the independent review entity, the MAO must pay for the service no later than 30 calendar days from the date it receives the notice reversing the organization determination. The MAO must also inform the independent review entity that the organization has effectuated the decision.If the MAO's determination is reversed in whole or in part by an ALJ, or at a higher level of appeal, the MAO must authorize or provide the service under dispute as expeditiously as the member's health requires, but no later than 60 days from the date it received notice of the reversal.

Deficiencies:

The MAO did not effectuate one out of one Third -Party Claims Reconsideration Reversals timely.

Corrective Action Required:

The MAO must effectuate Third-Party Claims Reconsideration Reversals timely. In addition, the MAO must conduct a self-audit monthly of at least five Unfavorable Claims Reconsiderations, including completing the WS-RC2 worksheet until you come into compliance with CMS' requirements. The report of findings must be submitted to CMS by the 15th of each month. The first report will be due October 15, 2006 for the self-audit conducted in the month of September 2006.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

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Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Effectuation of Third Party Claims Reconsideration Reversals - If the MAO's determination is reversed in whole or in part by the independent review entity, the MAO must pay for the service no later than 30 calendar days from the date it receives the notice reversing the organization determination. The MAO must also inform the independent review entity that the organization has effectuated the decision.If the MAO's determination is reversed in whole or in part by an ALJ, or at a higher level of appeal, the MAO must authorize or provide the service under dispute as expeditiously as the member's health requires, but no later than 60 days from the date it received notice of the reversal.

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RC03

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 01/10/2007

Element Release Date: 08/24/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 06/30/2007

MCO Response Due Date: 10/16/2006

Requirement:

Effectuation of Third Party Claims Reconsideration Reversals - If the MAO's determination is reversed in whole or in part by the independent review entity, the MAO must pay for the service no later than 30 calendar days from the date it receives the notice reversing the organization determination. The MAO must also inform the independent review entity that the organization has effectuated the decision.If the MAO's determination is reversed in whole or in part by an ALJ, or at a higher level of appeal, the MAO must authorize or provide the service under dispute as expeditiously as the member's health requires, but no later than 60 days from the date it received notice of the reversal.

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 03/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Decision Not to Expedite a Reconsideration (Notice Content) - If the MAO decides not to expedite a reconsideration, the notice to the member of the decision not to expedite must explain that the MAO will process the request using the standard timeframe, inform the member of the right to file a grievance if he or she disagrees with the decision not to expedite, inform the member of the right to resubmit a request for an expedited reconsideration with any physician's support, and provide instructions about the MAO grievance process and its timeframes.

Deficiencies:

The MAO does not have a written notice template for Decisions Not to Expedite a Reconsideration.

Corrective Action Required:

The MAO must develop a written notice template for Decisions Not to Expedite a Reconsideration.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

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Element Projected Completion Date: 03/31/2007

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Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

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Element Projected Completion Date: 03/31/2007

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MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP06

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

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CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H4528 BRAVO HEALTH TEXAS, INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP08

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 03/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reconsideration Extensions (Notice Content) - If the MAO grants an extension on a reconsideration, the written notice to the member must include the reasons for the delay, and inform the member of the right to file a grievance if he or she disagrees with the decision to grant an extension.

Deficiencies:

The MAO does not have a notice template for Reconsideration Extensions.

Corrective Action Required:

The MAO must develop a written notice template for Reconsideration Extensions.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H2108 BRAVO HEALTH MID- ATLANTIC INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP08

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 03/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reconsideration Extensions (Notice Content) - If the MAO grants an extension on a reconsideration, the written notice to the member must include the reasons for the delay, and inform the member of the right to file a grievance if he or she disagrees with the decision to grant an extension.

Deficiencies:

The MAO does not have a notice template for Reconsideration Extensions.

Corrective Action Required:

The MAO must develop a written notice template for Reconsideration Extensions.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3972 ELDER HEALTH PENNSYLVANIA, INC

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP08

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

Date Report Issued: 09/01/2006

Date Report Due: 10/09/2006

CAP Accepted Date: 04/23/2007

Audit Closed Date: 09/14/2007

Element Projected Completion Date: 03/31/2007

MCO Response Due Date: 10/16/2006

Requirement:

Reconsideration Extensions (Notice Content) - If the MAO grants an extension on a reconsideration, the written notice to the member must include the reasons for the delay, and inform the member of the right to file a grievance if he or she disagrees with the decision to grant an extension.

Deficiencies:

The MAO does not have a notice template for Reconsideration Extensions.

Corrective Action Required:

The MAO must develop a written notice template for Reconsideration Extensions.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

MRT Number: M0017, Contract Number: All, Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 7677

Region: 03 Philadelphia

MRT Number / Name: M0017 MRT Bravo Health

Contract Number / Name: H3949 BRAVO HEALTH PENNSYLVANIA INC.

Auditing Guide Version: MA Audit Review Guide, Version 4

Auditing Element: RP08

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date: 10/16/2006

Element Accepted Date: 04/20/2007

Element Release Date: 04/23/2007

CAP Released Date: 09/14/2007

Visit Start Date: 08/21/2006

Exit Conference Date: 08/25/2006

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MCO Response Due Date: 10/16/2006

Requirement:

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Corrective Action Required:

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