

# INTRODUCTION

Kimberly R. Pugh, R.N., M.S.Ed

Centers for Medicare & Medicaid  
Services (CMS)

Baltimore, Maryland

# OBJECTIVES

1. Provide an overview of the Harkin Grantee Project and Complaint Tracking System.
2. Discuss the Aggregate Reports.

# OBJECTIVES

3. Discuss the Program Memorandums and Manual.
4. Discuss the current results of the tracking system.

# PROJECT GOALS

The HGTS is a tool designed by the CMS staff to support our partnership with the Administration on Aging (AOA), Department of Health & Human Services (DHHS), and the Office of Inspector General (OIG).

# PROJECT GOALS

The HGTS is designed to help monitor and report Harkin Grantee generated complaints.

# Program Memorandums

CR 1715 Harkin Grantees:  
Complaint Tracking System

CR 1983 Harkin Grantees:  
Aggregate Report Dates

# PROGRAM INTEGRITY MANUAL (PIM)

Program Memorandum CR 1715  
will be noted in the PIM this month  
in Chapter 2 sections 7.0 – 7.4

# SYSTEM DESCRIPTION

The HGTS is housed on a CMS server and is protected by an authorized user logon.

CMS intermediary and carrier staff are responsible for entering and updating data information related to Harkin generated complaints.



# SYSTEM DESCRIPTION

Only CMS staff and the contractors have access to the tracking system.

No beneficiary information is on the system in order to protect privacy.

# HARKIN GRANTEE ROLE

The Harkin Grantees are responsible for sending the contractors all necessary information pertaining to the complaints (See model complaint form).

# HARKIN GRANTEE ROLE

Overall the reporting is being done well; however, the information needs to be provided in a complete manner (Refer to model complaint form).

Keep hard copies of all complaints.

# HGTS DATA

Based upon the information from the complaint referral, the contractor inputs the following data into the HGTS and generates an aggregate report.

# HGTS DATA INPUT

Date of initial entry, provider number, provider address, city, state and telephone number, project number, Medicare contractor number, overpayment identified, overpayment recovered, Fraud investigation database number (FID #), administrative action taken and explanation of action.

# AGGREGATE REPORTS

After the contractor compiles the database information into an aggregate report, then this report is distributed to the Harkin Grantee State Project Coordinators every six months.

# REPORT DATES

Aggregate Reports are submitted within the second week of July (covering data between January – June).

Submitted the second week of January (covering data between July – December).

# CURRENT DATA

January 2001 – August 2002

Total Complaints = 406

Total Resolved Complaints = 226



# FINANCIAL PERSPECTIVE

Total amount disputed \$435,092

Total amount recovered \$97,007

Outstanding balance \$338,085

# CMS CONTACTS

Kimberly R. Pugh, R.N.

Health Insurance Specialist

[Kpugh@cms.hhs.gov](mailto:Kpugh@cms.hhs.gov)

(410) 786-9212

# CMS CONTACTS

Scott Wakefield

Health Insurance Specialist

[Swakefield@cms.hhs.gov](mailto:Swakefield@cms.hhs.gov)

(410) 786-4301

Binh Nguyen

Systems Specialist

[Bnguyen@cms.hhs.gov](mailto:Bnguyen@cms.hhs.gov)

(410) 786-3682