



Pascua Yaqui TRBHA
CENTERED SPIRIT PROGRAM
Provider Manual - 2023



Section 7.1 **Fraud and Abuse Reporting**

- I. Statement of Purpose
- II. References
- III. Standards
- IV. Procedures
 - A. Reporting of fraud and abuse involving Title XIX/XXI funds or AHCCCS registered providers and recipients.
 - B. Reporting of fraud and abuse involving non-Title XIX/XXI funds or AHCCCS registered providers or other providers and recipients.
 - C. Reporting of fraud and abuse to the TRBHA

I. STATEMENT OF PURPOSE:

The reporting of suspected fraud and program abuse is a requirement of the Arizona Health Care Cost Containment System (AHCCCS) Corporate Compliance Program. Under those requirements, Tribal Regional Behavioral Health Authorities (TRBHAs) and their subcontract providers are required to immediately notify the AHCCCS Office of the Inspector General (OIG) and AHCCCS Bureau of Corporation Compliance (BCC) regarding any suspected fraud or program abuse involving AHCCCS, federal or state funds. AHCCCS/BCC works closely with AHCCCS/OIG to address any referrals reported by providers in order to improve the system and promote accountability. This section does not include reporting of physical and sexual abuse regarding persons who have been determined to have a Serious Mental Illness (SMI) (see *Section 7.4, Reporting of Incidents, Accidents and Deaths*, which contains information for reporting abuse of persons determined to be SMI).

The Pascua Yaqui (PY) Centered Spirit Program (CSP) passed a formal resolution to establish a corporate responsibility program in 1999. Under that resolution the program delegated the CSP Behavioral Health Director as the corporate compliance officer. These standards set forth the mechanisms for detection and reporting of potential fraud and abuse to avoid the misappropriation of federal, state and local funds. As CSP functions as a TRBHA, fraud is considered an act of intentional deception or misrepresentation committed by a person or behavioral health provider to gain an unauthorized benefit. Abuse committed by a behavioral health provider under this standard refers to activities that are inconsistent with standard fiscal business or medical practices and that result in unnecessary costs to the AHCCCS programs. Persons receiving care in the public health care system can also commit acts of abuse (e.g., by loaning or selling their AHCCCS identification card).

CSP and its subcontracted providers must be cognizant of potential fraud and abuse within the public health system. When detected, behavioral health providers are obligated to report such occurrences to the appropriate TRBHA or state entity. Fraud and abuse can result in the misuse of federal or state funds, can jeopardize the care and treatment of persons receiving behavioral health services and can result in monetary fines, criminal prosecution, the termination of providers and prohibition from participation in Centers for Medicaid and Medicare Services (CMS) programs.



This section outlines the procedures for behavioral health providers to report potential cases of fraud and/or abuse.

II. **REFERENCES:**

The following PY/CSP Provider Manual section can serve as an additional resource for this content area:

Section 7.4, Reporting of Incidents, Accidents and Deaths

The following citations and AHCCCS document also serve as resources for this content area:

42 CFR 438.608

A.R.S. § 36-2918.01

A.R.S. § 13-2310

AHCCCS/TRBHA Intergovernmental Agreement (IGA) 2021

III. **STANDARDS:**

1. CSP ensures that mechanisms are in place for the prevention, detection and reporting of fraud and/or program abuse. All employees are familiar with the types of fraud and/or program abuse that could occur during their normal day to day activities.
2. Personnel at all sites are trained at orientation on corporate compliance standards and procedures and are informed that any person who knowingly obtains any benefit by means of false or fraudulent pretenses, representations, promises or material omissions is guilty of a Class 2 Felony.
3. Corporate compliance tip boxes are maintained at all sites.
4. CSP follows AHCCCS reporting requirements for incidents of fraud and abuse.
5. CSP maintains a system of no-reprisal for any good faith reports of suspected fraud or abuse.

IV. **PROCEDURES:**

- A. Reporting of fraud and abuse involving Title XIX/XXI funds or AHCCCS-registered providers and recipients:

Upon becoming aware of a suspected incident of fraud and/or abuse, including a suspected incident committed by the TRBHA, a TRBHA or provider has ten (10) working days to inform the AHCCCS/OIG of the suspected fraud or abuse in writing to the address below or by submitting an online form accessible at the link below.



AHCCCS OIG
In Maricopa County: 602-417-4045
Outside Maricopa County: 888-487-6686
Email: AHCCCSFraud@azahcccs.gov

B. Reporting of fraud and abuse involving Non-Title XIX/XXI funds and/or grants:

Upon becoming aware of a suspected incident of fraud and /or abuse, including a suspected incident committed by the TRBHA, a TRBHA or provider has ten (10) working days to inform AHCCCS/BCC by completing *Form 7.1.1, Suspected Fraud or Abuse Report* and faxing mailing or emailing it to AHCCCS. Reports of fraud or abuse may also be taken over the phone at (602) 364-3758 or 1-866-569-4927.

C. Reporting of fraud and abuse to the TRBHA:

In addition to notifying AHCCCS, health providers may need to notify their contracted TRBHA of all suspected incidents of fraud or abuse. Call or write to the CSP Corporate Compliance Officer at:

CSP Corporate Compliance Director
4567 W. Tetakusim Road
Tucson, AZ 85746
(520) 879-6060 Fax (520) 879-6099