

2011 Provider Compliance Make-Up Questionnaire Page
(Please refer to the instruction page to complete training and questions correctly.)
http://www.vbh-pa.com/fraud_abuse.htm

Name

Organization\Company

Telephone#	Email:
------------	--------

Question# 1

The key term in the definition of fraud is the first word of the definition of fraud. Please refer to the *Program Integrity Presentation PowerPoint*. What is the first word in the definition of fraud?

Question# 2

The healthcare reform requires all providers that receive Medicaid and Medicare to have Compliance Programs. Please refer to the *Program Integrity Tips* for the requirements. What is the 8th element of an effective Compliance Program?

Question# 3

If you suspect fraud, waste or abuse, there are several methods to report. Please refer to the *Potential Fraud, Waste and Abuse Referral Form* to read how to report suspected fraud, waste and abuse to VBH-PA. Who do you submit the form to?

Question# 4

The Federal False Claims Act is to prevent providers from receiving payment from Medicaid or Medicare for claims that are knowingly false or incorrect? Please refer to the *CMS – Roadmap to Avoiding Fraud and Abuse* under the Fraud & Abuse section. How much can be recovered or what is the penalty for false claims?

Question# 5

BPI oversees all fraud, waste and abuse prevention and detection activities in Pennsylvania under the Department of Welfare. Additionally, VBH-PA reports all suspected fraud, waste and abuse to BPI. What does the acronym BPI stand for?

Complete and Send Questionnaire Page to the following:
Attention: Melissa Hooks, Compliance Manager
Telephone Number: (724) 744-6513 **Fax Number:** (724) 744-6303
Email Address: Melissa.Hooks@valueoptions.com