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◆ CMS didn't collect \$416 million of the overpayments identified by the HHS Office of Inspector General (OIG) during the 27-month period from Oct. 1, 2014, through Dec. 31, 2016, according to an OIG report posted July 28.^[1] There wasn't documentation to support that CMS collected another \$152 million in overpayments flagged by OIG, bringing the total to 55% in unconnected overpayments. According to the report, CMS had various reasons for not collecting overpayments, including provider appeals and redeterminations of overpayment amounts by CMS and Medicare administrative contractors (MACs). To improve overpayment recoupment, OIG made nine recommendations, such as establishing policies and procedures "that define and require retention of documentation that is needed for independent verification of the collection of overpayments." In its response, CMS agreed with one recommendation, agreeing they should "promptly collect our recommended and sustained overpayments, and when CMS and the MACs do so, they must retain the documentation needed to create an audit trail." But CMS didn't agree with seven recommendations and was noncommittal on another.

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