

## Self-Auditing Process for CBH Providers

---

To align with changes to the [Pennsylvania Medicaid Provider Self-Review Protocol](#), CBH's Program Integrity Department has updated two documents required for providers completing self-audits: The [Provider Self-Auditing Form](#) and the [Overpayment Spreadsheet](#). The documents are located on the [CBH website Program Integrity page](#).

Providers are to continue following the guidance and instructions in [CBH Provider Bulletin 18-17](#) regarding the self-auditing process for CBH providers (issued November 7, 2018):

- 1. Follow the Protocol.** Providers are encouraged to review and follow [the commonwealth's protocol](#).
- 2. Notify CBH.** Providers must contact the Program Integrity Department when identifying the need for a self-audit. This can be initiated by emailing [CBH.ComplianceContact@phila.gov](mailto:CBH.ComplianceContact@phila.gov) with the subject line "Self-Audit". To note, protected health information (PHI) must be sent securely, and the Program Integrity Department will assist with the secure submission of content and documents containing PHI. Providers should review the timeframe established in the Code of Federal Regulations when an overpayment is identified (see [42 CFR § 438.608\(d\)\(2\)](#)).
- 3. Notify BPI of an Excluded Employee or Contractor (if applicable).** Providers must follow [MA Bulletin 99-11-05](#) when identifying an employee or contractor who is excluded from participating in MA or any other federally funded health care program.
- 4. Receive CBH Pre-Approval (if applicable).** There are two general options for providers completing self-audits: 100 Percent Claim Review (Option 1) and Provider-Developed Review Work Plan (Option 2). Option 2 requires CBH pre-approval which can be obtained by following the instructions outlined in the Provider Self-Auditing Form. To note, a work plan proposing the use of a statistically valid random sample (SVRS) is classified under Option 2.

## Self-Auditing Process for CBH Providers

---

5. **Respond to Requests for Self-Audits.** The Program Integrity Department may request providers complete self-audits when potential compliance concerns are identified. Self-audit documents are still required in these cases.
6. **Respond to Requests for Supporting Documentation.** The Program Integrity Department may ask providers for documentation that supports the self-audit rationale, methodology, and outcome. It is important to maintain all relevant records in the event they are requested.
7. **Request Support.** The Program Integrity Department will manage the return of compliance overpayments to CBH, so claim adjustment forms are not needed for these cases. Providers can request the department generate a list of CBH data to identify potential overpayments and improper payments. The department can also assist in developing SVRS. Depending on the needs of the provider, the Program Integrity Department offers trainings, one-to-one support, and additional assistance.
8. **Submit Self-Audit.** When the self-audit is ready to be submitted to the Program Integrity Department, providers should email [CBH.ComplianceContact@phila.gov](mailto:CBH.ComplianceContact@phila.gov) or contact a CBH Program Integrity representative in order to determine the best way to securely share the self-audit documents. CBH currently utilizes Box, Inc. (See the corresponding [CBH Provider Notice](#) issued March 18, 2022).
9. **Finalize Self-Audit.** In general, self-audits are processed by Program Integrity Analysts, who finalize self-audits with provider representatives. All self-audit outcomes are reviewed by the CBH Program Integrity Committee. Once finalized, resolution letters are then securely shared to providers via Box, Inc., concluding the self-audit and announcing upcoming claim reversals.