**NC Medicaid**

**Report Information**

Report Name: Fraud Prevention Report

Report Description: Annual update on Fraud Prevention Plan, including a list of activities planned but not performed under the approved Fraud Prevention Plan and reason(s) for non-performance, results of the activities performed pursuant to the approved Fraud Prevention Plan and any additional similar activities performed which were not included in the Fraud Prevention Plan, and a summary of each audit, on-site review or other activity performed.

Report ID:REG006-J

Business Unit: Program Integrity

Reporting Frequency: Annual

Report Due Date: 45 days after end of Contract Year (or on the next business day if that day falls on a holiday and/or a weekend)

File naming convention: PHPID\_ REG006-J-##\_Fraud Prev Rpt \_YYYY\_MMDD

Deliverable Type: Text Document

**PHP Information**

PHP ID:

PHP Name:

PHP Contact:

PHP Contact Email:

Report Period Start Date:

Report Period End Date:

Date Completed:

*(This plan can be submitted in any format. However, this document must be completed and submitted with the required plan)*

**Definitions and Instructions:**

The PHP shall provide on an annual basis a review of its Fraud Prevention activities during the previous year. The plan should contain the following at a minimum:

* The name of the PHP
* Name of persons who have SIU responsibilities, as well as the name of the Compliance Officer
* A list of activities planned but not performed under the approved Fraud Prevention Plan and the reason(s) for non-performance.
* The results of the activities performed pursuant to the approved Fraud Prevention Plan and any additional similar activities performed which were not included in the Fraud Prevention Plan, including trainings provided.
* A summary spreadsheet of each FWA activity

**Version:**

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| Document version number | v1.0 |  |  |  |  |  |  |  |  |  |  |
| Date of most recent update | 1/30/2019 |  |  |  |  |  |  |  |  |  |  |
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| **Version Notes** |  |   |  |  |  |  |  |  |  |  |  |  |
| **Date** | **Section updated**  | **Change** |  |  |  |  |  |  |  |  |  |  |
| 1/30/2019 | Initial Document Draft | Original |  |  |  |  |  |  |  |  |  |  |
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