



NYS Dental Insurance Program

Audit Report 2022-S-27 – Recommendations and Actions Taken

Submission Deadline: July 6, 2024

Submitted to:

New York State Office of the State Comptroller (OSC)
State Government Accountability
110 State Street
Albany, NY 12236

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Company Information

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EmblemHealth insurance plans are underwritten by EmblemHealth Plan, Inc., EmblemHealth Insurance Company, and Health Insurance Plan of Greater New York (HIP).

EmblemHealth Services Company, LLC provides administrative services to EmblemHealth companies.

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Table of Contents

I. NYS Dental Audit Recommendations and Actions Taken	4
Recommendations	4



I. NYS Dental Audit Recommendations and Actions Taken

Reporting Requirement: *Within 180 days after the final release of this report, we request that Emblem officials report to the State Comptroller, advising what steps were taken to implement the recommendations contained herein, and where recommendations were not implemented, the reasons why.*

As required, please see EmblemHealth’s responses below to the recommendations received within the New York State (NYS) Dental Insurance Program Audit Report 2022-S-27 on January 8, 2024. As you review, please contact Bonnie Benson, Director of Account Management, as needed at (518) 446-8024 or via email at bbenson@emblemhealth.com.

Recommendations

1. *Review the \$492,061 in COB overpayments identified by our audit and make recoveries, as warranted.*

EmblemHealth has completed a review of the in-network and out-of-network claims received under the NYS Dental Insurance Program for members identified as having dual coverage. This review included dental claims for members with dual coverage, including those identified outside of the audit, to ensure Coordination of Benefits (COB) recoveries possible were made. It was discovered that not all the claims identified by the audit team were overpayments. Please see *Exhibit 1. NYS Dental Program: Dual COB Summary* for the results of the internal review. Due to the two-year lookback period, EmblemHealth cannot recover all overpayments. For those overpayments that are within the last two years, recovery is currently underway with individual tracking per claim. In all, 187 claims are being recovered for a total potential, recoverable overpayment of \$35,056.72.

Exhibit 1. NYS Dental Program: Dual COB Summary

In-Network Claims	Number of Claims	Dollar Amount
Claims/Services Reviewed	3,268	
Overpayment	1,518	\$225,887.65
Non-overpayment	1,750	N/A
Overpayments in Facets Claims System: 2-Year Recovery Lookback Period		
Within Lookback Period	151	\$32,793.03
Exceeded Lookback Period	1,367	\$193,094.62
Out-of-Network Claims	Number of Claims	Dollar Amount
Claims/Services Reviewed	1,753	

NYS Dental Audit 2022-S-27

Overpayment	856	\$28,230.85
Non-overpayment	897	N/A
Overpayments in Facets Claims System: 2-Year Recovery Lookback Period		
Within Lookback Period	36	\$2,263.69
Exceeded Lookback Period	244	\$10,463.95
Legacy Claims System: Exceeded Lookback Period	576	\$15,503.21
Totals Claims Overpaid		
Total Claim Overpayments Within Lookback Period	187	\$35,056.72
Total Claim Overpayments Exceeded Lookback Period	2,187	\$219,061.78

2. *Review controls and take corrective action to address issues causing overpayment of COB services, including lack of COB information and processor error.*

As a result of the audit findings, EmblemHealth has re-reviewed our internal controls in place and has issued new monthly reporting as of late 2023 that seeks to identify potential members who may have dual coverage with EmblemHealth. This new report and associated processes, controls, and corrective actions seek to mitigate future processing errors and any lack of COB information on members who have dual coverage.

In addition to this report, we have implemented a new Call Center protocol wherein members are asked to verify their COB information on file so that we have the latest information on their dual coverage. This corrective action was implemented in February 2024.

Finally, during the audit, the Plan had requested that a process be created whereby New York State would provide EmblemHealth with other insurance information for its employees and their dependents as a key control so that benefits could be better coordinated. The lack of this information was attributable to the overpayments identified.

NYS Dental Audit 2022-S-27

3. *Develop an ongoing process to identify and review the appropriateness of COB claims and recover any overpayments.*

Since the audit report was released, EmblemHealth has taken specific steps to address and implement the recommendations for recoveries and to enhance our controls. This includes the following updated processes and activities:

- Updated dental claims review processes and procedures with additional training that has been provided to staff to enhance the COB process.
 - This includes updated Facets claims system procedures for processing dual COB claims which have been revised to ensure dual COB claims are processed correctly.
- Re-review of dental claims for members with dual coverage and confirmation of COB records within Facets on these members. This includes ongoing recovery efforts in progress for dual COB claims that occurred within the two-year lookback period.
- New Call Center process wherein members are asked to verify their COB information on file to determine if each member is covered by more than one plan, updating the member's information on file as appropriate.
- Weekly Claim Operations staff meetings, wherein Claim Operations Leaders provide ongoing COB tips alongside additional training conducted by the Training Department. This includes continual training on dual COB questions with Product Knowledge Testing (PKT) to ensure understanding.
 - These measures included COB remediation claims training for all Claims Teams which was completed in February 2024.



Better care. Better value. Better outcomes. For everyone.

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