

QAS Reconciliations



10.7.C. ANNUAL RECONCILIATION

The reconciliation of approved Medicaid days, changes to the variable rate from **filed to audited** cost report data, and QAS payments is completed on an annual basis within 90 calendar days after the end of the State's fiscal year.

- QAS Reconciliations are conducted on an annual basis (January) to ensure the correct QAS payments were paid to providers.
- The reconciliations are only done on changes of approved Medicaid days (i.e.: census) or in changes of the variable rate from **filed to audited** cost reports.
- There were no approved changes to the methodology for QAS Reconciliations in the State Plan Amendment and no QAS Payment changes based in "Initial Settlement" calculations.

33

Integrated Care Organization



34

Integrated Care Organization



- ICO contract permits FFS reimbursement for skilled nursing facility providers, unless otherwise agreed to between ICOs and SNFs.
- Final audited FY22 and FY23 FFS rates needed before any associated guidance can be shared.
- Once FFS rates known, MDHHS will pursue any needed ICO rate changes.

35

COVID-19 Relief Program Audits and Monitoring Reviews



36