

TEXAS HEALTH AND HUMAN SERVICES COMMISSION
OFFICE OF INSPECTOR GENERAL
AUDIT REPORT

**COOK CHILDREN'S
TEDDY BEAR TRANSPORT**

A Texas Medicaid Air Ambulance Provider



February 26, 2019
OIG Report No. AUD-19-012



HHSC OIG

TEXAS HEALTH AND HUMAN
SERVICES COMMISSION
OFFICE OF
INSPECTOR GENERAL

WHY THE OIG CONDUCTED THIS AUDIT

The Texas Health and Human Services Commission (HHSC) Office of Inspector General (OIG) Audit Division conducted an audit of an air ambulance provider, Cook Children's Teddy Bear Transport (Teddy Bear Transport), a division within Cook Children's Medical Center.

During the audit period, Teddy Bear Transport submitted claims for 238 air ambulance claims, for which it received reimbursements of \$1,893,046.39, and 141 ground ambulance claims for which it received reimbursement of \$85,824.19.

Teddy Bear Transport provides air ambulance transportation via fixed-wing and rotary-wing aircraft, and provides ground ambulance transportation to and from its fixed-wing aircraft, when necessary

Teddy Bear Transport primarily transports patients referred by physicians at other hospitals to Cook Children's Medical Center in Fort Worth, Texas. Occasionally, patients are transported from Cook Children's Medical Center to other hospitals that provide needed specialty services. Transports occur from and to locations within Texas, as well as other states.

WHAT THE OIG RECOMMENDS

Teddy Bear Transport should:

- Ensure claimed mileage is accurate.
- Ensure it obtains prior authorization for out-of-state transports.
- Return overpayments of \$19,521.50 to the State of Texas.

For more information, contact:

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February 26, 2019

AUDIT OF COOK CHILDREN'S MEDICAL CENTER TEDDY BEAR TRANSPORT

A Texas Medicaid Air Ambulance Provider

WHAT THE OIG FOUND

Teddy Bear Transport complied with requirements related to documentation supporting medical necessity, level of service, and mode of transportation. There were no exceptions for 45 fee-for-service ground ambulance claims tested. In addition, information technology (IT) application controls were adequate, and the data used to form audit conclusions was reliable.

Teddy Bear Transport did not bill the correct mileage for 15 of 238 air ambulance claims. In addition, Teddy Bear Transport did not ensure that prior authorization had been obtained by the referring medical provider before delivering and billing for one fee-for-service out-of-state-transport service. The 16 claims resulted in \$19,521.50 reimbursed in error. Specifically, Teddy Bear Transport:

- Could not provide valid supporting documentation to support mileage on 11 managed care claims, for which managed care organizations (MCO) paid \$10,400.69.
- Could not provide valid supporting documentation to support mileage on four fee-for-service claims, for which the Texas Medicaid and HealthCare Partnership (TMHP) paid \$609.58.
- Did not request a prior authorization for one out-of-state-transport, for which TMHP paid \$8,511.23.

The OIG Audit Division offered recommendations to Teddy Bear Transport which, if implemented, will ensure air ambulance mileage is billed correctly and an out-of-state transport is provided only after obtaining a prior authorization number from the requesting provider.

The audit objective was to determine whether paid Medicaid fee-for-service claims and managed care claims for air ambulance services and their associated ground transports were billed in accordance with state rules and guidelines, and contract requirements.

The audit scope included paid claims for the period of September 1, 2015, through August 31, 2016, and a review of relevant activities, internal controls, and IT application controls. Due to data limitations that occurred because managed care ground ambulance claims did not include pick up and drop off addresses, managed care ground ambulance paid claims were not tested.

The OIG Audit Division presented preliminary audit results, issues, and recommendations to Teddy Bear Transport in a draft report dated January 28, 2019. Teddy Bear Transport provided responses to the audit findings that indicated it had taken actions to address recommended process changes. Teddy Bear Transport's responses are included in the report after the recommendations. In addition, Teddy Bear Transport stated that it is in the process of returning the full amount of the identified overpayments.

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INTRODUCTION

The Texas Health and Human Services Commission (HHSC) Office of Inspector General (OIG) Audit Division conducted an audit of Cook Children's Teddy Bear Transport (Teddy Bear Transport), an air ambulance provider. Teddy Bear Transport is a division within Cook Children's Medical Center.

Objective and Scope

The objective of this audit was to determine whether paid Medicaid fee-for-service claims and managed care claims for air ambulance services and their associated ground transports were billed in accordance with state rules and guidelines, and contractual requirements.

The scope of this audit included paid claims with dates of service during the period of September 1, 2015, through August 31, 2016, and a review of relevant activities, internal controls, and information technology (IT) application controls through the end of fieldwork in July 2018. Due to data limitations that occurred because managed care ground ambulance claims did not include pick up and drop off addresses, managed care ground ambulance paid claims were not tested.

Background

Texas Medicaid covers air ambulance transport services, by means of either fixed-wing (airplane) or rotary-wing (helicopter) aircraft, if one or more of the following conditions exist:

- The client's medical condition requires immediate and rapid ambulance transportation that cannot be provided by ground ambulance.
- The point of client pick up is inaccessible by ground ambulance.
- Great distances or other obstacles are involved in transporting the client to the nearest appropriate facility.

Medicaid reimburses air ambulance providers for the transport plus mileage for the flight on which the patient is on board.

Texas Medicaid provides services to some individuals through a traditional fee-for-service model, but most are provided through a managed care model. Under the fee-for-service model, Texas Medicaid, through the Texas Medicaid and Healthcare Partnership (TMHP), reimburses providers for services provided to Medicaid enrollees based on a Texas Medicaid fee schedule.

Under the managed care model, HHSC makes capitation payments to managed care organizations (MCOs) for the provision of covered services to members. Capitation payments are fixed, per member, per month, rates based on members’ associated risk groups. MCOs pay network providers using different payment methodologies. One method is to pay a percentage of the Texas Medicaid fee schedule. The MCOs who made payments tested in this audit reimbursed Teddy Bear Transport within the range of 105 and 113 percent of Medicaid fee schedule rates.

Teddy Bear Transport provides air ambulance transportation via fixed-wing and rotary-wing aircraft, and provides ground ambulance transportation to and from its fixed-wing aircraft, when necessary. It operates with two airplanes, a helicopter, and five ground ambulances. Each aircraft and ground ambulance is equipped to transport critical care patients and features technology for pediatric care. The transport team for each aircraft or ground ambulance, includes specialized nurses, respiratory therapists, and paramedics.

Teddy Bear Transport primarily transports patients referred by physicians at other hospitals to Cook Children’s Medical Center in Fort Worth, Texas. Occasionally, patients are transported from Cook Children’s Medical Center to other hospitals that provide needed specialty services. Transports occur from and to locations within Texas, as well as other states.

Patients that require transport range from newborns in need of specialized neo-natal care to older children with diseases or conditions in which Cook Children’s Medical Center specializes. Teddy Bear Transport holds certification by the Commission on Accreditation of Medical Transport Services.

During the audit period, Teddy Bear Transport submitted claims for 238 air ambulance claims, for which it received reimbursements of \$1,893,046.39. There were also 141 ground ambulance claims, for which Teddy Bear Transport received \$85,824.19. Table 1 provides a breakdown of these claims.

Table 1. Air and Ground Ambulance Claims, September 1, 2015, through August 31, 2016

Claim Type	Air Ambulance Claims	Air Ambulance Reimbursements	Ground Ambulance Claims	Ground Ambulance Reimbursements
Managed Care	157	\$1,362,016.89	96	\$71,301.95
Fee-for-Service	81	531,029.50	45	14,522.24
Total	238	\$1,893,046.39	141	\$85,824.19

Source: *OIG Audit Division*

The OIG Audit Division conducted the audit in accordance with generally accepted government auditing standards issued by the Comptroller General of the United States. Unless otherwise described, any year that is referenced is the state fiscal year, which covers the period from September 1 through August 31.

The OIG Audit Division presented preliminary audit results, issues, and recommendations to Teddy Bear Transport in a draft report dated January 28, 2019. Teddy Bear Transport provided responses to the audit findings that indicated it had taken actions to address recommended process changes. Teddy Bear Transport's responses are included in the report after the recommendations. In addition, Teddy Bear Transport stated that it is in the process of returning the full amount of the identified overpayments.

AUDIT RESULTS

Teddy Bear Transport complied with requirements related to documentation supporting medical necessity, level of service, and mode of transportation. There were no exceptions for the 45 ground ambulance claims tested. IT application controls were adequate and the data used to form audit conclusions was reliable.

The OIG Audit Division identified issues related to paid claims support and prior authorization for air ambulance claims. Details of those exceptions are included in the sections that follow.

PAID CLAIMS SUPPORT

According to the Texas Administrative Code (TAC), a provider is subject to administrative actions or sanctions if it submits a claim for payment by the Medicaid program for a service that was not provided as claimed.¹

The TAC states, “The OIG recovers overpayments made to providers within the Medicaid or other HHS programs, whether the overpayment resulted from error by the provider, the claims administrator, or an operating agency, misunderstanding, or a program violation.”²

According to the Texas Medicaid Provider Procedures Manual (TMPPM), both fee-for-service and managed care Medicaid providers must follow Texas Medicaid limitations and exclusions and therefore may not provide services or supplies that are not reasonable and necessary for diagnosis or treatment, or services not specifically provided by Texas Medicaid.^{3,4} TMPPM also states that Texas Medicaid will not reimburse air or ground mileage when the client is not on board the ambulance.⁵ Teddy Bear Transport uses Flight Vector software to manage its dispatch operations. Flight Vector is also used to record flight details and patient data. The Flight Vector software uses global positioning system data and Google Maps to calculate overall trip mileage. With input from the communications specialist, Flight Vector calculates the miles flown with the patient on board, also called patient-loaded miles. In instances where patient-loaded miles are not recorded, due to satellite or human error, the communication specialist obtains the patient-loaded miles from the pilot directly.

¹ 1 Tex. Amin. Code §371.1653(2) (Apr. 15, 2014, and May 1, 2016).

² 1 Tex. Amin. Code §371.1711(a) (Apr. 15, 2014, through May 1, 2016).

³ Texas Medicaid Provider Procedures Manual, Vol. 1, §1.11 (July 14, 2015, through July 15, 2016).

⁴ Texas Medicaid Provider Procedures Manual, Vol. 2, “Medicaid Managed Care Handbook” §2.2 (July 14, 2015, through Aug. 12, 2016).

⁵ Texas Medicaid Provider Procedures Manual, Vol. 2, “Ambulance Services Handbook” §2.2.5.9 (July 14, 2015 through Mar. 14, 2016).

Issue 1: Unsupported Mileage

The mileage Teddy Bear Transport reported for billing purposes on 11 managed care claims and 4 fee-for-service claims did not match the mileage identified in its supporting documentation. Teddy Bear Transport billed and received \$11,010.27 more than it should have, based on the mileage in its supporting documentation. The claims with unsupported mileage are listed in Table 2 and Table 3.

Table 2. Unsupported Claim Mileage on Managed Care Claims

Service Date	Mode of Transportation	Payor	Mileage Claimed	Mileage Documented	Variance	Rate	Questioned Costs
02/09/16	Rotary-Wing	Cook Children's	40.00	36.30	3.70	\$24.07	\$ 89.06
09/26/15	Rotary-Wing	FirstCare	81.00	76.13	4.87	66.08	321.81
10/18/15	Rotary-Wing	FirstCare	125.00	121.33	3.67	70.15	257.45
02/01/16	Rotary-Wing	FirstCare	216.00	108.00	108.00	70.15	7,576.20
02/16/16	Rotary-Wing	FirstCare	145.00	142.00	3.00	70.15	210.45
08/30/16	Fixed-Wing	FirstCare	302.00	300.00	2.00	33.93	67.86
09/03/15	Rotary-Wing	Scott and White	55.00	52.08	2.92	21.88	63.89
09/14/15	Rotary-Wing	Superior	61.00	0.00	61.00	23.63	1,441.45
10/19/15	Fixed-Wing	Superior	142.00	138.36	3.64	16.31	59.40
02/05/16	Rotary-Wing	Superior	41.00	31.20	9.80	23.63	231.57
02/13/16	Fixed-Wing	Superior	150.00	145.00	5.00	16.31	81.55
Total			1,358.00	1,150.40			\$10,400.69

Source: OIG Audit Division

Table 3. Unsupported Claim Mileage on Fee-for-Service Claims

Service Date	Mode of Transportation	Payor	Mileage Claimed	Mileage Documented	Variance	Rate	Questioned Costs
09/05/15	Rotary-Wing	TMHP	91.00	87.22	3.78	\$21.88	\$ 82.80
09/29/15	Rotary-Wing	TMHP	110.00	104.91	5.09	21.88	111.29
10/19/15	Rotary-Wing	TMHP	31.00	28.58	2.42	21.88	53.01
07/25/16	Fixed-Wing	TMHP	323.00	299.00	24.00	15.10	362.48
Total			555.00	519.71	35.29		\$ 609.58

Source: OIG Audit Division

Recommendation 1

Teddy Bear Transport should:

- Ensure that the mileage reported on a claim represents the actual number of miles traveled with a patient on board
- Reimburse the overpayment of \$11,010.27 to the State of Texas

Management Response

Action Plan

There were 7 errors identified after the launch of Flight Vector. We were unable to verify mileage through Flight Aware for the (4) RW [rotary-wing] flights and the (2) FW [fixed-wing] flights were noted to be entered incorrectly as a result of human error, (1) FW was noted to be an emergent out of state transport and authorization was not obtained prior to departure.

- *In the Teddy Bear Transport Communication Center Guidelines, Part VII Fixed Wing Transports and Part IX Helicopter Transports, when SkyConnect/Flight Vector is not functioning, the communications specialist will confirm Patient Loaded Miles with the pilot in command and the direct mileage as listed on Flight Aware.*
- *As of May 31, 2018, the new guidelines were implemented to reflect suggestions and guidelines given upon completion of our audit.*
- *The Lead Communication specialist is the owner of this process and will review all calls for correct mileage within three days. If she is unavailable, the EMS Communication Manager will complete said duty.*
- *As of May 31, 2018, all new communication specialists receive training during their orientation, which covers this new process regarding both mileage and flight following. Those who were already on staff were trained by our Lead Communication specialist. We have trained our staff in the appropriate resources to use in the event that our satellite tracking is out of service, such as direct contact with the pilot in command and verification from Flight Aware.*
- *Quality control is performed on 100% of our charts for billing accuracy and voice recordings are audited to comply with our CAMTS accreditation.*

Responsible Manager

Lead Communication Specialist

Implementation Date

May 31, 2018

PRIOR AUTHORIZATION

All emergency fee-for-service out-of-state transports require prior authorization.⁶ A prior authorization number, which must be obtained from the requesting medical provider before an out-of-state transport occurs, is required to be included on fee-for-service claims for out-of-state ambulance services.⁷

Issue 2: Unauthorized Out-of-State Transport

Teddy Bear Transport did not include a prior authorization number on one fee-for-service claim for out-of-state air ambulance services, as detailed in Table 4. TMHP paid Teddy Bear Transport \$8,511.23 for this unauthorized claim.

Table 4. Claim Did Not Receive Authorization for Out of State Transport

Transport Date	Pick-up Address	Mileage	Mileage Reimbursed	Transport Reimbursed	Total
10/15/15	[REDACTED]	323.26	\$5,618.39	\$2,892.84	\$8,511.23

Source: OIG Audit Division

While Teddy Bear Transport was not responsible for requesting the prior authorization, it was responsible for ensuring that prior authorization had been obtained before providing the out-of-state transport service by receiving a prior authorization number from the referring medical provider, and including the prior authorization number on the claim. In this instance, there is no evidence that the referring medical provider requested and obtained prior authorization for this service.

Recommendation 2

Teddy Bear Transport should:

- Ensure that prior authorizations are obtained for all out-of-state Medicaid fee-for-service transports, and include the prior authorization numbers on the associated claims.
- Reimburse the overpayment of \$8,511.23 to the State of Texas.

⁶ Texas Medicaid Provider Procedures Manual, Vol. 2, Ambulance Services Handbook §2.2.1.1 (July 2015 through Mar. 2016).

⁷ 1 Tex. Admin. Code §354.1113(b)(2) (Aug. 26, 2007).

Management Response

Action Plan

- *As of May 31, 2018, it is now the practice of our communication specialist in collaboration with financial counselors' responsibility to ensure that within twenty-four hours we have initiated the authorization process.*
- *As of May 31, 2018, our Lead Communication Specialist/EMS Manager will follow up with the case manager of the area in which the patient arrives to ensure that the process has been initiated. Knowing that after hours and on the weekends the approval process moves to the next business day.*

Responsible Manager

*Lead Communication Specialist
EMS Manager*

Implementation Date

May 31, 2018

CONCLUSION

Teddy Bear Transport complied with requirements related to documentation supporting medical necessity, level of service, and mode of transportation. There were no exceptions for the 45 fee-for-service ground ambulance claims tested. In addition, IT application controls were adequate, and the data used to form audit conclusions was reliable.

Teddy Bear Transport did not bill the correct mileage for 15 of 238 air ambulance claims. In addition, Teddy Bear Transport did not ensure that prior authorization had been obtained by the referring medical provider before delivering and billing for one fee-for-service out-of-state-transport service. The 16 claims resulted in \$19,521.50 reimbursed in error, and this amount should be reimbursed to the State of Texas.

The OIG Audit Division offered recommendations to Teddy Bear Transport which, if implemented, will ensure air ambulance mileage is billed correctly and an out-of-state transport is provided only after obtaining a prior authorization number from the requesting provider.

The OIG Audit Division thanks management and staff at Teddy Bear Transport for their cooperation and assistance during this audit.

Appendix A: Objective, Scope, Methodology, Criteria, and Auditing Standards

Objective

The objective of this audit was to determine whether paid Medicaid fee-for-service claims and managed care claims for air ambulance services and their associated ground transports were billed in accordance with state rules and guidelines, and contractual requirements.

Scope

The scope of this audit included paid claims with dates of service during the period of September 1, 2015, through August 31, 2016, and a review of relevant activities, internal controls, and IT application controls through the end of fieldwork in July 2018. Due to data limitations that occurred because managed care ground ambulance claims did not include pick up and drop off addresses, managed care ground ambulance paid claims were not tested.

Methodology

To accomplish its objectives, the OIG Audit Division collected information for this audit through discussions and interviews with Teddy Bear Transport management and staff and by reviewing:

- Supporting documentation for all Medicaid fee-for-service and managed care paid air ambulance claims with dates of service during the audit period
- IT application controls
- Teddy Bear Transport's policy and procedures

The OIG Audit Division issued an engagement letter on March 6, 2018, to Teddy Bear Transport providing information about the audit, and conducted fieldwork at Teddy Bear Transport's facility in Fort Worth, Texas, the week of April 9, 2018. While on site, the OIG Audit Division interviewed responsible personnel, evaluated internal controls, and reviewed relevant documents related to tested claims. Auditors did not remove original records from the Teddy Bear Transport premises. During fieldwork, auditors requested additional documents, which Teddy Bear Transport provided.

The OIG Audit Division assessed the reliability of the claims data by (a) performing electronic testing of required data elements, (b) reviewing existing information about the data and the system that produced them, and (c) interviewing Teddy Bear Transport officials knowledgeable about the data.

Data was obtained from OIG Data Analysis and Technology Division for all 238 air and 45 corresponding fee-for-service ground ambulance paid claims for Medicaid enrollees during the audit period of September 1, 2015, through August 31, 2016.

After an initial assessment of risk, OIG audit tested paid claims for 100 percent of the Medicaid air ambulance transports delivered by the provider during the audit period. There were 81 fee-for-service claims and 157 managed care claims for the audit period. Fixed-wing transports require a ground ambulance to take the patient to the hospital, so the ground transports associated with the 45 fee-for-service fixed-wing ambulance flights in the audit scope were also tested. Testing consisted of examining supporting documentation for each claim billed by Teddy Bear Transport.

Criteria

The OIG Audit Division used the following criteria to evaluate the information provided:

- 1 Tex. Admin. Code §354.1113(b)(2) (2007)
- 1 Tex. Admin. Code §371.1653(2) (2014 through 2016)
- 1 Tex. Admin. Code §371.1711(a) (2014 through 2016)
- Texas Medicaid Provider Procedures Manual, Vol. 1 (2015 through 2016)
- Texas Medicaid Provider Procedures Manual, Vol. 2, “Ambulance Services Handbook” (2015 through 2016)
- Texas Medicaid Provider Procedures Manual, Vol. 2, “Medicaid Managed Care Handbook” (2015 through 2016)

Auditing Standards

Generally Accepted Government Auditing Standards

The OIG Audit Division conducted this audit in accordance with generally accepted government auditing standards issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for the issues and conclusions based on our audit objectives. The OIG Audit Division believes the evidence obtained provides a reasonable basis for our issues and conclusions based on our audit objectives.

ISACA

The OIG Audit Division performs work in accordance with the IT Standards, Guidelines, and Tools and Techniques for Audit and Assurance and Control Professionals published by ISACA.

Appendix B: Report Team and Distribution

Report Team

The OIG staff members who contributed to this audit report include:

- Joel A. Brophy, CIA, CFE, CRMA, CICA, Audit Director
- Vivian Cohn, CIA, CGAP, CRMA, Audit Director
- Dan Hernandez, CFE, Audit Manager
- Greg Herbert, CFE, CIA, CGAP, CGFM, Audit Manager
- Jeffrey Jones, CPA, CIGA, Audit Project Manager
- Summer Grubb, CGAP, Senior Auditor
- Grace Valentine, Staff Auditor
- Melissa Larson, CFE, CIA, CISA, HCISPP, IT Audit Manager
- Mo Brantley, Senior Audit Operations Analyst

Report Distribution

Health and Human Services

- Dr. Courtney N. Phillips, Executive Commissioner
- Cecile Erwin Young, Chief Deputy Executive Commissioner
- Victoria Ford, Chief Policy Officer
- Karen Ray, Chief Counsel
- Karin Hill, Director of Internal Audit
- Enrique Marquez, Chief Program and Services Officer, Medical and Social Services Division
- Stephanie Muth, State Medicaid Director, Medicaid and CHIP Services
- Dee Budgewater, Deputy Associate Commissioner of Policy and Program, Medicaid and CHIP Services
- Katherine Scheib, Deputy Associate Commissioner of Operations, Medicaid and CHIP Services
- Dana Collins, Director, Contract Administration and Provider Monitoring Medicaid and CHIP Services

Cook Children's Medical Center Teddy Bear Transport

- David Lancaster, Vice President of Internal Audit and Compliance
- Deborah Boudreaux, Associate Vice President for Nursing
- Jack Sosebee, Vice President of Administration
- Nick Anton, EMS and Communication Manager
- Leanna Aparicio, Lead Communication Specialist

Appendix C: OIG Mission and Contact Information

The mission of the OIG is to prevent, detect, and deter fraud, waste, and abuse through the audit, investigation, and inspection of federal and state taxpayer dollars used in the provision and delivery of health and human services in Texas. The senior leadership guiding the fulfillment of OIG's mission and statutory responsibility includes:

- Sylvia Hernandez Kauffman, Inspector General
- Anita D'Souza, Chief of Staff and Chief Counsel
- Olga Rodriguez, Chief Strategy Officer
- Christine Maldonado, Chief of Operations and Workforce Leadership
- Brian Klozik, Deputy IG for Medicaid Program Integrity
- Lizet Hinojosa, Deputy IG for Benefits Program Integrity
- David Griffith, Deputy IG for Audit
- Quinton Arnold, Deputy IG for Inspections and Investigations
- Alan Scantlen, Deputy IG for Data and Technology
- Judy Hoffman-Knobloch, Assistant Deputy IG for Medical Services

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- Online: <https://oig.hhsc.texas.gov/report-fraud>
- Phone: 1-800-436-6184

To Contact the OIG

- Email: OIGCommunications@hhsc.state.tx.us
- Mail: Texas Health and Human Services Commission
Office of Inspector General
P.O. Box 85200
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