

HPE Program Integrity - Hospital Quarterly Report

Data Requirements
Data Elements
Report Submission Date
Reporting Period
Hospital (provider) ID
Hospital Service Address (HPE location)
Reason a FMA could not be completed
HPE Approved
HPE Completed Full Medicaid Application (FMA)
HPE did not complete FMA
HPE apply and approved
HPE Apply and Denial
Reason for Denial in Health-e-Arizona Plus
From total HPE applicants % of FMA
From total HPE applicants % of FMA - Denials
Applicant details as available (Name, DOB, AHCCCS ID)
HPE Deemed Ineligible by Hospital
Reason for Ineligibility by the Hospital

The quarterly report must contain all the applicant available information.
 The report is due at the end of the quarter from the date of HPE approval.
 The format should be in an Excel spreadsheet and must be submitted to the address provided by OIG by encrypted e-mail.