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| **Entity Location Details**  |
| Initiation date | Click here to enter a date. |
| Entity Name | Enter MBO Name  |
| Hospital/Location(s) and City, State | Enter Hospital Name and Locations (as applicable) and City, State |
| Entity Project Owner | Enter Name here |
| Entity Laboratory Director Name | Enter Name here |
| Entity Laboratory Department Administrative Executive (VP) | Enter Name here |
| Entity CRO Name  | Enter Name here |

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| **Project Details** |
| What billing discrepancy was identified at the entity? Include details test name, billing identification number, HCPCS code. |
| Describe the issue that was identified here.  |
| How was the Issue Identified? |
| Explain how the issue was identified here |
| What caused the Issue? |
| Explain what caused the billing discrepancy here |
| Was the Issue corrected? | Choose an item. |
| If Yes, When was the Issue corrected? | Click here to enter a date. |
| How was the issue corrected? |
| Explain how the issue was corrected here |
| If known, when did the issue start? | Explain the length of time |

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| **Project Logistics Determined During Legal Consult** |
| What is the lookback period (i.e., Time Period) for the repayment analyses? |
| Provide the lookback start and end dates  |
| What payers will be Included in repayment analyses? Normaly Medicare, Medicaid and their managed care plans. |
| Provide the payers to be included in the analyses |
| Name of attorney directing repayment  | Enter Name here |
| Will the project be performed under the Attorney Client Privilege (ACP)? | Choose an item. |
| Will CHAN be requested to perform the project | Choose an item. |

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| **Laboratory Repayment Project Finalization Information**  |
| Date data analysis accepted by directing attorney | Click here to enter a date. |
| Date directing attorney provided templates and direction for entity repayment. | Click here to enter a date. |
| Date reimbursement was made to payer/s. Must be less than 60 days from attorney acceptance date. | Click here to enter a date. |
| Date CRO entered incident into EthicsPoint | Click here to enter a date. |
| Return copy of this completed form to attorney director, entity CRO and Director of Laboratory Compliance . |