

CMS PERM Program Review Process Reminder

The Centers for Medicare & Medicaid Services (CMS) Payment Error Rate Measurement (PERM) program measures improper payments made in Medicaid and the Children’s Health Insurance Program (CHIP) and produces error rates for each program. The error rates are based in part on reviews of Medicaid and CHIP fee-for-service (FFS) claims in the State Fiscal Year (SFY) under review. The State of Kansas is a participant in the federal reporting year 2025 in the PERM Review.

The CMS review contractor, Empower AI Inc., will begin contacting Kansas FFS providers in August 2024 to request medical documentation for randomly selected claims payments made during SFY 2024 (July 1, 2023 – June 30, 2024).

In preparation for the potential of being selected, please identify a PERM Coordinator for your office. A PERM Coordinator is the designated person to facilitate the provision of medical records requests. All communication regarding the medical record requests will be directed to the provider’s designated PERM Coordinator.

Please contact the following KDHE State PERM Representative to provide the designated contact information, including an email address:

Rebecca Gonzales, KDHE Audits Program Manager

Ph: 785-291-3226

Email: Rebecca.Gonzales@ks.gov

To discuss any corporate agreements that need to be addressed in advance, or if there are any general questions regarding PERM, please contact the following KDHE State PERM Manager:

Rebecca Vaillancourt, KDHE PERM Audits Manager

Ph: 785-296-4071

Email: Rebecca.Vaillancourt@ks.gov

KMAP

[Kansas Medical Assistance Program](#)

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Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

Medical record requests are consistent with the mandatory compliance Statement contained in all **Kansas Medical Assistance Program (KMAP) provider agreements**, “The provider agrees that routine reviews may be conducted by the Department of Health and Human Services, the State Medicaid Authority (SMA), or its designee



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of services rendered, and payments claimed for KMAP consumers and that during such reviews the provider is required to furnish to the reviewer's records and original radiographs and other diagnostic images which may be requested. If the required records are retained on machine readable media, a hard copy of the records must be made available when requested" (page 3, #8: Access to Records, Confidentiality and Routine Review).

Promptly supplying the correct, accurate, and legible documentation requested by the CMS contractor reduces the number of error findings and decreases the potential recoupment of claims.

Additional information about the PERM program is addressed on the CMS [PERM](#) website on the Providers link.

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