



Department of Developmental Disabilities

Office of Provider Standards and Review Referral Summary Sheet

To:	Wayne Morgan
From:	Theresa Ryan, Manager, OPSR, Legal and Oversight
Date:	
Cc:	Brad Singer, Associate General Counsel, DODD
Re:	Allegation of Medicaid Fraud

Summary of Allegation:

Name of Provider:

Medicaid Providers #
DODD Contract #

Medicaid Recipient:
Medicaid #
Address:

Attachments Included:

Summary of Evidence to Substantiate Violation:
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Summary of Billing Information:

Does the provider provide services to more than one consumer?

If Yes, has provider's billing been reviewed for all consumers?

Amount of money that the provider appears to have been overpaid:

What is the timeframe for the alleged overpayment?

What is the last date that the service was billed?

Other Information:

Contact Information of people knowledgeable about the case:

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