

DATA ANALYSIS REQUEST FOR INFORMATION (RFI)

NBI MEDIC

Request Type:	RFI-Data Invoice Reconciliation Pharmacist Review Other	SVRS-Sample/Extrapolation Loss Calculation (Requires CMS Approval) Off Label Marketing (Requires CMS Approval)
Date of Request:		
Law Enforcement Case #:	HEAT (Strike Force) Involvement: <input type="checkbox"/> Yes <input type="checkbox"/> No	
REQUESTOR'S INFORMATION		
Requestor Name:	Include all contact info and select preferred method of contact	
Organization: <input type="checkbox"/> OIG <input type="checkbox"/> DOJ/FBI <input type="checkbox"/> Other:	<input type="checkbox"/> Telephone: <input type="checkbox"/> Mobile Phone: <input type="checkbox"/> E-mail: <input type="checkbox"/> Facsimile:	
Physical Address: <i>(required for FedEx delivery)</i>		
Priority of Request:		
<input type="checkbox"/> Trial, Subpoena, Search Warrant, etc. - Priority I (30 day fulfillment)		
<input type="checkbox"/> Still at the Investigative Stage - Priority II (45 day fulfillment)		
REQUIRED CRITERIA FOR DATA REQUEST		
Type of Data:	Medicare Part D Medicare Part B (in support of the Part D request) Medicare Part A (in support of the Part D request)	Plan Contacts Only Other:
Subject Name: <i>(Note: Multiple subjects may be submitted as an attachment.)</i>	Subject Type: Prescriber Pharmacy Beneficiary Drug Other:	
Subject Address:		

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List ALL available identification numbers related to this request:		
Individual NPI	DEA	Tax ID
Individual PIN	NCPDP (if pharmacy)	UPIN
Medicaid ID	HICN (if beneficiary)	OTHER
Reason for Request (Allegations):		
<i>(Note: Additional Information may be submitted as an attachment.)</i>		
Date(s) of Service*:		
<i>*Part D data is available beginning 1/1/2006.</i>		
Other data criteria / limitations:		
<i>(Note: Additional Information may be submitted as an attachment.)</i>		

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Submit via secure fax to the NBI Medic RFI Team at 410.819.8698
or E-mail as an **encrypted** file to MEDICRFITEAM@healthintegrity.org

Or mail to:

Bette Wood
Project Support
Health Integrity, LLC – NBI Medic
28464 Marlboro Avenue
Easton, MD 21601-2732

Questions concerning the formulation of this request or any data related questions may be directed to:



Lora Elliott

Data Analyst

Health Integrity, LLC – NBI Medic
28464 Marlboro Avenue, Easton MD 21601-2732

Direct Dial: 410-770-3025

Phone: 866-886-8658 x
11029 elliottl@healthintegrity.org



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FAX COVER SHEET

To: Bette Wood		Fax Number: 410.819.8698	
Project Support			
Phone Number: 866.886.2658, ext. 11193			
From:		Phone Number:	
Agency:		Fax Number:	
Notes:			
<p>Once received an email will be sent within 1 business day confirming receipt.</p> <p>Please ensure the HIPAA form is signed as we are unable to complete unsigned requests.</p> <p>Questions regarding the data should be addressed to Lora Elliott at 410.770.3025. Questions regarding receipt of the request may be directed to Bette Wood at 410.819.3555.</p>			

This message is confidential and may contain information that is privileged or protected from disclosure under applicable law. It is intended solely for the individual or entity to whom it is addressed. If you receive this message in error, please notify the sender immediately, and delete and destroy the original message. This message does not necessarily express the corporate opinion of Health Integrity and does not serve to bind Health Integrity to any order or contract unless supported by an explicit written agreement.