
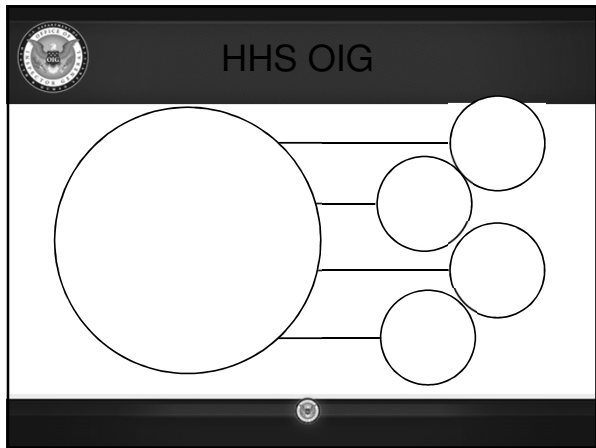

OIG UPDATE
4TH ANNUAL HCCA HEALTHCARE ENFORCEMENT
COMPLIANCE CONFERENCE
NOVEMBER 6, 2018

Gregory E. Demske
Chief Counsel
HHS Office of Inspector General


OIG Update


- Prioritizing HHS Oversight
- Priorities
- Other Areas
- Fraud Risk Indicator
- Administrative Enforcement and Guidance







-
- ### OIG Outputs – 2013-2017
- \$24.4 Billion in Expected Investigative and Audit Recoveries
 - 1,607 Audit and Evaluation Reports
 - 4,581 Criminal Actions
 - 3,221 Civil Actions
 - 18,222 Exclusions

-
- ### Desired Outcomes
- Healthier People
 - Lower Costs
 - Better Care
 - More Efficient System

 **Identifying Risk Areas**


- Program Vulnerabilities
- Data Analytics
- Hotline, Qui Tams, Tips
- OIG Collaboration



 **OIG-Identified Risks**


- HHS Top Management Challenges
- Work Plan
- Semi-Annual Report, HCFAC Report
- Audits, Evaluations, Investigative Results
- Website -- oig.hhs.gov





Opioids


- OIG Role
- HHS Program Improvement
- Identify and Hold Wrongoers Accountable
- Share/Collaborate with Partners




Opioid Use in Medicare Part D in 2017

Research shows that the risk of opioid dependence increases substantially for patients receiving opioids continually for 3 months


Nearly 1 in 3
Part D beneficiaries received at least 1 prescription opioid





76 Million
Number of opioid prescriptions paid for by Part D



1 in 10
Part D beneficiaries received opioids for 3 months or more



 U.S. Department of Health and Human Services
Office of Inspector General

 Source: Opioid Use in Medicare Part D Remains Concerning
Learn more: <https://oig.hhs.gov/opa/casestudies/2018>


Opioid Use in Medicare Part D in 2017


Almost
460,000

Part D beneficiaries received high amounts of opioids

About
71,000


Beneficiaries are at serious risk of opioid misuse or overdose

 U.S. Department of Health and Human Services
Office of Inspector General

 Source: Opioid Use in Medicare Part D Remains Concerning
Learn more: <https://oig.hhs.gov/opa/casestudies/2018>

Opioid Use in Medicare Part D in 2017

Almost 300 prescribers had questionable opioid prescribing patterns for the 71,000 beneficiaries at serious risk



U.S. Department of Health and Human Services
Office of Inspector General

Source: Opioid Use in Medicare Part D Remains Concerning
Learn more: <https://oig.hhs.gov/oea/reports/20180218>

OPIOID-RELATED EXCLUSIONS

587
EXCLUDED

Since the 2017 takedown,* the HHS Office of Inspector General's Exclusions Program issued notices to 587 health care providers, including doctors, nurses, pharmacy employees and other individuals who were convicted of health care fraud, patient abuse or neglect, or illegal activity tied to opioids.

Top 5 States with Exclusions

NC	53
NY	51
OH	45
MA	41
OK	37

Exclusions by Occupation


Nurses	402
Doctors	67
Pharmacy Services	40

U.S. Department of Health and Human Services Office of Inspector General

* Exclusions issued from June 2017-May 2018

Opioids

Toolkit:
Using Data Analysis To Calculate Opioid Levels and Identify Patients At Risk of Misuse or Overdose






Home and Community Based Services


- Home Health
- Hospice
- Group Homes
- Personal Care Services





Home Health




- Vulnerable Area
 - Medical Necessity
 - Kickbacks
- OIG Multi-Disciplinary Approach
- OCIG Industry Outreach
- Focus on Geographic Hot Spots



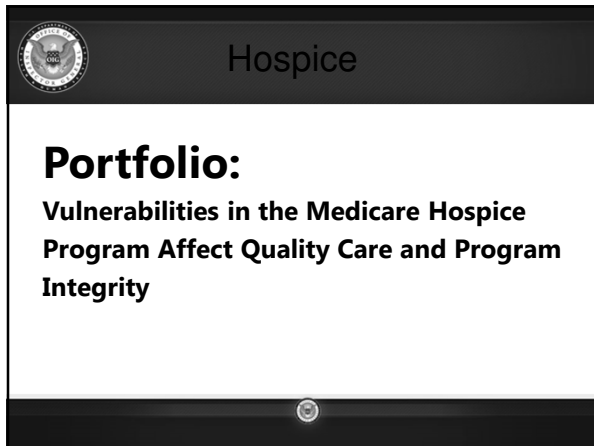
Vulnerabilities in Hospice Care


Over the past decade, hospice use has grown steadily. Medicare paid \$16.7 billion for hospice care in 2016.

SINCE 2006:


		
81%	43%	53%
Increase in spending for hospice care	Increase in the number of hospices	Increase in the number of hospice beneficiaries

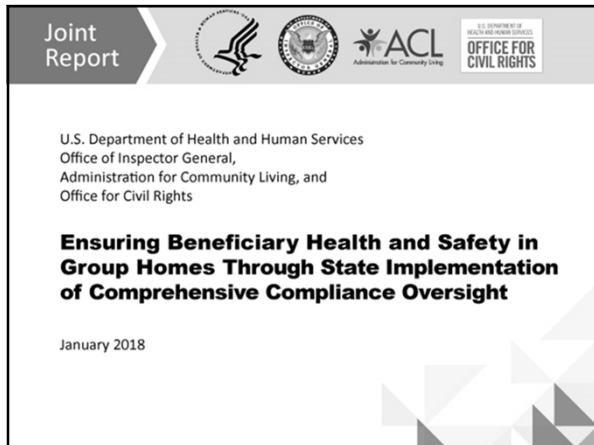
U.S. Department of Health and Human Services Office of Inspector General Source: Vulnerabilities in the Medicare Hospice Program Affect Quality Care and Program Integrity LEARN MORE: <https://oig.hhs.gov/hospiceportfolios18>







 Hospice

Portfolio:
Vulnerabilities in the Medicare Hospice Program Affect Quality Care and Program Integrity





Joint Report

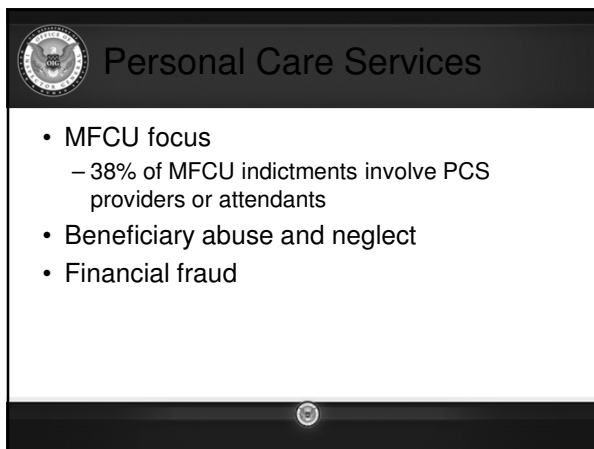



U.S. Department of Health and Human Services
Office of Inspector General,
Administration for Community Living, and
Office for Civil Rights

Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight


January 2018





 Personal Care Services

- MFCU focus
 - 38% of MFCU indictments involve PCS providers or attendants
- Beneficiary abuse and neglect
- Financial fraud





Skilled Nursing Facilities

- Failure to Report Abuse/Neglect
- Grossly Substandard Care
- Disaster Preparedness
- Unnecessary Therapy





Managed Care

- Providers
 - Impact on patients and programs
- Plans
 - Patient Access to Services
 - Payment Denials
 - Risk Adjustment
 - CMS Proposed Rule – October 26, 2018





Audits

- Focus on Quality and Safety
- Compliance Reviews
 - HHAs, Hospitals, Hospice, SNF
 - Risk-Based
- Part B
 - Ambulance, Orthotics, Psychotherapy, etc.
- Part C
 - RADV






2018 Takedown

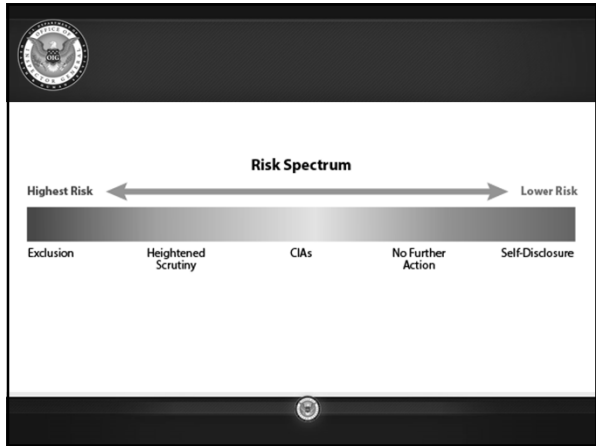
BY THE NUMBERS

- 601** Defendants Charged, Including:
- 165** Medical Professionals
- \$2** Billion in Losses
- 587** Exclusions Issued
- 58** Federal Districts
- 30** Medicaid Fraud Control Units
- 350** OIG Agents



False Claims Act

- Primary Remedy for Civil Fraud
- Retrospective
- OIG Exclusion – 1128(b)(7) of SSA
- Prospective
- Parallel Process
- Exclusion Criteria



This is a screenshot of the OIG website's 'Fraud Risk Indicator' page. It features the OIG logo and navigation tabs for 'About OIG', 'Reports & Publications', 'Fraud', 'Compliance', 'Exclusions', 'Newsroom', and 'Careers'. The main content area includes a 'Risk Spectrum' diagram, a search bar, and a list of 'I'm looking for' topics such as 'Accountable Care Organizations', 'Advisory Opinions', and 'Compliance 101 and Provider Education'. There are also buttons for 'EXCLUSIONS DATABASE' and 'REPORT FRAUD'.

This is another screenshot of the OIG website's 'Fraud Risk Indicator' page, showing a slightly different layout for the 'Risk Spectrum' diagram and the 'I'm looking for' section. The 'Risk Spectrum' diagram is identical to the one in the first image. The 'I'm looking for' section includes a search bar and a list of topics: 'Accountable Care Organizations', 'Advisory Opinions', 'Compliance 101 and Provider Education', 'Compliance Guidance', 'Corporate Integrity Agreements', 'Open Letters', 'RAT-STATS', 'Safe Harbor Regulations', 'Self-Disclosure Information', and 'Special Fraud Alerts, Bulletins, and Other Guidance'. There are also buttons for 'EXCLUSIONS DATABASE' and 'REPORT FRAUD', and a 'Stay Connected' section with social media links for Facebook, LinkedIn, Twitter, YouTube, Podcasts, and Widgets.

REPORT FRAUD Home - FAQs - FOIA - Contact - Overhead Header

U.S. Department of Health & Human Services
Office of Inspector General
 U.S. Department of Health & Human Services

Report #, Topic, Keyword Search
 Advanced

About OIG Reports & Publications Fraud Compliance Exclusions Newsroom Careers

Home > Compliance > Corporate Integrity Agreements > Evaluating Civil Fraud Risk

High Risk - Heightened Scrutiny

Parties are in the High Risk category and subject to heightened scrutiny, because they pose a significant risk to Federal health care programs and beneficiaries. This is because, although OIG determined that these parties needed additional oversight, they refused to enter CIAs sufficient to protect Federal health care programs. Parties in the High Risk category that reached settlements finalized on October 1, 2015 or later are listed below.

Provider	Date Settled	City/State	Press Release

I'm looking for
 Let's start by choosing a topic:
 Select One

- Accountable Care Organizations
- Advisory Opinions
- Compliance 101 and Provider Education
- Compliance Guidance
- Corporate Integrity Agreements
- Open Letters
- RAT-STATS
- Safe Harbor Regulations
- Self-Disclosure Information
- Special Fraud Alerts, Bulletins, and Other Guidance

Fraud Risk Indicator

- Transparency
- Fills Information Gap
- Audience:
 - Health Care Industry
 - Attorneys, Compliance Officers, etc.
 - Public

Corporate Integrity Agreements

- Increased Focus on Risks
- Refined Claims Reviews
 - Medical Necessity
 - Risk-Based
 - Provider-Specific
 - Hospitals and other types of providers
- Board/Executive Responsibility



Self-Disclosure Protocol

- Evidence of Commitment to Compliance
- Benefits:
 - Faster Resolution
 - Less Disruption
 - Lower Payment
 - Exclusion Release





OIG Administrative Enforcement

- Exclusion
 - Derivative
 - Affirmative
- Civil Money Penalties
 - Alternative Remedy
 - Expansion to Grants/Contracts
 - Increased Penalties
- Process

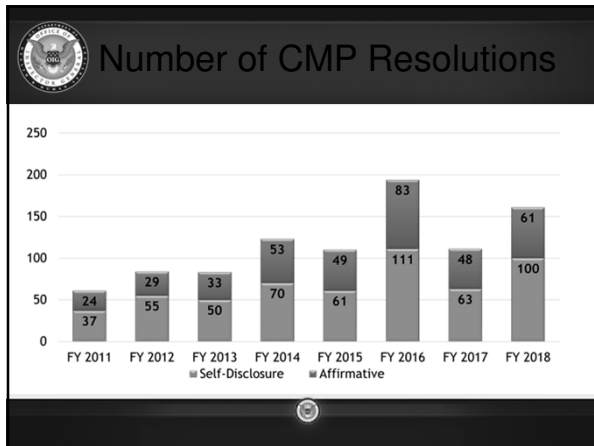


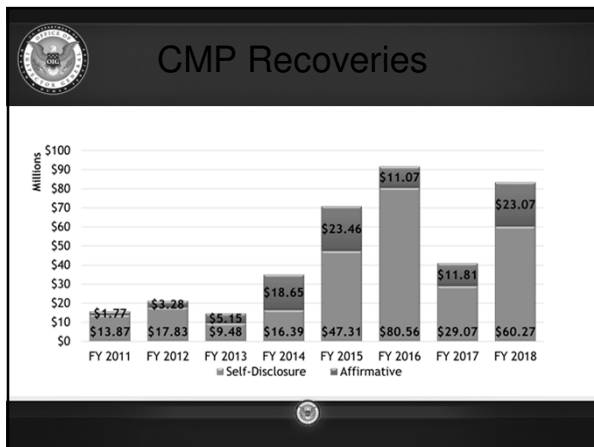


Goals of OIG Administrative Enforcement


- Protect patients
- Amplify OIG priorities/guidance
- Hold individuals accountable
- Complement DOJ enforcement
- Focus on Kickbacks
 - Payers and Recipients
 - Narrow grey areas
 - Level the playing field









-
- ### OIG Litigation
- BestCare and Maghareh
 - August 2018
 - 15-year exclusions
 - TRO Denied
 - Dr. Kallini
 - October 2018
 - \$4.9 Million
 - 20-year exclusion



Guidance

- Anti-Kickback Statute (and More)
- Safe Harbor Regulations
- Advisory Opinions
- Risk Areas
- Compliance Best Practices
- Regulatory Sprint to Coordinated Care
 - RFI





MITCHELL HAMLINE LAW REVIEW

SYMPOSIUM
HOT TOPICS IN HEALTHCARE COMPLIANCE: ENGAGE WITH LEADERS
SHARED GOALS: HOW THE HHS OFFICE OF INSPECTOR GENERAL SUPPORTS
HEALTH CARE INDUSTRY COMPLIANCE EFFORTS

**Gregory E. Demske,
Geeta Taylor,
and James Ortman**

VOLUME 44 • NUMBER 4 • 2018

REPORT FRAUD Home • FAQs • FOIA • Contact



Office of Inspector General
U.S. Department of Health & Human Services

Report #: Topic, Keyword
Advanced

About OIG
Reports & Publications
Fraud
Compliance
Exclusions
Newsroom
CA

Fraud Risk Indicator

OIG assesses future trustworthiness of defendants in civil healthcare fraud cases

[Learn More >>](#)

I'm looking

Let's start by

Select One

EXC



What's New
Latest Enforcement Actions
