



2019 SMP/SHIP NATIONAL CONFERENCE

The Life of a Case

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July 22–25, 2019 • San Diego, CA

Rebecca Kinney, ACL

UPDATED SMP CASEWORK PROCESS

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Overview

- ACL worked with CMS and OIG to determine:
 - What is working?
 - What isn't?
 - How can we improve the good work already being done?
 - How can we ensure our cases are getting to the right places when we make referrals?

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New Process – High Level Overview

- **Starting immediately**
- Continue to send appropriate cases with all documentation to OIG via ACL
 - ACL will make the referrals to OIG via the OIG Portal
- Send cases to CMS Regional Office Medicare A & B Fraud Referral mailbox
 - SMPs will email case details to the CMS mailbox and work with the CMS RO caseworker as needed

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New Tip Sheet

- “Where and When to Refer” Tip Sheet
- Provides step-by-step guidance on how to handle different case situations
- Available soon!
 - Will be sent out via the SMP Listserv as soon as it’s ready and
 - Can be found on the SMP Resource Center’s Library

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Additional Information

- Scheduled Webinars:
 - August 8th at 1pm (ET) –Where to Refer
 - August 20th at 2:30 pm (ET) – Building a Case
- Continued technical assistance and training will be available moving forward
- Contact the SMP Resource Center with questions during roll-out

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CMS RO FFS Inquiry Handling Process

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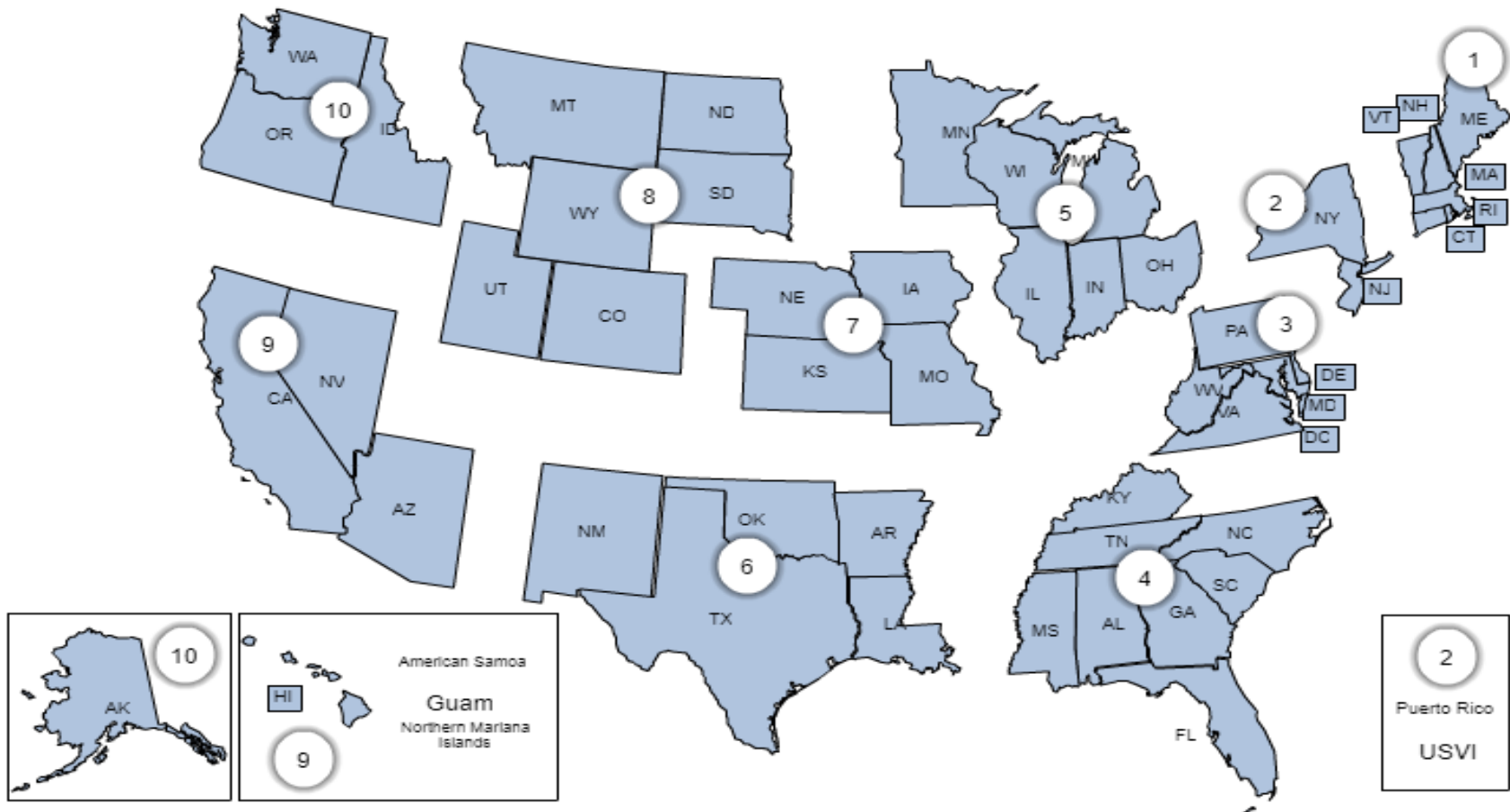
Agenda

- RO structure
- RO fraud inquiry trends
- MAISTRO system
- What makes a good inquiry
- RO inquiry handling processes
- Who to contact

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CMS Regional Office Map



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FFS DME Brace Fraud Inquiries

- Beneficiaries receiving cold calls over the phone and postcards/flyers in the mail
- Beneficiaries receiving unsolicited braces (e.g., knee, back, leg, etc.) at their home
- Marketing door-to-door and at senior centers, churches, and other community sites often advertised as “free” to Medicare beneficiaries

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FFS Genetic Testing Fraud Inquiries

- Beneficiaries receiving cold calls over the phone
- Beneficiaries receiving unsolicited test kits in the mail
- Genetic testing companies taking samples at senior centers, churches, parking lots, and at home
- Genetic testing companies give incentives and claim that tests are “free” to Medicare beneficiaries

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MAISTRO

- CFMFFSO inquiry tracking and reporting system
- Stores all inquiry details, supporting documents, and related emails

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What Makes a Good Inquiry

- Beneficiary name and contact info
- HICN/MBI
- Date and location of the reported FWA
- Circumstances of the FWA
- What actions did the bene take (e.g., give out HICN/MBI, call 1-800-MEDICARE)?
- Were claims submitted? Copy of the MSN is helpful.
- Names and contact info of the individual(s) involved in the FWA

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Inquiry Handling Process - DME Brace Fraud

RO receives complaint

- Assigned to regional Program Integrity (PI) staff person for review and action.

Referral to DME MAC

- DME MAC requests medical records from supplier.
- Unified Program Integrity Contractor (UPIC) referral, if needed.

Referral to NSC SACU

- Have DMEPOS supplier standards been violated?
- Does the supplier's PTAN need to be revoked?

RO responds to bene

- Issue has been referred to the contractor and law enforcement, if necessary, and to monitor MSN for corrections.
- Resolution details not provided to SMP/SHIP.

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Inquiry Handling Process - Genetic Testing Fraud

RO receives
complaint

- Assigned to PI staff person for review and action.

Referral to
A/B MAC

- A/B MAC requests medical records from provider.
- Unified Program Integrity Contractor (UPIC) referral, if needed.

RO responds
to bene

- Issue has been referred to the contractor and law enforcement, if necessary, and to monitor MSN for corrections.
- Resolution details not provided to SMP/SHIP.

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FFS Fraud Referral Contacts

Region	States and Territories	E-mail Address	Phone Number
1 - Boston	Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	robosfm@cms.hhs.gov	(617) 565-4630
2 - New York	New Jersey, New York, Puerto Rico, Virgin Islands	ronycfm@cms.hhs.gov	(212) 616-2500
3 - Philadelphia	Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia	rophicfm@cms.hhs.gov	(215) 861-4154
4 - Atlanta	Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee	partabinquiriesro4@cms.hhs.gov	(404) 562-7347
5 - Chicago	Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin	rochifm@cms.hhs.gov	(312) 353-9087
6 - Dallas	Arkansas, Louisiana, New Mexico, Oklahoma, Texas	rodalfm@cms.hhs.gov	(214) 767-6441
7 - Kansas City	Iowa, Kansas, Missouri, Nebraska	rokcmfm@cms.hhs.gov	(816) 426-5033
8 - Denver	Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming	rodenmmfm@cms.hhs.gov	(303) 844-2111
9 - San Francisco	Arizona, California, Hawaii, Nevada, Pacific Territories	rosfofm@cms.hhs.gov	(415) 744-3658
10 - Seattle	Alaska, Idaho, Oregon, Washington	rosea_dfmffso2@cms.hhs.gov	(206) 615-2399

CFMFFSO Lead Program Integrity Contacts

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HHS OIG HOTLINE OPERATIONS

July 2019

Nenette Day

Assistant Special Agent in Charge

Director of Hotline Operations

800-HHS-TIPS/www.HHSTIPS.gov





Overview of HHS and the OIG

- HHS has an annual budget of over \$1 Trillion
- A quarter of every dollar spent by the US Government goes through HHS
- HHS is the largest Grant-making agency in the Government.
- As of 2015 there were 79,540 employees (not including grantees and contractors)
- OIG monitors all of this through Audit, Evaluations, Inspections and Investigations





OIG Regions

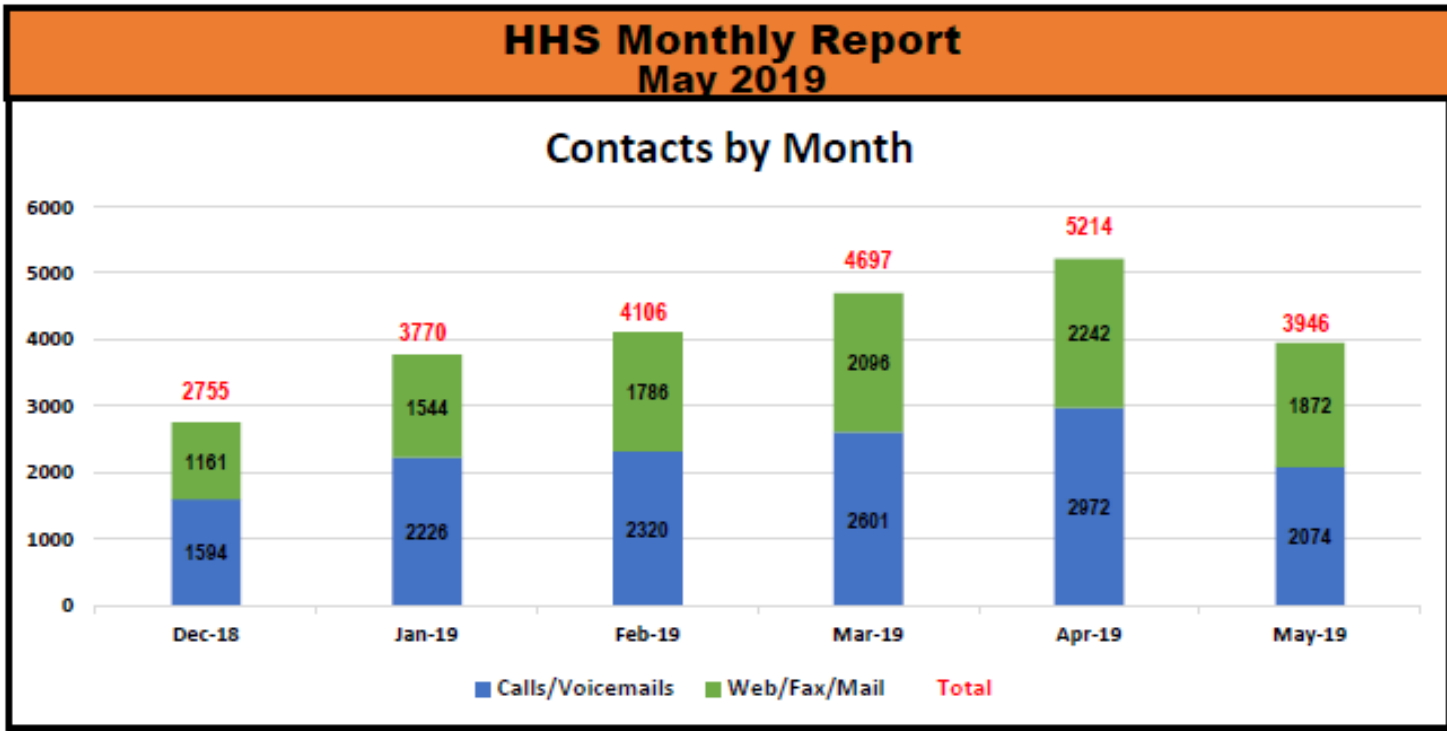


- OIG has approximately 500 Special Agents.
- Hotline Operations has approximately 30 Call Center employees and 6 Investigative Analysts.
- The Hotline accepts complaints via call center, website, fax and mail.
- OIG has 10 investigative Regions





Hotline Complaint Volume



- Hotline handles 120,000 to 140,000 calls, faxes, letters and web submissions every year.
- Every single tip is reviewed by an OIG employee.





Complaint Routing

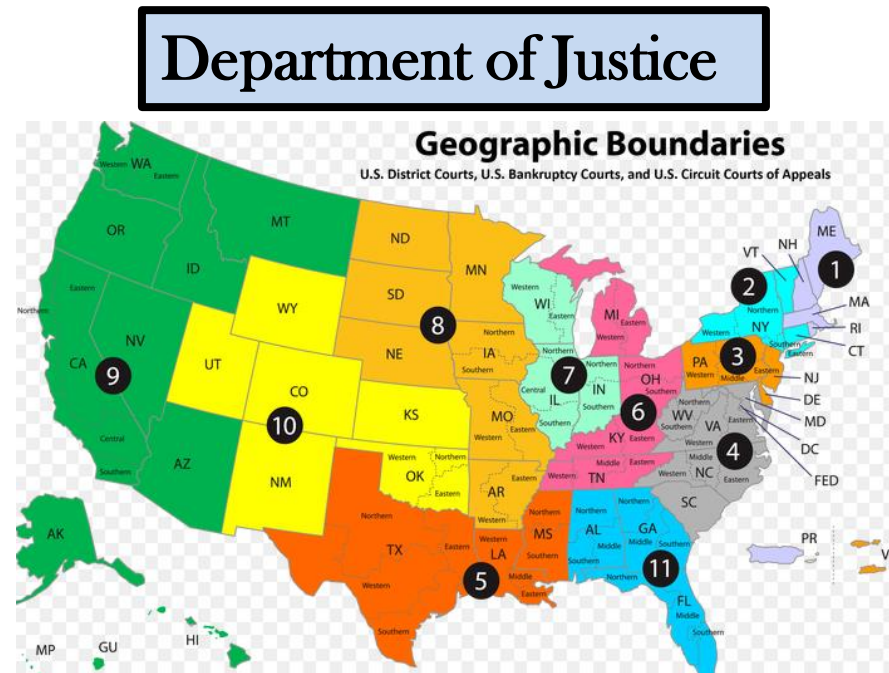
- Tier 1 receives a complaint and inputs it into our Case Management System
- Complaint is categorized
 - No Basis for Action
 - HHS OIG Interest
 - Other HHS Op/Div Interest
 - Other Federal/State Agency Interest
- Actionable complaints are then forwarded to an OIG Regional Office, HHS Operating Division or other Government agency
- If the Region declines, they can request the complaint be forwarded to an OpDiv or another agency
- We only ask for follow-up on high level complaints





Investigations

- Each Region makes the decision on which cases they will investigate. Some of the determining factors:
 - Availability of resources to investigate
 - Regional priorities/Significance of the damage/threat/potential public harm, etc
 - The likelihood of a successful DOJ prosecution
 - Are civil or administrative options available





Can you give us the status of an Investigation?

- With the volume of complaints we receive, it is simply not possible.
- And even if we could, we cannot confirm the existence of an investigation.
- The capacity to conduct covert investigations is critical.
- If necessary for the investigation, you will be contacted.





Planned Hotline Innovations

- Branding HHS TIPS
- Data analytics and trend analysis
- Publicizing HHS TIPS in hotspots or other areas of concern/interest
- Improved referral process for Operating Divisions and SMP
- Efficiency as the guiding factor





What Makes a Good Complaint

- Details, Details, Details
- Complete and accurate information
- If applicable, an impact statement
- Supporting documentation or witnesses
- Anonymous complaints are very problematic (ex. poison pen)
- Timely reporting





ASAC Nenette Day HHS OIG / Hotline Operations

