## HHS OIG - Updates and Key Priorities



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## HHS OIG - HCCA Session Topics

HHS OIG Organization
 Mission, people, and framework

- II. Key Priorities
  - OIG Work Plan
  - Focus Area Examples: adverse events, nursing homes, opioids
- III. HHS and OIG Looking Forward 2018-2020:
  - HHS Top Management and Performance Challenges
  - · Compliance Tools and Resources

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### HHS Inspector General – Daniel Levinson



- · USC Phi Beta Kappa, Georgetown Law
- General Counsel of the U.S. Consumer Product Safety Commission – 1982
- Appointed by Pres. Reagan to Chair U.S. Merit Systems Protection Board - 1986
- Appointed by Pres. George W. Bush to IG of the U.S. GSA - 2001
- Appointed by Pres. George W. Bush to IG of HHS 2005



#### HHS Office of Inspector General



➤ Mission: protect the integrity of HHS programs and the health and welfare of beneficiaries "Prevent – Detect – Enforce"

#### > Components

- · Office of Counsel to the IG
- · Office of Investigations
- · Office of Audit Services
- · Office of Evaluation and Inspections
- > Scope
  - > Largest OIG at 1600
  - > \$1.3 Trillion, 1/4 of U.S. budget, 300 programs

### **OIG Daily Work**

Authority and Access
 Direct access to all records pertaining to Federally-paid programs

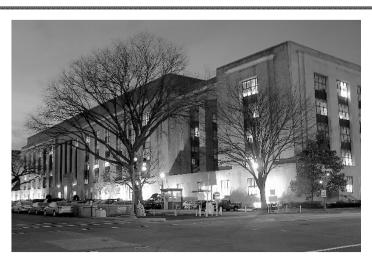
Partnerships
 OIG partners in Congress, DOJ, U.S. Attorney's Office, DEA,
 Medicaid Fraud Control Units, and local law enforcement

Data Analytics
 Enhanced screening to ID poor billers, predictive models, anomaly detection, social network analysis

Hot Line – 800-HHS-TIPS
 1000s of actionable tips each year, option for anonymous reporting

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# Wilber J. Cohen Federal Building



# Wilber J. Cohen – "Mr. Medicare"



1913 – 1987

#### Social Reformer

- Social Security Act 1935
- Medicare 1965

#### Secretary of HEW

- End of LBJ administration— 1968
- 249 days 1968

#### Later Evaluations

- Social Security 1972
- New Deal "50 years later" 1986

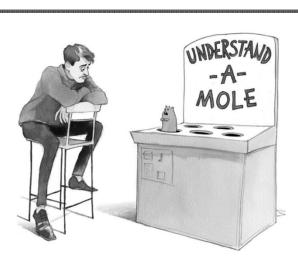
#### Fraud — whack-a-mole dilemma

"Solving fraud has no definitive end. When one problem is solved, fraud goes somewhere else. OIG is developing new approaches to identify unknown, undetected and emerging patterns...

The whack-a-mole approach ... how do we get ahead of that? How do we counter both existing and new fraud, waste and abuse?"

Caryl Brzymialkiewicz
 OIG Chief Data Officer

The New Yorker - October 2, 2017



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### Medicare Fraud Strike Force

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- Geographic "hot spots" and high dollars
  Focus in areas and providers most likely to generate fraud, even at
  opportunity cost to full coverage
- Data analytics married with field work
   Recent work has focused on joining quantitative with qualitative
   more effectively build a case
- Takedowns
  Focused law enforcement effort conducted in a single day

OIG Focus Example: Opioid Misuse





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Opioid - use and misuse, growing impact

- > Narcotics to manage pain from surgery, illness or injury
  - Estimated 100M living in chronic pain
  - 1 in 3 Medicare patients
- > HHS pays for most prescription opioids
  - Medicare Part D 40M beneficiaries (\$8B)
  - Medicaid 72M beneficiaries (\$14B)
- > System is broken
  - IOM estimates only 10 percent receive treatment
  - · Half of opioid deaths from prescriptions

### OIG Work -opioid use and misuse

22,000 Medicare Part D patients got high amounts

- 4+ prescribers
- 4+ pharmacies

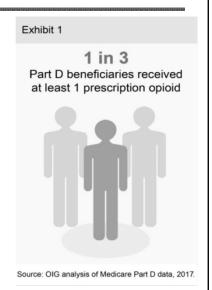
Example patient: 2,800 pills

73 scripts

11 providers

20 pharmacies

... in 1 year



"Takedown" - July 2010-July 2018

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Stage 1
Focused investigation,
data analytics, and
partnership

Stage 2
One-day strike force effort to fell healthcare criminals across the nation

# Takedown target day



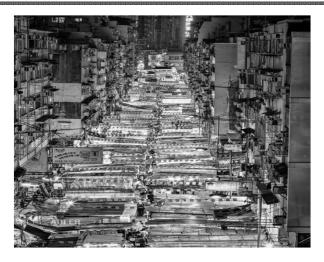
# OIG – June 16, 2018 takedown

- Focused largely on opioids
- 58 jurisdictional districts
- 600 defendants
- 165 medical professionals
- 32 physicians
- 67 physicians issued exclusions
- 402 nurses issued exclusions

\$2.1 billion

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OIG Focus Example: Nursing Homes



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## OIG Work: Quality of Care in Nursing Homes

#### OIG Area 1: Resident Harm

- ➤ Adverse Events = 33% harmed
- ➤ Abuse and Neglect = lack of reporting

#### OIG Area 2: Emergency Preparedness

- > Homes met requirements, but were unprepared
- ➤ New requirements since 2017

#### OIG Area 3: State Agency Oversight

## HHS - Top Management Challenges





12th Secretary of HHS Alex Azar

## HHS - Top Management Challenges 2018

- > Delivering System Reform and Cost Reduction
  - · Value-based purchasing, incentives/penalties
  - High cost areas pharma, preventive, end of life care
- Maximizing health IT capability
  - · CMS and OCR: interoperability, telehealth
  - NIH: Precision Medicine Initiative
- Quality, Safety and Access for Vulnerable Populations
  - · Maintaining quality and access Medicaid, IHS
  - · Huge influx to Medicare and long-term care

# HHS Shift in Management – 4 observations

Observation 1:

"Ruthless prioritization"

Observation 2:

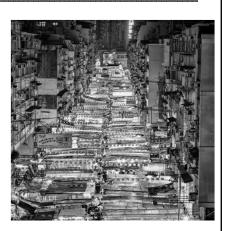
Communication with providers

Observation 3:

Business-caliber accountability

Observation 4:

Maximizing data analytics



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### OIG - Compliance Tools and Resources

- > Toolkits
  - Measuring Compliance Program Effectiveness
  - · Adverse Events Trigger Tools
  - · Identifying Patients at Risk of Opioid Abuse
- > Provider Compliance Resources and Training
  - · Videos and Audio Podcast
  - Compliance Program Guidance and Presentations
- > Website Documents
  - "Living" Work Plan planned and completed studies
  - · Unimplemented Recommendations

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#### Contact and Reading Links

- Ruth Ann Dorrill ruth.dorrill@oig.hhs.gov, 214-767-2325
- Suggested Reading
  - Health Affairs
     Federal Healthcare News, Research, and Data
     www.healthaffairs.org
  - Modern Healthcare
     Healthcare Business News, Research, and Data
     www.modernhealthcare.com
  - The Incidental Economist, Austin Frakt and Aaron Carroll http://theincidentaleconomist.com/

