CMS/OIG Regulatory Compliance Highlights for 2018

Paul W. Kim, JD, MPH pkim@coleschotz.com 410-528-2979

<u>Cole Schotz</u>

MPFS

- Patients Over Paperwork
- Nonexcepted Off-Campus Provider-Based
- Telehealth Services

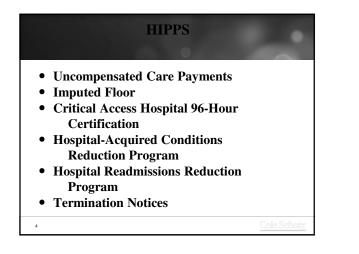
2

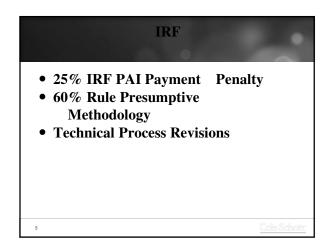
3

- Appropriate Use Criteria for Advanced Diagnostic Imaging
- Medicare Diabetes Prevention Program Expanded Model
- Patient Relationship Codes
- Outpatient Therapy Caps

HOPPS

- Patients Over Paperwork
- Supervision of Hospital Outpatient Therapeutic Services
- Inpatient Only List
- Laboratory DOS
- ASC Covered Procedures List

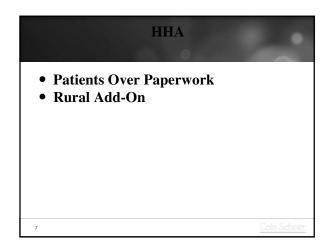




SNF

- End-Stage Renal Disease Quality Incentive Program
- Survey Team Composition

6



OIG Advisory Opinions

- OIG Advisory Opinion No. 17-09
- OIG Advisory Opinion No. 17-08
- OIG Advisory Opinion No. 17-07

8

9

• Rescission of OIG Advisory Opinion No. 06-04

OIG Work Plan

- State Medicaid Fraud Control Units FY 2017 Annual Report
- Review of Statistical Methods Within the Medicare Fee-For-Service Administrative Appeal Process
- Potential Abuse and Neglect of Medicare Beneficiaries
- Questionable Billing for Off-the-Shelf Orthotic Devices
 Status Update on States' Efforts on Medicaid-Provider
- Status Update on States' Efforts on Medicaid-Provider Enrollment
 Hosnitals Billing for Severe Malnutrition on Medicare
- Hospitals Billing for Severe Malnutrition on Medicare
 Claims

ole Schotz

