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**Program Integrity in State Medicaid:**  
*Best Practices for Coordination between  
the Compliance Officer and the State  
Medicaid Inspector General*

Healthcare Enforcement Compliance Institute 2017

October 30, 2017

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**Introductions**

Bradley K. Hart, Inspector General  
*Illinois Department of Healthcare & Family Services,  
Office of the Inspector General*

Cathy Bodnar, Chief Compliance and Privacy  
Officer  
*Cook County Health and Hospitals System*

Ryan Tyrrell Lipinski, Compliance Officer  
*Cook County Health and Hospitals System  
CountyCare Health Plan*



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**What We'll Cover**

- ▶ Overview of the Illinois Medicaid Program
  - ▶ Role of the Inspector General's Office
- ▶ CCHHS & CountyCare Compliance Programs
- ▶ Coordination and Collaboration
- ▶ Trends and Priority Areas for 2017-18
- ▶ Program Integrity Resources

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**Medicaid in the State of Illinois & Program Integrity**

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**Medicaid Program in Illinois**

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- ▶ Approximately \$20.0b program
- ▶ 3.1 million lives
- ▶ 65-67% managed care

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**Role of Inspector General**

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- ▶ "to prevent, detect and eliminate fraud, waste, abuse, mismanagement and misconduct in the Illinois Medical Assistance Program..."
- ▶ Jurisdiction over 3 state agencies
- ▶ Audits, peer reviews, advanced data mining, LTC-ADI investigations, administrative sanctions
- ▶ Recoupment, cost savings and cost avoidance of \$220.4m in FY 2016

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*CCHHS Compliance Program*

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*CountyCare Compliance Program*

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**Program Integrity**

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**Effective Collaboration in Managed Care Oversight**

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Ensure Collaboration between Law Enforcement Partners

Ensure Quality FWA Reporting and Referrals

Ensure Quality Investigations and Audits

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**Monthly Task Force Meetings**

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- ▶ Review of MCO Program Integrity Activities & FWA work plan
- ▶ Review MCO investigations, data analysis, & adverse actions taken by the MCO
- ▶ Opportunity for ongoing guidance
- ▶ Identification of high risk areas
- ▶ Ensure quality investigations & referrals

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**Ensure Quality & Uniform Reporting**

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**Ensure Consistent Reporting Requirements**

- ▶ New Program Integrity Activities
- ▶ Adverse Actions
- ▶ Tips
- ▶ Preliminary Investigations
- ▶ Full Investigations/ Referrals
- ▶ Audits Initiated & Completed
- ▶ Overpayments Identified/ Recovered
- ▶ Outliers
- ▶ Lock In Program



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**Comprehensive Referrals from MCO**

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- ▶ Provider Information, including name, NPI and any other known ID #
- ▶ Contract(s) with MCO
- ▶ Credentialing Information
- ▶ Disclosure(s)
- ▶ Provider Education; including that specific to activity under review
- ▶ Fee Schedule
- ▶ Audits/Communication
- ▶ Medical records and all supporting documentation
- ▶ Information on Pre-pay; including Reason(s), Status and History
- ▶ MCO Policy violation
- ▶ Relevant regulations and laws
- ▶ Provider participation history & status
- ▶ Records reviewed
- ▶ MCO Coders Report
- ▶ Other pertinent Information

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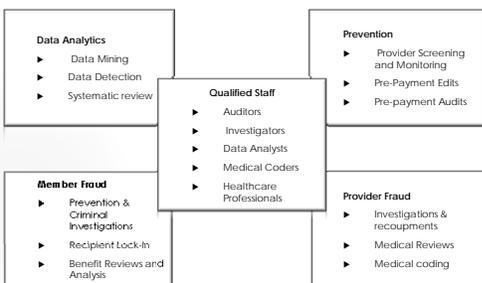
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**What the OIG wants from the MCOs**

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**Trends and Priority Areas related to Program Integrity for 2017-18**

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- ▶ OIG
- ▶ CountyCare Health Plan
- ▶ Cook County Health and Hospitals System

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**Resources related to Program Integrity**

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- ▶ **HFPP** (Healthcare Fraud Prevention Partnership)
  - ▶ <https://hfpp.cms.gov/>
- ▶ **NAMPI** (National Association for Medicaid Program Integrity)
  - ▶ <https://nampi.net/>
- ▶ **MAIA** (Midwest Anti-Fraud Insurance Association)
- ▶ **PLATO** (Predictive Learning Analytics Tracking Outcome)
  - ▶ <http://www.healthintegrity.org/products/PLATO/index.html>
- ▶ **NHCAA** (National Health Care Anti-Fraud Association)
  - ▶ <https://www.nhcaa.org/>
- ▶ **AHLA** (American Health Lawyers Association)
  - ▶ <https://www.healthlawyers.org/Pages/home.aspx>

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**Questions?**

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**Thank You!**

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COOK COUNTY HEALTH  
& HOSPITALS SYSTEM  
**CCHHS**




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