**How Physicians and Other Providers Can Promote Program Integrity**

Physicians ordering home health services and DME play an important role in promoting integrity to minimize and prevent fraud, waste, and abuse in Medicaid programs. The following are key points for providers to remember.

* Confirm eligibility: Verify the Medicaid eligibility status of patients at the time of service.
* Include identifiers: If required by the State when ordering services or supplies, the ordering provider’s signature and National Provider Identifier (NPI) should be included on the CMN or other prior authorization form.21, 22
* Order appropriately: Order according to the medical needs of the beneficiary within the limits set by the State.
* Maintain organized records: Keep patient records organized and up-to-date, and confirm that the patient’s condition warrants the service requested in the CMN or prior authorization request.
* Educate staff: Providers should educate staff on the issues and schemes that constitute fraud, waste, and abuse.
* Practice within scope: Always document the medical necessity of the service(s) ordered. If a medically- unnecessary service is billed or if the documentation does not justify medical necessity, it may be considered a “false claim.”
* Protect yourself: Be on the alert for other professionals who may make inappropriate requests, such as a “quick signature” on a document for a patient never seen, asking for additional patient services because of convenience rather than medical necessity (e.g., ambulance transportation instead of a medivan), asking for beneficiary medical identifiers when there is no specific need, or offering to provide remuneration for beneficiary referrals.

**References**

U.S. Department of Health & Human Services. (May 20, 2009). “Attorney General Holder and HHS Secretary Sebelius Announce New Interagency Health Care Fraud Prevention and Enforcement Action Team.” Retrieved August 25, 2010, from <http://www.hhs.gov/news/press/2009pres/05/20090520a.html>

Government Accountability Office. (March 9, 2011). Medicare and Medicaid Fraud, Waste, and Abuse, Effective Implementation of Recent Laws and Agency Actions Could Help Reduce Improper Payments. Statement of Kathleen M. King Director, Health Care. Retrieved July 9, 2012, from <http://www.gao.gov/assets/130/125646.pdf>

SocialSecurityAct,§1902(a)(10)(D).StatePlansforMedicalAssistance.RetrievedAugust6,2012 from

<http://www.socialsecurity.gov/OP_Home/ssact/title19/1902.htm>

**References (cont.)**

SocialSecurityAct,§1915(c).ProvisionsRespectingInapplicabilityandWaiverofCertainRequirementsofThis Title. Retrieved July 6, 2012, from <http://www.ssa.gov/OP_Home/ssact/title19/1915.htm>

CodeofFederalRegulations,42C.F.R.§440.230(2)(b)(d).Sufficiencyofamount,duration,andscope.Retrieved April 10, 2012, from <http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=b44b980140f072ed701a782d89fddcf6> &ty=HTML&h=L&r=SECTION&n=42y4.0.1.1.9.2.109.5

Code of Federal Regulations, 42 C.F.R. § 440.70(a)(2). Home health services. Retrieved August 2, 2012, from <http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=b44b980140f072ed701a782d89fddcf6&ty=HTML&h=L&r> =SECTION&n=42y4.0.1.1.9.1.109.9

Social Security Act, § 1902(a)(27). State Plans for Medical Assistance. Retrieved April 10, 2012, from

<http://www.ssa.gov/OP_Home/ssact/title19/1902.htm>

Code of Federal Regulations, 42 C.F.R. §440.70 (2). Home Health Services. Retrieved April 5, 2012, from <http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=b44b980140f072ed701a782d89fddcf6&ty=HTML&h=L&>

r=SECTION&n=42y4.0.1.1.9.1.109.9

Title-471/Chapter-07.pdf

U.S. Department of Justice. (February 28, 2012). “Dallas Doctor Arrested for Alleged Role in Nearly $375 Million Health Care Fraud Scheme.” Retrieved April 16, 2012, from <http://www.justice.gov/opa/pr/2012/February/12-> crm-260.html

U.S.Attorney’sOffice,CentralDistrictofCalifornia.(January12,2012).“OwnerOfWestlakeHomeHealthAgency Pleads Guilty To Bilking Medicare Out Of Over $5 Million In Health Care Fraud Scheme.” Retrieved April 16, 2012, from <http://www.justice.gov/usao/cac/Pressroom/2012/008.html>

U.S. Department of Justice. (February 28, 2012 ). “Dallas Doctor Arrested for Alleged Role in Nearly $375 Million Health Care Fraud Scheme.” Retrieved April 16, 2012, from <http://www.justice.gov/opa/pr/2012/> February/12-crm-260.html

CodeofFederalRegulations,42C.F.R.440.70(b)(3).HomeHealthServices.RetrievedFebruary24,2012, from <http://www.gpo.gov/fdsys/pkg/CFR-2010-title42-vol4/pdf/CFR-2010-title42-vol4-sec440-70.pdf> 15 Nebraska Administrative Code. Nebraska HHS Finance and Support Manual, 471 NAC 7-007.01. Retrieved July 9, 2012, from <http://www.sos.ne.gov/rules-and-regs/regsearch/Rules/Health_and_Human_Services_System/> Title-471/Chapter-07.pdf

National Association of Medicaid Fraud Control Units. (May/June 2010). Medicaid Fraud Report (p. 14). Retrieved September 17, 2010, from <http://www.namfcu.net/resources/medicaid-fraud-reports-newsletters/2010-> publications/10MayJune.pdf

National Association of Medicaid Fraud Control Units. (January/February 2009). Medicaid Fraud Report (p. 5). Retrieved September 17, 2010, from <http://www.namfcu.net/resources/medicaid-fraud-reports-newsletters/2009-> publications/09JanFeb.pdf

National Association of Medicaid Fraud Control Units. (November/December 2009). Medicaid Fraud Report (p. 14). Retrieved September 17, 2010, from <http://www.namfcu.net/resources/medicaid-fraud-reports-> newsletters/2009-publications/09NovDec.pdf

**How to Report Fraud**

Contact your State Medicaid Fraud Control Unit; State Medicaid agency; or the U.S. Department of Health & Human Services, Office of Inspector General (HHS-OIG) online at <https://oig.hhs.gov/fraud/hotline/> on the HHS- OIG website.

Contact HHS-OIG by mail, phone, or fax:

Office of Inspector General  
U.S. Department of Health & Human Services ATTN: HOTLINE  
PO Box 23489  
Washington, DC 20026

**Phone**

1-800-HHS-TIPS (1-800-447-8477)

**TTY**

1-800-377-4950

**Fax**

1-800-223-8164