

## Part B Insider (Multispecialty) Coding Alert

### Enforcement: Feds Target COVID Fraud in New Report

**Caution: Expect scrutiny to only get more intense.**

If you thought the feds would put the brakes on enforcement during COVID, think again. New data highlights that even in the middle of a pandemic, they're focused on stopping Medicare fraud - and COVID-related schemes are their top mark.

**Details:** With more than 67 reviews of COVID-19-related programs in the works, the HHS Office of Inspector General (OIG) is pushing full steam ahead with its investigations and oversight, suggests the agency's latest Semiannual Report to Congress released on May 28.

"OIG is aggressively investigating pandemic-related fraud that harms individuals and jeopardizes public health efforts," said Principal Deputy Inspector General **Christi A. Grimm** in the report. "We are using every tool in our arsenal to bring criminals to justice, recover ill-gotten gains, and alert the public to emerging fraud schemes."

Grimm continued, "OIG is partnering on this effort with law enforcement and oversight agencies across Government, including through the recently announced COVID-19 Fraud Enforcement Task Force."



#### Check Out These Top COVID Takeaways

This latest Semiannual Report offers a tally of OIG's biggest administrative, civil, and criminal actions while also listing its extensive investigative summaries and reports over this six-month period. A large part of the brief covers COVID-related issues as the agency continues to analyze providers' data to "identify, monitor, and target potential fraud, waste, and abuse affecting HHS programs and beneficiaries and to promote the effectiveness of HHS's COVID-19 response and recovery programs," the report says.

Consider these five OIG highlights in response to the PHE, many of which are ongoing as the feds vigilantly pursue COVID-19 fraud and abuse:

**1. Nursing homes:** OIG utilized nursing homes' surveys to uncover that infection controls were significantly lacking and impacting the health of the most vulnerable patients.

**2. Hospitals:** Analysis of how hospitals responded to the pandemic revealed that "operating in 'survival mode' for an extended period of time has created new and different problems than experienced earlier in the pandemic and exacerbated longstanding challenges in health care delivery, access, and health outcomes," the report indicates

**3. Senior care:** During the reporting period, OIG looked into the rise in abuse and fraud in elder care during the pandemic, homing in on COVID controls, patient neglect, safety, and misconduct. OIG offers extra assistance and more insight on current investigations on its Operation CARE website at <https://oig.hhs.gov/fraud/care/>.

**4. Testing:** OIG "partnered with six federal OIGs to analyze COVID-19 testing, including the amounts paid by Medicare Part B for these tests," explain attorneys with King & Spalding LLP in online legal analysis. The culmination of the OIGs' work, the Federal COVID-19 Testing Report, offers a thorough outline of the factors that impacted national testing issues from lack of actual tests to changing Centers for Disease Control and Prevention (CDC) guidelines to health equity problems. Find the brief

at [www.pandemicoversight.gov/media/file/federal-covid-19-testing-report-data-insights-six-federal-health-care-programs](http://www.pandemicoversight.gov/media/file/federal-covid-19-testing-report-data-insights-six-federal-health-care-programs).

**5. Scams:** COVID fraudsters aren't picky; they are targeting both beneficiaries and providers, according to the report. "Scammers are using telemarketing calls, text messages, social media platforms, and door-to-door visits to perpetrate COVID-19- related scams," OIG cautions. "Fraudsters are offering COVID-19 tests, COVID-19 vaccine appointments, HHS grants, and Medicare prescription cards in exchange for personal details, including Medicare information."



**Critical:** Though the report explores the pandemic's impact on patient care and how the agency addressed those deficits with oversight and guidance, OIG also touches on an important side effect of the drawn-out PHE: the well-being of healthcare workers. A national pulse survey by OIG revealed that nationwide staffing shortages led to "exhaustion and trauma" that greatly "affected staff's mental health, the report says.

"OIG noted that this survey reveals longer-term opportunities for improvement to address challenges that existed before and were ultimately exacerbated by the pandemic," point out the King & Spalding attorneys.

**Tip:** "The OIG's semiannual reports indicate the current areas of concern for the OIG. Health care providers can utilize the insight offered by the report to review their own practices as they relate to the OIG's investigative focus issues and thereby ensure they are not on a path to becoming a statistic on the next report," maintains attorney **Jonell B. Beeler** with Baker Donelson in Jackson, Mississippi, in online analysis.

**Resource:** Review the Semiannual Report at <https://oig.hhs.gov/reports-and-publications/archives/semiannual/2021/2021-spring-sar.pdf>.