

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES : CMS Creates Health Care Fraud Prevention and Enforcement Action Team (HEAT) to Tackle Fraud

Plus: Medical practices spend \$85,276 per physician annually to deal with health insurance plans, new report says.

Youve got your eye on the RACs, the OIG, and your payers auditors, but now CMS takes its oversight up a notch with a new interagency strike force.

On May 20, CMS announced that it developed the Health Care Fraud Prevention and Enforcement Action Team (HEAT) to combat fraud in the Medicare program. In addition, CMS will expand its Strike Force team operation to target fraud locally in Detroit and Houston (Strike Force already operates in South Florida and Los Angeles).

With this announcement, we raise the stakes on health care fraud by launching a new effort with increased tools, resources, and a sustained focus by senior-level leadership, said **Attorney General Eric Holder** in a statement. Every year we lose tens of billions of dollars in Medicare and Medicaid funds to fraud.

The HEAT team will be comprised of senior officials from the Departments of Justice and Health and Human Services to fight Medicare fraud.

The joint task force created a new Web site called Stop Medicare Fraud, which you can access by going online to www.hhs.gov/stopmedicarefraud.