

PUBLICATION

OIG Submits Spring 2019 Semiannual Report to Congress

June 20, 2019

The U.S. Department of Health and Human Services, Office of Inspector General (OIG), recently published its Spring 2019 Semiannual Report to Congress. The report, released June 3, 2019, covers the period October 1, 2018 through March 31, 2019.

The OIG focused its work during the reporting period on what it identifies as the most significant and high-risk issues in health care. These focus issues included the opioid crisis; children cared for in Office of Refugee Resettlement facilities; ensuring quality of care and protecting patients from harm; reducing improper payments and ensuring program integrity of the Medicare and Medicaid programs; protecting HHS data, systems and beneficiaries from cybersecurity threats; and protecting the integrity of HHS grants and contracts.

The OIG reports that its investigative work during this period led to \$2.3 billion in expected investigative recoveries and 421 criminal actions. The OIG also excluded 1,293 individuals and entities from health care programs. Through civil actions, the OIG assessed monetary penalties against 331 individuals or entities.

The OIG's legal and investigative work involved investigating matters related to Medicare and Medicaid, such as patient harm, billing for services not rendered, medically unnecessary services, or upcoded services, illegal billing, sale and diversion of prescription drugs, marketing of off-label uses for prescription drugs and solicitation and receipt of kickbacks, including illegal payments to patients for involvement in fraud schemes and illegal referral arrangements between physicians and medical companies. Specific fraud schemes investigated by the OIG related to (i) controlled and noncontrolled prescription drugs, (ii) home health agencies and personal care services, (iii) ambulance transportation, (iv) durable medical equipment, and (v) diagnostic radiology and laboratory testing.

In addition to investigative recoveries, provider self-disclosure cases under the Provider Self-Disclosure Protocol program resulted in more than \$33 million in HHS receivables during the reporting period.

How is This Relevant?

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.