



ICP Consultant Connection

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Fraud, Waste and Abuse

Fraud, waste and abuse (FWA) is a significant problem in health care today. The Centers for Medicare and Medicaid Services (CMS) estimates that \$15 to \$25 billion in FWA exists in government programs. This is a huge economic burden on our Federal Healthcare program.

What is the difference between Fraud, Waste and Abuse?

CMS considers fraud to be when an “individual intentionally deceives or misrepresents the truth, knowing that it could result in some unauthorized benefit to himself or herself or some other individual. An example of fraud could include falsely billing for claims/services never provided. The terms “fraud” and “abuse” can often be used interchangeably. However, as CMS defines abuse, it is typically not intentional. It is defined as a “practice that either directly or indirectly results in unnecessary costs to the Medicare program, improper payment, payment for services that fail to meet professionally recognized standards of care, or services that are medically unnecessary. Waste can be defined as “to use, consume, spend or expend thoughtlessly or carelessly. One example of waste is when drugs are provided that are not medically necessary.

What laws and regulations exist on FWA and Compliance?

Anti-Kickback Statute - as CMS defines it, “prohibits offering, soliciting, paying, or receiving remuneration for referrals for services that are paid in whole or in part by Medicare.

False Claims Act - The act reads “it’s a crime for any person or organization to knowingly make a false record or file a false claim regarding any federal health program.” This includes any state or federal healthcare program, including Medicare and Medicaid. It is important to note the wording of this act, because if you are not participating in a false claim but know that it is occurring, you can be prosecuted as well just because you know about it. The guilty party can be charged up to three times the amount of the claims submitted and have fines on top of that of \$5,000–10,000 for each claim falsely submitted.

The Health Insurance Portability and Accountability Act (HIPAA) – establishes standards and requirements for electronic data submission of certain health information and requires patient information to be kept confidential. Violations can result in penalties of up to \$250,000 and/or imprisonment for up to ten years for knowingly misusing individually identifiable health information.

Office of Inspector General (OIG) Exclusions - The OIG outlines the exclusions that are regulated by CMS. Included on the OIG exclusion list are individuals or entities found guilty of fraudulent activity and excluded from participation in all governmentally funded program reimbursement. This list is checked by ICP before hiring a new employee to ensure the pharmacy is compliant with CMS regulations. It should be understood that there is no payment made by any federal healthcare program for any items or services furnished, ordered or prescribed by an excluded individual or entity. If it is found that someone in the pharmacy has been excluded by the OIG, the pharmacy could be audited and penalized as though they have been filing false claims.

Where do I go for more information?

The CMS website offers a free web-based training course on Fraud and Abuse at the Medicare Learning Network. The training can be accessed at:

<http://cms.meridianksi.com>

For easier access to these and other links, change your subscription to the electronic version of the Consultant Connection. E-mail: gscherger@icppharm.com

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Additional information is available in Chapter 9 of the CMS Prescription Drug Benefit Manual. This manual is available at:

https://www.cms.gov/PrescriptionDrugCovContra/Downloads/PDBManual_Chapter9_FWA.pdf

Penny Boyd, Administrator of Financial Services

Proposed CMS Rule: Independence of LTC Consultant Pharmacists

The Centers for Medicare and Medicaid Services (CMS) published in an October 11 Federal Register notice a proposed regulation to require LTC facilities to hire consultant pharmacists directly, or contract consultant pharmacists' services that are completely independent from pharmacy dispensing services, pharmaceutical companies, or any companies that are affiliated with these entities. CMS is considering mandating these regulatory changes for the Medicare Advantage and the Medicare Prescription Drug Benefit Program 2013 contract year.

CMS is proposing these changes to address concerns on what it considers a conflict of interests between long term care (LTC) provider pharmacies, the consultant pharmacists they employ, and pharmaceutical manufacturers and distributors. CMS is concerned that the clinical decision-making process for recommending changes to an LTC resident's drug regimen may be subject to bias due to the financial relationships that exist between the LTC dispensing pharmacies that provide the drugs for patients and the drug manufacturers from which the drugs are purchased.

CMS believes that by requiring consultant pharmacists to have no financial relationships with pharmacies that dispense drugs to the patients they serve, or with pharmaceutical companies, distributors, or any entities affiliated with them, consultant pharmacists would be free to make the best clinical recommendations for the patients without conflict of interest.

CMS believes the majority of consultant pharmacists providing drug regimen reviews to LTC residents are employed by dispensing pharmacies that provide drugs to the same patients. Therefore, the potential for bias in consultant pharmacists' clinical decisions could have an adverse impact on patient outcomes.

Low Dose Vitamin K Administration With Coumadin

Consistent vitamin K consumption is important for patients taking Coumadin. Fluctuations in vitamin K intake can affect therapeutic stability and maintaining INR values within the desired range.

A study referenced in the CHEST guidelines demonstrated that by stabilizing vitamin K intake, more stable anticoagulation can be achieved. If a patient does not consume consistent amounts of vitamin K, a very small amount consumed through diet or supplements will influence the INR.

A daily low-dose oral vitamin K (100-200 µg) has been shown to increase the time patients receiving long-term warfarin therapy with variable INR values are within therapeutic range. The low-dose vitamin K will cause a decrease in INR initially, and therefore the Coumadin dose will have to be adjusted. Re-establishing appropriate INR levels can take 2-35 days.

The use of daily low-dose oral vitamin K should only be used in patients receiving long-term warfarin therapy with variable INR values that cannot be explained by any other usual cause. Variable INR is defined as: 1) minimum of three warfarin dose changes or three INRs outside of the therapeutic range in the preceding 6 months or 2) an INR standard deviation > 0.5 with at least three warfarin dose changes during the previous 6 months.

In using this intervention, patients must be monitored very closely.

Have a Low Stress Holiday!

When you suffer from stress in general, let alone the stress of the upcoming holidays you may experience a variety of symptoms. These symptoms each fall into four categories:

- Behavioral (the things you do)
- Physical (your body's response)
- Emotional (what you feel)
- Psychological (your personal way of thinking.)

Take a look below at the four categories of stresses and the symptoms the fall under them and then compare those with how you are feeling at this moment. Add one point for each symptom and then total your score to discover your personal stress rating:

Physical symptoms

- tightness in chest
- chest pain and/or palpitations
- indigestion
- breathlessness
- nausea
- muscle twitches
- aches and pains
- headaches
- skin conditions
- recurrence of previous illnesses/allergies
- constipation/diarrhea
- weight loss or weight gain
- change in menstrual cycle for women
- sleep problems/tiredness

Behavioral symptoms

- drop in work performance
- more inclined to become accident-prone
- drinking and smoking more
- overeating/loss of appetite
- change in sleeping patterns
- poor time management
- too busy to relax
- withdrawing from family and friends
- loss of interest in sex
- poor judgment
- inability to express feelings
- over-reacting

Emotional symptoms

- mood swings
- feeling anxious
- feeling tense
- feelings of anger
- feeling guilty
- feelings of shame
- having no enthusiasm
- becoming more cynical
- feeling out of control
- feeling helpless
- decrease in confidence/self-esteem
- poor concentration

Psychological symptoms and negative thoughts

- 'I am a failure'
- 'I should be able to cope'
- 'Why is everyone getting at me?'
- 'no one understands'
- 'I don't know what to do'
- 'I can't cope'
- 'What's the point?'
- 'I don't seem to be able to get on top of things'
- 'I keep forgetting where I put things'
- loss of judgment



Stress Self-Test Answer Key:

Add up your score to check how stressed you are.

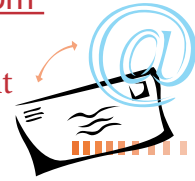
0 – 4 symptoms: You are unlikely to be stressed.

5 – 8 symptoms: You are experiencing a mild form of stress and are not coping as well as you can. You need to make some changes.

9 – 12 symptoms: You are experiencing a moderate degree of stress. You need to make major changes to your life.

13 or more symptoms: You need to take urgent action to reduce your stress levels. The higher your score the more urgent is the need for action.

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Mission Statement:

ICP is committed to exceeding our customers' and employees' expectations through quality health-care service, continuous education, and effective communication.

Stress

So what was your score? Remember, stress is impossible to eliminate totally from life, a little stress is normal. However, if we recognize what stresses us, together with how our symptoms show themselves, we can take action to minimize or reduce any negative effects, think: "Proactive, rather than Reactive!" With the upcoming holidays, family get togethers, gift buying, crowded stores, eating many good treats, stress is at an all-time peak, and it can be difficult to stop and regroup. Stress reduction is vital, especially if the holidays have taken an emotional toll on you in the past. When your holiday to-do list stretches longer than the cold dark winter's night, eliminate whatever is unnecessary. Doing so may reduce your risk of:

- Heart disease, including heart attacks
- Skin conditions, including psoriasis and shingles
- Digestive disorder flare-ups, such as symptoms of irritable bowel syndrome, ulcerative colitis, and Crohn's disease
- Immune disorders, including flare-ups of multiple sclerosis and lupus
- Anxiety, depression, and insomnia
- Worsening pain, if you already have a pain disorder such as arthritis, back pain, and muscle spasms