

Medicaid Integrity Institute (MII) Annual Report – FY2017

MII Mission: To provide effective training tailored to meet ongoing needs of state Medicaid program integrity employees.



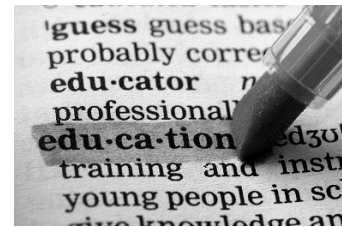
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Executive Summary

Since 2008, the Centers for Medicare & Medicaid Services (CMS) has executed an interagency agreement with the Executive Office for the United State Attorneys, Department of Justice (DOJ) to house the MII at the National Advocacy Center (NAC), located in Columbia, South Carolina. The first national Medicaid integrity training program, the MII provides a unique opportunity for CMS to offer substantive training, program integrity technical assistance, and support to the states in a structured learning environment.

Since 2008, the MII has provided professional education to more than 8,000 Medicaid employees from every state, the District of Columbia, and Puerto Rico.



The Center for Program Integrity (CPI), within CMS, oversees the MII. CPI works in conjunction with DOJ along with input from a fluid MII Advisory Group to implement the MII curriculum. Since 2008, the MII has provided education to more than 8,000 Medicaid employees from every state, the District of Columbia, and Puerto Rico.

The MII's mission is to provide effective training tailored to meet the ongoing needs of state Medicaid program integrity employees, with the goal of raising national program integrity performance standards and professionalism. This meets, in part, CMS' statutory obligation under Section 1936 of the Social Security Act to provide support and assistance to help states combat provider fraud and abuse. Using sound learning methodology and instructional design, coupled with progressive technology, the MII training staff endeavors to provide outstanding professional education and training. A significant benefit of the MII is the value states recognize from exchanging information and comparing best practices with colleagues from other states.

Executive Summary

The MII focuses on developing a comprehensive program of study addressing aspects of Medicaid program integrity, including: fraud investigation, data mining and analysis, provider enrollment, managed care oversight, emerging trends, and case development. Instructors at the MII include state Medicaid program administrators and subject matter experts (SMEs), CMS staff, federal and state law enforcement officers, private consultants, and academics. Training at the MII is offered at no cost to the states.

Since its inception, the value of MII has repeatedly been acknowledged by states, Congress, the U.S. Government Accountability Office (GAO), and other entities for providing significant value to states in their efforts to more effectively combat Medicaid fraud, waste, and abuse.

FY2008 – FY2017



Trained state employees from all **50** states, D.C., and Puerto Rico



Offered **184** courses/workgroup meetings with **8,020** enrollments



Issued **359** program integrity professional certifications

Educational Curriculum

The MII provides training and networking opportunities to the states to enrich Medicaid program integrity activities that combat fraud, waste, and abuse. The success of MII is based largely upon the commitment of our state partners who participate in course development and serve as faculty. The SMEs within the state agencies are valued faculty who often provide the training materials used for tailored courses. The variety of programs offered is tailored to meet the needs of state Medicaid program integrity units.

For the FY2017 calendar cycle, tailored* courses included:

Data Experts Symposium

Emerging Trends in Home and Community-Based Services (HCBS) and Personal Care Services (PCS)

Managed Care Oversight Seminar

Program Integrity Directors' Symposium

Medicaid Provider Enrollment Seminar

Provider Auditing Fundamentals Program

Program Integrity Partnership in Managed Care Symposium

*"Tailored" courses do not include vendor-driven or Certified Program Integrity Professional (CPIP) courses

Educational Curriculum

In addition to tailored courses, the MII offers several courses supplied by vendors, courses in support of the Certified Program Integrity Professional (CPIP) certificate (see page 10), and several working group meetings. These FY2017 courses are shown below:

Vendor Courses

Interviewing and Interrogation Techniques

CPT Coding Boot Camp (Outpatient)

Evaluation and Management Coding Boot Camp

Coding for Non-Coders

CPT Coding Boot Camp (Inpatient)

Medical Record Auditing: Professional Services Boot Camp

CPIP Required Courses

Basic Skills and Techniques in Medicaid Fraud Detection Program (2 courses)

Specialized Skills and Techniques in Medicaid Fraud Detection program (2 courses)

Program Integrity Fundamentals Seminar (1 course)

Workgroup Meetings

MII Advisory Group Meeting

Healthcare Fraud Prevention Partnership Meeting (HFPP)

Collaboration Opportunity in Medicaid Managed Care: CMS and State Auditing Community

CPIP Workgroup Meeting

MII Advisory Group

An annual advisory group meeting is held to seek continuous input on MII training and topics. CMS, DOJ staff, and senior state program integrity officials attend the advisory group meeting. CMS convenes a monthly Fraud, Waste, and Abuse Technical Advisory Group (TAG) audio call that also yields recommendations for topics to cover in more depth at MII. The state agencies provide updates and guidance on what issues the states are facing in order to provide SMEs to serve as faculty and students for MII courses.

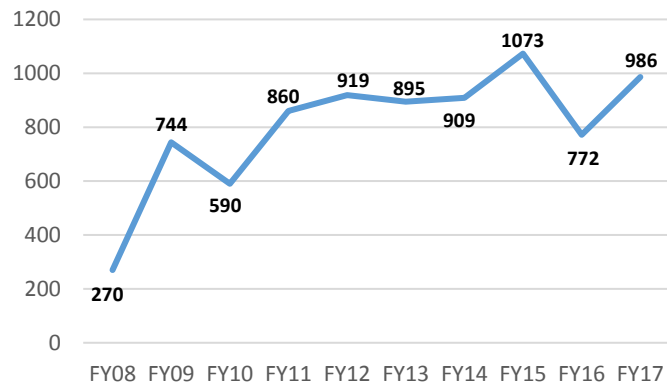
MII Advisory Group Meeting

The FY2017 advisory group meeting included discussion of vulnerabilities, CPI priorities, state priorities, mitigation strategies, and how to tailor courses to match vulnerabilities within the program. The advisory group reviewed and provided suggested topics for tailored courses in FY2018. In addition, the group discussed the FY2019 and FY2020 course calendars. The advisory group provided extensive feedback on current emerging trends and areas of interest that the Medicaid program integrity programs would like to see offered at MII. Examples of emerging trends and high priority areas included beneficiary eligibility and fraud; opioid misuse; managed care; high risk services; specialty focuses such as value based services, third party liability, dental, behavioral health, and long-term care; and auditing for managed care.

State Participation

Between February 2008 and the end of FY2017, the MII trained state employees from all 50 states, the District of Columbia, and Puerto Rico through 8,020 enrollments in 170 courses and 14 workgroups. This number includes state employees who have attended more than one MII course since its inception. The unduplicated count of state employees since inception through the end of FY2017 is 3,232. The annual breakdown of students and faculty for the past five federal fiscal years appears in the chart below:

**MII: Total Participants
FY2008 - FY2017**



FY	Participants	Courses / Workgroups	Participating States
13	895	18 courses	50 States, D.C. and Puerto Rico
	Students: 762	1 workgroup = 19	
	Faculty: 133		
14	909	19 courses	50 States, D.C. and Puerto Rico
	Students: 784	2 workgroups = 21	
	Faculty: 125		
15	1,073	22 courses	50 States, D.C. and Puerto Rico
	Students: 905	1 workgroup = 23	
	Faculty: 168		
16*	772	16 courses	49 States, D.C. and Puerto Rico
	Students: 663	1 workgroup = 17	
	Faculty: 109		
17	986	18 courses	50 States, D.C. and Puerto Rico
	Students: 860	4 workgroup = 22	
	Faculty: 126		

*Due to staffing shortage in FY2016, the training calendar was reduced from 22 courses and 1 workgroup meeting to 16 courses and 1 workgroup meeting. The reduced enrollment in FY2016 is due to the cancellations.

Secure Information Sharing

The MII supports a Medicaid program integrity workspace on the Regional Information Sharing System (RISS). RISS is a secure web-based system for collaboration and dissemination where all states can exchange documents, tips, and best practices about Medicaid program integrity under the auspices of the DOJ Office of Legal Education. RISS is available to state Medicaid agency representatives' across the country and continues to provide a platform for sharing and collaboration. State users have the ability to post questions and communicate with counterparts in the program integrity community across the country.



As of September 30, 2017, there were **317** RISS users of the MII workspace from all 50 states, the District of Columbia, and Puerto Rico. Folders that can be found on RISS include:

- Announcements – important messages and updates of general interest
- Discussion Board – question and answer folder
- MII Resource Library – MII course materials, and distance learning materials
- In The News – program integrity related news releases
- States' Best Practices – sharing techniques and practices that have led to successful state recoupments, program enhancements, or innovative solutions.
- Policies and Statutes – state policies, program policies
- Audit/Review, Enrollment, and Exclusion – state resources, templates, tips
- State Fraud Alerts – common fraud schemes
- Program Integrity Resources – CMS fraud alerts, Medicare terminations, Medicaid TAG minutes, program integrity review materials, etc.
- Medicaid National Correct Coding Initiative (NCCI) Methodologies – maintained by CMS
- Return on Investment – sharing of MII training benefit

Certification Program

In FY2012, the MII Certification and Credentialing Working Group developed a plan for credentialing MII courses for professional certification for state Medicaid program integrity employees. As a result of this work, the working group in agreement with CMS defined a program of courses and examinations for the first Certified Program Integrity Professional (CPIP) designation. The National Health Care Anti-Fraud Association (NHCAA), the Association of Certified Fraud Examiners (ACFR), and the American Academy of Professional Coders (AAPC) recognize MII courses and award continuing education credits for applicable training segments that meet criteria of each organization. To earn the CPIP credential, MII students are required to complete three core concept courses – Basic Skills and Techniques in Medicaid Fraud Detection, Program Integrity Fundamentals Seminar, and Specialized Skills and Techniques in Medicaid Fraud Detection – and demonstrate content mastery on corresponding examinations.

The first CPIP designations were issued in FY2013 to state Medicaid program integrity employees who completed the requirements. By the end of FY2017, 359 state employees from 47 states have earned the CPIP credential.

