Report in Brief
Date: September 2021
Report No. A-07-20-04118

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF INSPECTOR GENERAL

About Seventy-Nine Percent of Opioid Treatment Program Services Provided to Medicaid Beneficiaries in Colorado Did Not Meet Federal and State Requirements

Why OIG Did This Audit

The United States currently faces a nationwide public health emergency due to the opioid crisis. The high potential for misuse of opioids has led to alarming trends across the country, including record numbers of people developing opioid use disorders. In 2019 alone, there were nearly 50,000 opioid-related overdose deaths in the United States. Opioid treatment programs (OTPs) provide medication coupled with counseling services (OTP services) for people diagnosed with an opioid use disorder. As part of OIG's oversight of the integrity and proper stewardship of Federal funds used to combat the opioid crisis, we audited OTP services in Colorado.

Our objective was to determine whether Colorado's oversight ensured that Medicaid OTP services in Colorado met Federal and State requirements.

How OIG Did This Audit

Our audit covered OTP services provided during the period October 1, 2016, through September 30, 2018, by OTP providers to Medicaid beneficiaries diagnosed with an opioid use disorder. During this period, 20 OTP providers submitted claims to Medicaid managed care organizations for almost 1.5 million OTP services totaling almost $22.2 million provided to Medicaid beneficiaries. We selected and reviewed a random sample of 100 OTP services.

What OIG Found

Colorado's oversight during the audit period did not ensure that OTP services provided to Medicaid beneficiaries met Federal and State requirements. Of the 100 OTP services we sampled, 21 complied with Federal and State requirements but 79 did not meet applicable Federal and State requirements. Colorado's oversight of the OTPs consisted primarily of biennial audits conducted by the State Opioid Treatment Authority (SOTA), which were not sufficient in scope and depth of coverage to ensure that OTPs maintained a recordkeeping system that was adequate to document and monitor patient care, or to ensure that OTP services met Federal and State requirements.

The biennial audits of each OTP were performed by a single person, covered approximately 10 percent of patient charts, and took between 1 and 2 days to perform. Given all of the tasks that these audits sought to conduct, we do not believe that reviewing 10 percent of patient charts over the course of 1 to 2 days was adequate for one person to be able to thoroughly review patient charts for deficiencies and to devote sufficient time to other tasks.

On the basis of our sample results, we estimated that over 1.1 million OTP services, or about 79 percent, did not meet Federal and State requirements during the audit period.

What OIG Recommends and Colorado Comments

We recommend that Colorado strengthen its biennial audits of OTPs to ensure that services provided are in accordance with Federal and State requirements, provide technical assistance to OTPs to ensure that the providers maintain adequate recordkeeping systems, and educate OTPs on the deficiencies we identified to increase their awareness of compliance issues regarding Federal and State requirements.

Colorado described corrective actions it had taken or planned to take to address our recommendations. Colorado said that it had hired a program coordinator to: support the SOTA in conducting the biennial audits; provide technical assistance to OTPs; and manage the Central Registry, a system used to ensure that individuals are not enrolled in more than one OTP. In addition, Colorado said that it was developing a new automated Central Registry system, and described several planned activities to educate OTPs and review the deficiencies we had identified.

The full report can be found at https://oig.hhs.gov/oas/reports/region7/72004118.asp.