

Beneficial Practices Described in Office of Inspector General Inspection Reports

This overview lists MFCU practices that OIG has highlighted as beneficial to Unit operations, which other Units may wish to consider adopting in their States. OIG judged each of these practices to be innovative at the time the report was issued, and beneficial to Unit operations.

All of OIG's MFCU reports are available at <https://oig.hhs.gov/reports/all/?search=annual&hhs-agency=MFCU&issue-date=all#results>

Standard and Description	Beneficial Practice	State Report Number Issue Date
Standard 2: A Unit maintains reasonable staff levels and office locations in relation to the State's Medicaid program expenditures and in accordance with staffing allocations approved in its budget.	Hiring digital forensic experts to support investigations: The Unit hired digital forensic experts to support investigations and collaborate on investigations with OIG's digital investigative branch. They conduct digital investigative activities and provide consultation and factual case testimony on steps such as the identification, examination, and production of electronically stored information.	Washington OEI-09-23-00230 June 2024
Standard 4: A Unit takes steps to maintain an adequate volume and quality of referrals from the State Medicaid agency and other sources.	Supplementing reviews of referrals of patient abuse or neglect and enhancing referral coordination: The Unit's nurse investigator reviewed complaints about patient abuse or neglect that had been previously closed by the State's survey and certification agency to determine whether the complaints warranted further investigation. In addition, the nurse investigator arranged for the Unit to receive complaints of patient abuse or neglect at the same time the State's survey and certification agency sent the complaints to local law enforcement agencies. After reviewing the complaints, the nurse investigator contacted local law enforcement agencies. If those agencies did not plan to take any action on the complaints, the Unit's Special Agent in Charge reviewed the complaints to determine whether to open a formal investigation.	Kansas OEI-12-18-00210 July 2019
Standard 4: A Unit takes steps to maintain an adequate volume and quality of referrals from the State Medicaid agency and other sources.	Hiring an outreach coordinator to promote the Unit's mission among its stakeholders: The outreach coordinator's responsibilities were to promote the Unit's mission among nursing homes, rehabilitation facilities, local law enforcement agencies, and other State agencies. The outreach coordinator was responsible for (1) developing training regarding the Unit's mission and presenting that training to Unit stakeholders; (2)	Louisiana OEI-12-20-00650 August 2021

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	coordinating with the Louisiana Department of Justice on press releases; and (3) acting as a liaison to receive referrals from stakeholders.	
Standard 4: A Unit takes steps to maintain an adequate volume and quality of referrals from the State Medicaid agency and other sources.	Participating in an Elder Abuse Task Force to provide training to law enforcement and first responders: To encourage referrals, the Unit regularly trained cadets at the Montana Law Enforcement Academy and trained other law enforcement and first responder personnel through its participation in the Montana Elder Abuse Task Force. The training focused on the Unit's mission and how the Unit can assist with crimes that law enforcement personnel and first responders may encounter.	Montana OEI-12-19-00170 March 2020
Standard 4: A Unit takes steps to maintain an adequate volume and quality of referrals from the State Medicaid agency and other sources.	Establishing data analytics working groups to improve the Unit's ability to data mine to find potential cases: The Unit established data analytics working groups to provide guidance, training, and an assessment of the Unit's data mining efforts. The groups include the Data Analytics Tool group, the Data Sources group, the Fraud and Abuse group, and the Governance group.	New York OEI-12-17-00340 September 2018
Standard 4: A Unit takes steps to maintain an adequate volume and quality of referrals from the State Medicaid agency and other sources.	Establishing a program integrity group composed of personnel from other Medicaid program integrity entities: To improve the quantity and quality of referrals, the Unit established the Ohio Program Integrity Group, which combines the knowledge and resources of all of the State agencies that are responsible for Medicaid program integrity. In addition, the Unit spearheaded the Managed Care Program Integrity Group (McPIG) which is composed of the Unit, the State Medicaid agency's Bureau of Managed Care, and representatives of Ohio's five Medicaid managed care plans. The McPIG meets quarterly to coordinate program integrity efforts and facilitate the exchange of information.	Ohio OEI-07-14-00290 April 2015
Standard 4: A Unit takes steps to maintain an adequate volume and quality of referrals from the State Medicaid agency and other sources.	Notifying referral sources of the Unit's decision whether to open formal investigations of incoming referrals: Through secure electronic channels, the Unit communicated with the State Medicaid agency and other referral sources regarding the Unit's decision to accept or decline referrals. In	South Carolina OEI-12-20-00610 September 2021

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	response, State officials lauded the responsiveness of the Unit's communications. The Unit followed a similar practice, where appropriate, regarding referrals received from private citizens.	
Standard 5: A Unit takes steps to maintain a continuous case flow and to complete cases in an appropriate timeframe based on the complexity of the cases.	Designating staff as subject matter experts: The Unit director designated Unit investigators as subject matter experts on specific, common provider types for efficient assignment and improved investigation of cases.	Arkansas OEI-12-19-00450 September 2020
Standard 5: A Unit takes steps to maintain a continuous case flow and to complete cases in an appropriate timeframe based on the complexity of the cases.	Developing a strategic plan to optimize and prioritize resources: The Unit developed a written strategic plan to help Unit staff make informed decisions regarding the optimal use of resources. The plan provides guidance to prioritize certain types of investigations, such as criminal investigations that are related to systematic patient abuse and neglect; investigations of fraud allegations against MCOs; and fraud investigations of large providers. The plan also establishes a priority for false claims investigations with higher potential for monetary recoveries or risk of patient harm.	New York OEI-12-17-00340 September 2018
Standard 8: A Unit cooperates with OIG and other Federal agencies in the investigation and prosecution of Medicaid and other health care fraud.	Co-locating Unit and OIG staff to improve cooperation on joint cases: Unit staff have workstations at an OIG field office—this improved communication and cooperation with OIG on joint cases, including fraud cases generated through the U.S. Department of Justice Medicare Strike Force.	Florida OEI-07-15-00340 June 2016
Standard 9: A Unit makes statutory or programmatic recommendations, when warranted, to the State government.	Developing legislation to protect Medicaid enrollees from abuse: The Unit helped develop legislation to protect Medicaid enrollees by strengthening background checks for individuals who serve as guardians and conservators of Medicaid enrollees.	Minnesota OEI-06-13-00200 March 2014
Standard 9: A Unit makes statutory or programmatic recommendations, when warranted, to the State government.	Using information from a case closure form to make program integrity recommendations to State agencies: The Unit used a case closure form to make numerous program integrity recommendations to State agencies and tracked the responses to these recommendations in a database.	Washington OEI-09-16-00010 September 2016

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Standard 12: A Unit conducts training that aids in the mission of the Unit.	Implementing a mentoring program to develop Unit attorneys: The Unit created an executive advisor position to help Unit attorneys develop litigation skills. The executive advisor also mentored new attorneys and served as a co-chair on Unit prosecutions.	Kentucky OEI-06-17-00030 September 2017
Standard 12: A Unit conducts training that aids in the mission of the Unit.	Sponsoring combined training events with a neighboring Unit: The Unit and a neighboring Unit alternated hosting a combined training for employees of both Units. Training events included case studies, statistical trends, and roundtable discussions.	Louisiana OEI-12-20-00650 August 2021
Standard 12: A Unit conducts training that aids in the mission of the Unit.	Developing an internal boot camp to train new staff: The Unit developed an internal “boot camp” training program that helped new staff develop a full understanding of the Unit’s work. Experienced MFCU staff gave 1- to 2-hour lectures on topics such as civil and criminal investigation procedures; interviewing techniques; and understanding medical codes.	Maryland OEI-07-16-00140 September 2016
Standard 12: A Unit conducts training that aids in the mission of the Unit.	Creating in-house training videos: The Unit’s Chief Auditor created in-house training videos for Unit investigators and attorneys. The videos contained step-by-step tutorials for creating and using investigative and trial tools.	Missouri OEI-12-18-00490 January 2020
Standard 12: A Unit conducts training that aids in the mission of the Unit.	Using a moot-court approach for training attorneys: The Unit used moot-court training to train Unit attorneys. This training helped the Unit attorneys practice opening arguments to prepare for trial.	New York OEI-12-17-00340 September 2018
Other: Beneficial practices not relating directly to a specific performance standard.	Having providers teach their peers about implications of Medicaid fraud: The Unit used providers who had previously been convicted of or sentenced for Medicaid fraud to educate their peers. These providers gave presentations alongside Unit staff at training conferences, helping to highlight Medicaid billing issues and the implications of Medicaid fraud.	South Dakota OEI-07-16-00170 September 2016