# VUMC OFFICE OF HEALTHCARE COMPLIANCE BRIEFING: FY2017 OIG WORK PLAN

## SUMMARY

- OIG's Work Plan is the foundational expectation for provider compliance programs
- No major 2017 shift or shake-up in approach and review categories
- Following CMS' lead to focus on drug wastage billing
- **VUMC is routinely audited under Work Plan focus areas**

## KEY REVIEW AREAS IN 2017

- Hospital and technical billing
  - Short stays under Two-Midnight Rule
  - Device credit refunds
  - Provider-based clinic requirements
  - Herceptin use for breast cancer (new)

- MD/NPP and other Professional Billing
  - Review of Sunshine Act payments vs. ordering patterns (new)
  - Anesthesia providers
  - Prolonged Services E/Ms
  - Sleep disorder clinics
  - TCM and CCM billing (new)

- Other Priorities
  - Billing for beneficiary services post-death (new)
  - 340B rebates
  - Overlapping outpatient (Part B) services during inpatient stay (Part A)

- CMS Requirements for Drug Wastage
  - 1/1/17 national standard for outpatient single-dose vials
  - Dispense the **smallest vial available** that **could provide the appropriate dose**.
  - Any remainder must be discarded and quantified in the medical record.
  - Separate J Code billing:
    - Line 1: Administered / ordered
    - Line 2: Wastage, with JW modifier

CITATIONS & FURTHER READING

- 2017 OIG Work Plan, in full
- Hall Render, OIG 2017 Work Plan Summary