Fraud, Waste and Abuse, Compliance and Cultural Competency Training
We need you!
Agenda

• Enforcement Landscape
• Identifying Fraud
• Compliance Program
Enforcement Landscape

• The U.S. recovered $4.20 for every $1 spent on enforcement

• Estimated fraud: between $99 billion and $330 billion
  • Enforcement is only recovering about 1/10 of this amount

• 2017 Department of Justice opened:
  • 967 new criminal cases
  • 948 new civil cases
Our Role in Federal Healthcare Programs

• Historically, dentists have submitted claims directly to federal health care programs such as Medicare, Medicaid and TRICARE.

• Today, Delta Dental has begun contracting with state Medicaid programs to administer the dental benefit. We are also contracting with health plans to provide a supplemental dental benefit for Medicare patients.

• These new relationships require Delta Dental to play an active role in fraud and abuse identification and enforcement, which requires the development and implementation of an effective compliance program.
Identifying Fraud

- **Fraud** is defined as intentional deception or misrepresentation
- **Health care fraud** is sometimes counterintuitive
- **Common statutes related to fraud**
  - False Claims Act
  - Anti-Kickback Statute
  - Unlawful Patient Inducement
State and Federal False Claims Act

**Knowingly submitting a “false or fraudulent” claim**

**Knowing means:**
- Actual knowledge
- Deliberate ignorance
- Reckless disregard

**Simple error is not enough**
Examples of False Claims

A dental group paid $5.1 million to settle a case alleging that they:
- Upcoded simple tooth extractions (D7140) and improperly billed surgical extractions (D7210)
- Improperly billed for scale and root planing (deep cleaning) when they were either not performed or not medically necessary

A dental group paid $23.9 million to settle a case alleging that they billed for:
- Procedures that were not medically necessary, including pulpotomies (baby root canals), tooth extractions and stainless steel crowns
- Procedures that were never actually performed
It’s a crime to knowingly and willfully offer, pay, solicit, or receive anything of value, directly or indirectly, in return for referrals or to induce referrals for which payment may ultimately be made in part under a federal health care program.

False Claims Act Connection — services provided as a result of an unlawful kickback are considered false claims. Violations of the Anti-Kickback Statute are frequently enforced through the False Claims Act.

For network providers it’s important to identify potential kickbacks and consult with legal counsel to determine whether a safe harbor exists that would allow the practice.
Unlawful Patient Inducement

• It’s against the law to offer *remuneration* that the offeror knows or should know is likely to influence the selection of a particular provider, practitioner or supplier.

• **Exception:**
  • Items and services less than $15 and less than $75 per year
Examples of kickbacks and inducements

A dental group paid $8.45 million to settle a case alleging that they:

• Paid parents of Medicaid patients to bring their children in
• Paid marketing companies to refer Medicaid patients to the clinic
Penalties

Penalties for individuals and entities submitting false claims include:

• Criminal prosecution
• Fines of up to $21,916 per claim
• Treble damages (three times the amount paid)
• Exclusion from participation in Medicare and Medicaid

Penalties for network providers

• Termination of the provider agreement
Purpose:

To prevent and detect fraud and promote an ethical culture

By focusing on fraud, we’re limiting the scope of the compliance program to the issues that are the most serious and pose the greatest risk to the organization.

Our compliance program is the platform to facilitate compliance with the law. We each have an individual duty to understand regulatory standards that apply to our organization and to report potential violations when we see them.
Compliance Program — Policies

**Code of Conduct**
Establishes the ethical expectations that should guide our interactions with each other, our network providers and our members

**Compliance Plan**
Establishes the framework for our compliance program

**Program Integrity Plan**
Describes the ways we identify and report fraud as an organization
Open communication is an important element of an effective compliance program. You need to report any questions or concerns regarding compliance with any of the standards discussed in this training. Any report can be made to the Compliance Hotline. You can make anonymous reports.

**Reporting Options:**

**Delta Dental Compliance Hotline:**
800-511-0831

Report online using the [Fraud Report Form](#)

**Write to:** Network Oversight and Compliance - One Delta Drive Mechanicsburg, PA 17055

**Call** 1-800-MEDICARE (1-800-633-4227)

**Call the Office of the Inspector General at:**
1-800-HHS-TIPS (1-800-447-8477) or TTY: 1-800-377-4950

Report it online to the [Office of the Inspector General](#)
Self-Reporting

Network providers are:

- Required to disclose and refund overpayments within 60 days of discovery
- Encouraged to self-report other potential fraud and abuse issues

To report any suspected or known FWA or noncompliance or HIPAA concerns to Delta Dental, call our Compliance Hotline at 800-511-0831.
Investigations

- All concerns regarding compliance issues will be thoroughly investigated in a timely manner.
- The investigation can include interviewing individuals and reviewing documents such as medical records.
Compliance Program
Monitoring and Auditing

Special Investigations Unit

Monitors and audits claims submitted by network providers to identify either simple overpayments or fraudulent activity

- Investigates any allegations of fraudulent conduct
- Proactively monitors claims submitted, identifies anomalies and conducts further investigation as needed
  - Some audits will be conducted on randomly selected network providers.
  - Other audits might be conducted to review a specific issue that seems unusual, such as an unusual number of claims related to a particular procedure.
Compliance Program – Prevention

• If Delta Dental investigates and finds errors or deficiencies, it will take steps to prevent this type of conduct from occurring again.

• Usually this will include a corrective action plan by the individual dentist or dental group. A corrective action plan (CAP) could include:
  • Education and training
  • Monitoring and auditing

• In some cases, Delta Dental will have to report the issue to the Office of Inspector General or a Medicare Advantage plan.

• In some cases, if we identify fraudulent activity, prevention may include termination of the provider agreement with Delta Dental.
Benefits of Compliance

Studies show that employees and providers want to be a part of an organization with an ethical culture.

We all want to work in a mission-driven organization that promotes dental wellness in our communities in an effective, efficient and safe way. Delta Dental is such an organization.

An effective compliance program can increase employee engagement, mitigate risks and conserve scarce health care resources for those who need them most.

The public consistently rates the honesty and ethical standards of dentists as very high or high. With the help of an effective compliance program and by working together, we can keep it that way.
Cultural competency
What is cultural competency?

• Skills that help you interact with other people with different backgrounds and experiences

• The goal is not to change your values or beliefs but to help you work with and help people who may be different than you
Why is cultural competency important in dentistry?

- Patients from different backgrounds may feel intimidated and unsure when seeking care.
- Cultural barriers can impede access to care and contribute to poor health outcomes.
- Your goal is to provide dental care in a supportive, nurturing environment.
- Being culturally aware and sensitive to other people’s worldviews allows you to better assist them.
5 factors affecting access to care

1. Race and ethnicity
2. Cultural beliefs
3. Religious beliefs
4. Language
5. Low health literacy
1. Race and ethnicity

• Racial/ethnic demographics of U.S.
  • 57.8% White
  • 18.7% Hispanic
  • 12.4% Black
  • 6% Asian

• Microaggressions —unconscious messages that may demean a person based on their race
  • Saying you understand a person because you “don’t see race” or “have a friend” of the same race
  • Assuming a person doesn’t understand English because they are of another race or ethnicity

• Don’t make any assumption about a person based on their race
2. Cultural beliefs

- Cultural beliefs may affect patients' behaviors and attitudes toward dental health and dental care

- Examples of different cultural beliefs:
  - Discussing a disease or health disorder will cause it to occur
  - Rubbing the body with an object such as a coin can draw out some illnesses
  - Not following dietary advice if it doesn’t conform to the foods or cooking methods they use

- Understand what a person’s beliefs are and how that guides their behavior and decision making
3. Religious beliefs

- Religious belief can influence diet, medicine and modesty
- Examples of some religious differences:
  - Some people believe spiritual powers can affect the body and mind and cure disease
  - Women in some religions may need to see a female provider
- Give patients a chance to discuss their religious and spiritual needs and tailor their evaluation and treatment to meet those needs
4. Language

- 21.9% of U.S. residents speak a language other than English at home
- Low English proficiency may make it difficult for patients to make an appointment or discuss their dental problems
- Use Delta Dental’s Language Assistance Program, which has phone assistance for enrollees in over 170 languages
- Delta Dental can provide on-site interpretation if you call 72 hours in advance
- Have forms and informational materials translated into the languages most relevant to your practice so they’re available to patients
5. Health literacy

- People need to understand basic health information and services so they can make the right decisions.

- Health literacy has nothing to do with actual literacy but affects how well people can understand the information you give them.

- Use visuals such as photographs of the patient’s teeth to illustrate diagnoses.

- Have the patient repeat care instructions back to you so you know they understand them.
Ways to communicate effectively

• Speak slowly
• Chunk information in bits — no more than three things to remember at one time
• Be careful with eye contact, physical touch or gestures — they can be interpreted differently among different cultures
• Keep written materials at a seventh-grade reading level or lower
• Use plain language — no medical jargon
  • Cavities, not caries; gum disease, not periodontal disease
  • Make sure scheduling an appointment and completing forms are simple
• Learn common phrases in languages common in your area (“Does your tooth hurt?” “Do you floss?”)
• Provide written summaries and instructions that patients can take home so they don’t forget
Thank you!

Visit our website for additional resources:

https://www1.deltadentalins.com/dentists/resources/training-and-events.html