2023 NAMPI ANNUAL CONFERENCE

CALL FOR SESSIONS

I.   **OVERVIEW**

The NAMPI Board of Directors is pleased to announce the Call for Sessions for the 2023 Annual Conference being held Sunday, July 30 – Wednesday, August 2, 2023. As we continually work toward developing a conference program that meets the needs of our program integrity colleagues, the Board set out this year to update and refine our call for sessions process to ensure both a more balanced agenda and provide more clarity for participants in selecting sessions to attend.

In previous years, the call for sessions has sought submissions focused on substantive topics based on provider type, scheme, or service type. Our goal this year is to expand on this model and to include the program integrity functions and operations that create variations that address the educational needs of conference participants. The functions are categorized as:
1) Provider investigations
2) Provider overpayment audits
3) Beneficiary fraud
4) Broad programmatic compliance efforts
5) Law enforcement interactions
6) Other regulatory oversight implications

This year's call for sessions will ask for you to select a category from the above list of program integrity functions. As the Board build out the program, sessions within each of these categories will create the framework and tracks for the conference agenda. For additional details on this year's session categories, please see the detailed explanations below.

Click here to access call for sessions form.

II.   **DETAILS ON NAVIGATING THE SUBMISSION PROCESS**

Please take a few minutes to read through the information below. This information below is designed to assist you in developing your session submission. The deadline for submissions is **Friday, April 14, 2023.**

PROVIDER INVESTIGATIONS

Provider investigations is intended to be distinguishable from provider overpayment audits. Typically, investigations from a program integrity standpoint, are earlier stage efforts to discern if

there is a suggestion or intent of fraud which would warrant a law enforcement referral as opposed to suggestions of abuse or waste, which would warrant an overpayment recovery audit. Investigation-related topics may include a specific substantive issue, for example the subjects of the investigations detailed may be the same provider types, but the intended focus is on the details of the investigation.

PROVIDER OVERPAYMENTS/AUDITS

Provider overpayment/audit functions involve a broad array of topics that are procedural aspects of the audit processes. These topics include:

- Interactions with Medicaid program policy officials or the provider
- Records handling, processes, and records reviews
- Legal issues related to audits or administrative proceedings specific to overpayment recoveries

The intended focus are take-a-ways geared toward these audit processes and related topics as distinguishable from investigations.

BENEFICIARY FRAUD

Beneficiary fraud includes topics where the primary educational focus is on schemes, investigations, audits, and recoveries related to fraud, abuse, or waste by beneficiaries and the related activities by the state. This may include policies and procedures regarding handling beneficiary fraud and may also include the relationship between the administrative activities and law enforcement/prosecutorial referrals.

BROAD PROGRAMMATIC COMPLIANCE EFFORTS

Broad programmatic compliance efforts include topics such as:

- Provider, or managed care plan, contracting issues
- Program integrity infusion into provider enrollment efforts
- Other program integrity activities not readily categorized as an audit or an investigation. Such efforts might include projects to interview providers, conduct on-site provider visits, or validate information submitted to the Medicaid program (e.g., for enrollment) which is not typically validated through standard processes.

LAW ENFORCEMENT INTERACTIONS

Law enforcement interactions includes topics ranging from referral processes, assisting law enforcement in investigations, assisting prosecutors in fraud prosecutions, and any other collaborative efforts with state and federal law enforcement.

Regulatory oversight would include any other licensure issues or, state or federal law focused topics.

BEHAVIORAL HEALTH

Behavioral health covers a broad array of topics that are of interest to NAMPI members. Submissions should provide clarity around the specific topic being presented; please see the below list for reference:

    a. Substance Abuse/Medication Assisted Treatment Services
    b. Community Behavioral Health Services (Substance Abuse/Mental Health)
    c. Targeted (Mental Health/Child Health/Other) Case Management Services
    d. On-Site/Overlay Therapeutic Services
    e. Outpatient Mental Health/Therapy Services
    f. Inpatient Behavioral Health/Substance Abuse Services
    g. Residential Behavioral Health/Substance Abuse Services
    h. Psychiatric/Medication Management Services
    i. Early Intervention Services
    j. Medical Foster Care Services
    k. State Mental Health Services
    l. Therapeutic Group Care Services

III. ADDITIONAL INFORMATION

1. Individuals submitting session ideas should be as specific as possible so that selected topics are easy for conference participants to have reasonable expectations about the content. When are you developing your submission, here are some suggestions on how to refine your approach:
   a. Managed Care Plan Oversight – where the plan is the subject of the state review
   b. Managed Care Plan Provider Reviews – where the plan is conducting the review or assisting the state in conducting the review; or where the state is conducting a review of health plan providers without the plan's involvement
   c. Behavioral Health related topics should be clearly distinguished regarding the focus. Given the broad array of topics, please make sure to identify the main topic of your session, as listed above, and any sub-topics you plan to address in your presentation.
2. Data analytics presentations should include a detailed explanation of the methodology so that it may be easily replicated by participants without requiring any specific tool or software.
3. If you are submitting under the beneficiary fraud category, there may be an overlap into investigation procedures and practices. There are also a broad array of resources or tools that may be used in these investigations and if possible, can be included in your presentation.

Explaining how these resources (public and private databases; bank records; social media; tax information; investigative/case tracking software; use of subpoenas; best practices for investigations; client interview strategies) are used to investigate beneficiary fraud help strengthen a presentation and enhance the educational value for participants.

4. Following COVID, there are several unique topics such as a discussion of the CMS FAQ document entitled "COVID 19-PHE Unwinding FAQs". FAQ 31 says in part that: "States cannot recover or recoup the cost of services from a beneficiary, even if they have been found after an administrative or criminal proceeding to have committed Medicaid beneficiary fraud or abuse." Just this one item alone may make for a very interactive and robust discussion session. Many states are still awaiting guidance from CMS.