

Report on Medicare Compliance Volume 28, Number 26. July 22, 2019 HHS Inspector General Updates Fraud Risk Indicator

OIG on June 5 updated its Fraud Risk Indicator, which describes the degree of danger that organizations are thought to pose to federal health care programs. The new data shows that health care organizations benefit when they have an effective compliance program—“no further action”—which means resolving a False Claims Act case without a corporate integrity agreement or exclusion, says attorney Paula Sanders (“CMS Rule Would Discard Compliance Program Requirements; Lawyer: DOJ, OIG Loom Larger,” RMC28, no. 26). Visit <https://go.usa.gov/xyj6J>.

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