



Dear Capitol Dental Care Providers,

All Oregon Dentists with an active DEA registration will be required to register for the Oregon Prescription Drug Monitoring Program by July 1, 2018. Please see below for the notice from the Oregon Board of Dentistry.

HB 4143 - Prescription Drug Monitoring Program

New legislation was just passed in February 2018, along with a temporary rule enacted by the OHA in April 2018 that requires all dentists with an active Drug Enforcement Administration (DEA) registration to register with the PDMP by July 1, 2018.

Following is the link to register with PDMP:

[Prescription Drug Monitoring Program](#)

Following is the link to review:

[OHA PDMP Temporary Rule Implementation](#)

Fraud, Waste, and Abuse (FWA)

Capitol Dental Care is committed to reducing the cost of fraud, waste, and abuse. Although there is no precise measure of the costs that those intent on abusing government supported health care programs cause, it is significant—resulting in fewer services to beneficiaries and less money available for payment of legitimate services.

Defrauding the Federal Government and its programs is illegal. FWA exposes individuals or entities to potential criminal and civil liability and may lead to imprisonment, fines, or penalties. Providers and health care organizations involved in FWA risk being excluded from participating in all Federal Health care programs and risk losing their professional licenses.

We all play a vital role in protecting the integrity of the program. Following is a summary of FWA definitions and regulations to help increase understanding and help you protect the program, your patients, and your office.

Fraud

Fraud is *knowingly and willfully executing a scheme or by means of false or fraudulent pretenses making representations to obtain money or property under the control of the Health Care program*. Examples of fraud include:

- Billing for appointments the patient failed to keep
- Knowingly billing for services at a level of complexity higher than services actually provided or documented in the file
- Knowingly billing for services not furnished or supplies not provided, including falsifying records to show delivery of such items
- Paying for referrals Intentional deception leads to Fraud

Waste

Waste is *the overutilization of services or other practices that, directly or indirectly, result in unnecessary costs to the health care system*. It is not generally considered to be caused by criminally negligent actions, but by the misuse of resources. Inefficiencies lead to waste. Examples of waste include:

- Ordering excessive diagnostic tests or medications

Abuse

Abuse is *payment for items or services when there is no legal entitlement to that payment and the individual or entity has not knowingly and/or intentionally misrepresented facts to obtain payment*. Bending the rules leads to abuse. Examples of abuse include:

- Unbundling services
- Upcoding
- Incorrect coding

FWA Laws

False Claims Act (FCA)

The civil FCA protects the Federal Government from being overcharged or sold substandard goods or services and imposes civil liability on any person who knowingly submits or causes the submission of a false or fraudulent claim to the Federal Government.

The terms *knowing* and *knowingly* mean that a person has actual knowledge of the information or acts in deliberate ignorance or reckless disregard of the information's truth or falsity related to the claim. No proof of specific intent to defraud is required to violate the civil FCA.

Example: A physician knowingly submits claims to Medicare for a higher level of medical services than actually provided or higher than the medical record documents.

Anti-Kickback Statute (AKS)

The AKS makes it a crime to knowingly and willfully offer, pay, solicit, or receive any remuneration directly or indirectly to induce or reward referrals of items or services reimbursable by a Federal health care program. When a provider offers, pays, solicits, or receives unlawful remuneration, the provider violates the AKS.

Example: A provider receives cash or below fair market value rent for medical office space in exchange for referrals.

Physician Self-Referral Law (Stark Law)

The Physician Self-Referral Law—often called the Stark Law—prohibits a physician from referring certain designated health services payable by Medicare or Medicaid to an entity in which the physician (or an immediate family member) has an ownership/investment interest or with which he or she has a compensation arrangement.

Example: A provider refers a beneficiary for a designated health service to a business in which the provider has an investment interest.

Criminal Health Care Fraud Statute

The Criminal Health Care Fraud Statute prohibits knowingly and willfully executing or attempting to execute a scheme or artifice connected to the delivery of or payment for health care benefits, items, or services to either:

- Defraud any health care benefit program;
- Obtain by means of false or fraudulent pretenses, representations, or promises any of the money or property owned by or under the control of any health care benefit program

Example: Several doctors and medical clinics conspire in a coordinated scheme to defraud by submitting medically unnecessary claims for power wheelchairs.

See Something? Say Something!

Report issues of FWA by calling Capitol Dental Care's hotline at (844) 688-0097.

Want to Know More?

See Capitol Dental Care's FWA policy at <http://capitoldentalcare.com/wp-content/uploads/2012/05/Fraud%20Waste%20and%20Abuse%20Detection%20and%20Prevention%20018.01.pdf>

CMS FWA training is available at <https://learner.mlnlms.com/Default.aspx>.