

HHS OIG Speaks Out on Telehealth Fraud

Richard P. Kusserow | March 25, 2021

Christi A. Grimm, the Principal Deputy Inspector General of the Department of Health and Human Services (HHS), issued a [statement](#) regarding telehealth issues that have arisen as a result of the COVID-19 pandemic. She notes that decisions about telehealth were made in response to the public health emergency to provide relief through funding, supplies, and reductions in regulatory and procedural burdens.

[CMS implemented several waivers and flexibilities](#) that allowed Medicare beneficiaries to access a wider range of telehealth services without having to travel to health care facilities. These actions made oversight, enforcement, transparency, program integrity, and accountability even more important. There is widespread consideration being given to expanding coverage for telehealth services based on the experience providers and patients have had during the pandemic. For most, the expansion of telehealth services has been viewed positively due to opportunities to increase access, decrease burdens, and enable better care.

Grimm notes that it is important that new policies and technologies are not compromised by fraud, abuse, or misuse. She reports that the HHS Office of the Inspector General (OIG) is conducting significant oversight work to uncover any fraudulent activity during the public health emergency. These reviews, with reports to be released later this year, will provide objective findings and recommendations that can assist policymakers who are considering which telehealth flexibilities can be made permanent.

The OIG is also continuing to focus on “telefraud” schemes, and has conducted several large investigations of [fraud schemes](#) that inappropriately leveraged the reach of telemarketing schemes. These were perpetrated in conjunction with unscrupulous doctors who conducted sham remote visits for the purpose of increasing the reach and size of the criminal activity. In many cases, the criminals did not bill for the sham telehealth visits, but instead billed fraudulently for other items or services (such as durable medical equipment or genetic tests). On the Congressional front, there is a movement in the House of

Representatives to make telehealth flexibilities enacted during the COVID-19 pandemic permanent to help close gaps in care.