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VA, Health and Human Services Announce Partnership to
Strengthen Prevention of Fraud, Waste and Abuse Efforts

WASHINGTON — Today, the U.S. Department of Veterans Affairs (VA) and Department of Health and Human Services (HHS) Centers for Medicare and Medicaid Services (CMS) announced a partnership to share data, data analytics tools and best practices for identifying and preventing fraud, waste and abuse.

This newest partnership enhances ongoing efforts between the country’s two largest public-private health-care payment organizations to help America’s Veterans by leveraging the gains made by CMS.

“The VA-HHS alliance represents the latest example of VA’s commitment to find partners to assist with identifying new and innovative ways to seek out fraud, waste and abuse and ensure every tax dollar given to VA supports Veterans,” said VA Secretary Dr. David J. Shulkin. “This effort marks another step toward achieving President Trump’s 10-point plan to reform the VA by collaborating with our federal partners to improve VA’s ability to investigate fraud and wrongdoing in VA programs.”

CMS continues to focus on reducing and eliminating fraud, waste and abuse in Medicare, and in 2010, it established the Center for Program Integrity to help with this work. CMS estimates that its program integrity activities saved Medicare operations $17 billion in fiscal 2015. Other HHS combined efforts — including law enforcement — contributed to greater program savings.

VA plans to capitalize on the advancements in analytics CMS has made by concentrating on its use of advanced technology, statistics and data analytics to improve fraud detection and prevention efforts. Additionally, in November 2017, VA invited industry experts to provide information on the latest commercial sector tools and techniques to enhance VA’s fraud detection capabilities. In April, VA will invite these industry experts to demonstrate their capabilities for detecting and preventing fraud, waste and abuse and recovering improper payments.

“We have a special obligation to keep America’s promise to those who have served our country and ensure that Veterans receive high-quality and accessible health care,” said CMS Administrator Seema Verma. “CMS is sharing lessons learned and expertise to support VA to identify waste and fraud and eliminate these abuses of the public trust. Using state-of-the-art data analytics, CMS is partnering with VA to better detect and prevent wrongdoing in its programs.”

By using CMS’ successes in its program integrity protocols, VA will be able to close existing gaps in its own claims payment process.

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