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VA, Health and Human Services partner to improve health care protections for Veterans

The U.S. Department of Veterans Affairs (VA) and Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) recently announced the two agencies will compare information on questionable Veteran health care providers both in VA treatment facilities and through purchased care programs in their communities.

VA and CMS expect the first Medicare Sanction data exchange to occur by the end of the year and continue at recurring intervals.

"CMS is an industry leader when it comes to identifying questionable providers and nefarious medical practices," said VA Secretary Robert Wilkie. "Their willingness to partner with VA puts Veterans first by allowing us to identify providers who do not meet our quality standards."

"CMS is proud to work with VA and share our innovative data analytics and best practices for detecting and preventing potential fraud, waste and abuse across other federal healthcare programs to improve care to our nation's Veterans," said CMS Administrator Seema Verma.

Medicare Sanctions include abusive billing practices, felony convictions or improper prescribing practices. Employing CMS protocols provides VA with a proven tool to use data to address potential problems earlier and more systematically. VA will carefully review matches to determine employees' continued suitability for VA employment and providers' continuing participation in community care programs and will take swift action to protect Veterans.

This data match for provider enrollment information is one of many efforts planned as part of the VA and CMS partnership first announced in January 2018. The agencies are actively exploring additional data sharing focused on identifying fraud, waste, and abuse in health care payments.

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