



Insights from the OIG Work Plan

An exploration of opportunities for healthcare attorneys working with clients in the mental health and substance abuse disorder space.

Updated August 2024

Since this whitepaper was published in January 2024, there have been many updates and changes to the OIG work plan. These changes are from the Office of Inspector General (OIG) work plan updates released in August 2024 and have been noted in red throughout the document. Some of the tasks have been completed and removed, some have been revised, and there have even been some additions. It is important to note that these changes were made over a 7-month time span – just 7 months. Many of these tasks are on track to be completed this year and the rest are expected to be completed in 2025.

Ensure your clients are set up for success and aligned with the OIG work plan by discussing these work plan items, the timeline for completion, and the recommended next steps.

About the OIG Work Plan

The Office of Inspector General (OIG) work plan* provides a wealth of information about the office's enforcement priorities as well as the OIG's audits and evaluations. It can be a helpful resource – that is if you have time to wade through it!

As of January 16, 2024, there were nearly 250 unique work plan items. The OIG applies tags to each item to indicate areas the item relates to. To complicate matters more, the work plan is updated monthly, requiring constant vigilance on the part of compliance professionals. The information provided in this document is based on OIG revisions as of January 16, 2024.

For example, the January 16, 2024 revised work plan had a total of 35 tags. Tags help readers identify work plan items that may be most applicable to their organization. The set of tags is updated as needed. This is why taking the time to review the document each month is so important. A case in point is the new COVID-19 tag that obviously did not exist before the COVID-19 pandemic.

Each unique work plan item may have multiple tags. Examples of tags include Hospitals, Laboratories, Medicare A, Medicare B, Medicare C, Medicare D, Private Insurance, Quality of Care, etc. The full list of tags that were used in the January 16, 2024 revision can be found in Appendix I of this document.

** Source: HHS-OIG. (2019, May 15). Work Plan | Office of Inspector General | U.S. Department of Health and Human Services. <https://oig.hhs.gov/reports-and-publications/workplan/>*

About the OIG Work Plan (cont'd)...

On the OIG website, there is an “Active Work Plan Items” page that displays all current work plan items. For convenience, new work plan items can be located on the “Recently Added” page; completed items can be found on the “Work Plan Archive” page. Completed work plan items remain on the work plan for one month. Following that month they are moved to archive status. Reports completed recently appear on the “What’s New” page.

Mental Health and Substance Abuse Related Work Plan Items

As of January 2024, of the 245 work plan items, there were 14 tagged with “Substance Abuse Disorder” and 10 tagged with “Mental Health.” Of those, there were 7 items tagged with both “Substance Abuse Disorder” and “Mental Health.”

Items with Both “Substance Abuse Disorder” and “Mental Health” Tags

1. Audit of Substance Abuse and Mental Health Services Administration's FindTreatment.gov (Revised)
2. Access to Medications for Opioid Use Disorder at Health Centers
3. States' and Managed Care Organizations' (MCOs') Compliance With Mental Health Parity Requirements (Completed (Partial))
4. Strategies To Improve Access to Maternal Health Care in Medicaid Managed Care (Revised)
5. Medicaid Rehabilitation Services Made by Community Residence Providers (Completed (Partial))
6. Availability of Behavioral Health in Medicare Fee-For-Service, Medicare Advantage, and Medicaid Managed Care (Completed (Partial))
7. Audits of Substance Abuse and Mental Health Services Administration's (SAMHSA's) Certified Community Behavioral Health Clinic Expansion Grants (Completed (Partial))

Health law attorneys advising provider organizations may want to recommend their clients add audits to their work plans that mirror those the OIG is undertaking.

Four of the seven work plan items noted above offer little in the way of potential recommendations for most health law attorneys. Item 1 can be considered an internal audit. Items 2 and 4 relate to reviews to gain information that will inform strategies for improving access to care. Item 7 is a review of SAMHSA's administration of grant funding.

Item 3, however, may offer an opportunity for discussion for some health law attorneys - if their clients include States or States' MCOs that serve Medicaid populations. The Health Parity Act for mental health and substance use disorder coverage prohibits limitations of coverage that are more restrictive than medical or surgical benefits. Clients are required to conduct parity analyses and comply with requirements. Areas that should be assessed include higher copays, separate deductibles, more restrictive preauthorization requirements, or medical necessity reviews for mental health and substance abuse disorder coverage as compared with medical/surgical coverage.

Item 5 provides opportunities for client organizations that offer residential rehabilitation services to developmentally disabled adults and children, as well as adolescents with serious emotional issues who reside in group homes or supervised apartments. Such organizations would do well to undertake a review to be sure that they are meeting Federal and State requirements.

Item 6 concerns Medicare Fee-For-Service, Medicare Advantage, and Medicaid Managed Care Behavioral Health Providers. Providers should be aware that the Office of Evaluation and Inspections will be looking at the ratio of behavioral health providers to beneficiaries, the ability of providers to accept new patients and schedule appointments, and the extent to which providers listed in a network actually provide services to beneficiaries. Clean-up of provider directories is recommended on an ongoing basis.

Mental Health Work Plan Items Without a Substance Abuse Disorder Tag

1. Assessing the Alaska Foster Care Agency's Compliance, Challenges, and Successes When American Indian and Alaska Native Children Go Missing From Care
2. Timeliness of Mental Health Care Following a Suicide Attempt or Intentional Self-Harm Incident for Children Enrolled in Medicaid
3. Medicaid Partial Care Program (Completed and archived - April 2024)

Item 1 is limited to the foster care system for American Indian and Alaska Native Children. While important, the scope is narrow.

Items 2 and 3 may be of more general interest. For Item 2, health law attorneys with clients providing follow up services to children enrolled in Medicaid following a hospitalization or emergency department visit would do well to advise their clients to track the days between the acute intervention and the initial follow up and identify barriers and challenges to timely follow up.

Item 3 requires a little more context. The Medicaid Partial Care Program is a follow-up on a State Agency with a previously identified high risk of improper payments for adult partial care program participants. These participants have serious mental health conditions. The audit also includes an assessment of telehealth services provided during the COVID-19 pandemic. Health law attorneys advising provider organizations offering adult partial care programs may want to consider advising an independent third-party claims Audit-C as well as an audit of telehealth claims for services during the COVID-19 pandemic.

Substance Abuse Disorder Work Plan Items Without a Mental Health Tag

1. Mandatory Review of HHS Agencies' Annual Accounting of National Drug Control Program Funds (Completed and archived - February 2024)
2. Maintaining Buprenorphine Treatment for Medicare Enrollees With Opioid Use Disorder
3. Audit of the Rural Communities Opioid Response Program (Revised)
4. Opioid Use in Medicare Part D in 2022: Annual Review (Completed and archived - February 2024)
5. Access to Providers Prescribing or Dispensing Medications for Opioid Use Disorder in Medicare and Medicaid
6. Audit of Medicare Part B Opioid Use Disorder Treatment Services Provided by Opioid Treatment Programs- Bundled Payments and Telehealth Services
7. Audit of States' Administration of SAMHSA's Substance Abuse Prevention and Treatment Block Grant Funding (Completed - will be archived September 2024)

Added: Substance Abuse Disorder Work Plan Items Without a Mental Health Tag

- Audit of the Office of National Drug Control Program Performance Measurements and Targets Reported for the FY 2023 Annual Drug Control Assessment (Added May 2024)
- Audit of FY 2024 CMS Financial Statements (Added May 2024)

Four of the above seven items offer limited opportunities for most health law attorneys. Item 1 can be considered an internal review.

Item 2 is focused on information gathering to develop a better understanding of people with opioid disorders to prevent overdoses.

Item 3 is limited to a review of 12 recipients of a Rural Communities Opioid Response Program grant. Item 7 is a review of grant administration.

Item 4 is an annual review to identify opioid utilization of Medicare Part D beneficiaries in 2022. It also identifies prescribers with prescription patterns that are high outliers for opioids. Item 5 assesses the impact of expanded Medical and Medicaid coverage of medications for opioid use disorder. Health law attorneys may want to encourage their client providers to assess opportunities to expand medication approaches to opioid use disorder where clinically indicated.

Item 6 is a review of Opioid Treatment Programs that participated in Bundled Payments programs for Medicare enrollees. It targets the treatments provided, how treatments were provided (in-person vs. telehealth), frequency of services, as well as compliance with Medicare requirements. Health law attorneys with clients participating in the bundled health program may consider advising clients to review their operational processes and documentation.

Two items were added to the work plan in May 2024. The first new item (bullet 1) is a review of the National Drug Control Strategy and Budget and the effectiveness of the policy efforts, goals and objectives. This review will include the Centers for Disease Control and Prevention (CDC) and the Substance Abuse and Mental Health Services Administration (SAMHSA) measures and targets and the processes and any challenges that were faced during implementation.

The second bullet is a review to determine if the financial statements present fairly and if the audit was conducted in accordance with Federal requirements.

Do you or your client require expert assistance with the OIG work plan or auditing associated documentation? LW Consulting, Inc. can help! Our team can audit your documentation & coding with the work plan in mind. Learn more on our website at www.lw-consult.com.



APPENDIX I: OIG Workplan Tag Counts

OIG Work Plan Tags	Number Used as of August 15, 2024
Hospitals	21
Children and Families	24
Contracts	11
COVID-19	22
Departmental Operational Issues	40
Dependent Care	3
Elderly	47
Emergency Preparedness and Response	20
Financial Stewardship	76
Food, Drug, and Device Safety	7
Grants	39
Information Technology and Cybersecurity	11
Laboratories	6
Managed Care	28
Medicaid	45
Medical Supplies and Equipment	8
Medicare A	27
Medicare B	35
Medicare C	18
Medicare D	12
Mental Health	9
Native Americans	11
Non-institutional care	10
Nursing Homes, Nursing Facilities, and Assisted Living Facilities	20
OIG Statutory Authority and Regulatory Matters	14
Other Funding	33
Other Minorities	14
Other: Health Disparities	1
People with Disabilities	12
Physician and Healthcare Practitioners	13
Prescription Drug	19
Private Insurance	2
Public Health Issues	40
Quality of Care	36
Substance Abuse Disorders	14
Total Work Plan Items with Listed Tags	195