Date: February 25, 2011

Centers for Medicare & Medicaid Services
Office of the Administrator
Center for Program Integrity

Data Analytics and Control Group
(FCLD)

- Serves as CMS primary focal point for analytics related to fraud, waste and abuse.

- Provides statistical and data analysis for program integrity issues in the original Medicare, Medicare Advantage, Prescription Drug Plan and Medicaid programs.

- Identifies emerging fraud trends through data mining and other advanced analytical techniques.

- Examines predictive analytics and modeling concepts that use innovative technologies supporting a combination of behavioral analysis, network analysis, and predictive analysis to identify fraud. Through testing various approaches, develops models that will not return false positives, and identifies subjects for further investigation.

- Implements national fraud prevention program for payments and provider enrollment that incorporates predictive modeling and end to end tracking.

- Participates in the preparation and presentation of reports/hearing materials to Congress.

- Develops Medicare and Medicaid program integrity strategy related to data integration and analytics.

- Collaborates with the Provider Enrollment Operations Group, Office of Information Services and Chief Operating Officer to develop specifications for provider/supplier data maintenance that support bill processing edits in contractor claims systems and the Common Working File, thereby, facilitating correct and timely processing of claims from Medicare providers/suppliers.

- Develops the return on investment (ROI) methodology for the Medicare integrity program and oversees the monitoring of that measure.

- Develops and maintains Information Technology platforms and data access methodologies for detection of fraud and abuse.

- Conducts special program integrity studies focused on cross program issues.

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Data Analytics and Control Group
(continued)

- Identifies and develops appropriate performance measurements in collaboration with other groups within the Center.

- Provides technical support and assistance to other groups within the Center in the execution of program oversight activities.

- Serves as liaison to other components to provide data integration and analytics.

- Establishes and manages Rapid Response Team to respond to and resolve high priority program integrity concerns.

- Represents the Center or Agency and participate in intra and inter agency work groups on critical and emerging program integrity issues.

- Responds to media inquiries and requests for interview or data/information related to Medicare program integrity initiatives and activities.