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CMS looks to EHR data to combat waste and fraud

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CMS is looking at EHR reporting as a way to help the embattled agency weed out payment inefficiencies and combat rampant Medicare and Medicaid fraud. "We hope to be able to use data available through the use of new electronic health record reporting that can help in the design of new and innovative approaches to finding emerging trends and vulnerabilities in high-risk areas such as durable medical equipment and home health.," acting CMS Administrator Charlene Frizzera said in an agency statement last week.

Medicare and Medicaid made \$54.2 billion in erroneous payments during the fiscal year ended Sept. 30, more than half of all improper payments by all federal agencies, according to the White House's Office of Management and Budget. Particularly alarming was the finding that the error rate for Medicare fee-for-service claims jumped to 7.8 percent in fiscal 2009, double the 3.6 percent rate a year earlier, thanks in part to a more rigorous accounting method. Improper payments through Medicare advantage soared to 15.4 percent from 10.6 percent. Errors are the result of government waste, poor documentation and, of course, fraud.

For more on HHS's effort to reduce waste and fraud:

- check out this *Government Health IT* [story](#) [1]

- read this *CMS* [press release](#) [2]

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[3] <http://www.fiercehealthit.com/story/medicare-fraud-growing-due-design-it-systems/2008-06-16>

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