

HEALTHCARE FRAUD PREVENTION PARTNERSHIP

WHAT IS THE HEALTHCARE FRAUD PREVENTION PARTNERSHIP (HFPP)?

The HFPP is a voluntary, public-private partnership between the federal government, state agencies, law enforcement, private health insurance plans, employer organizations, and healthcare anti-fraud associations to identify and reduce fraud, waste, and abuse across the healthcare sector. HFPP partners regularly collaborate, share information and data, and conduct cross-payer studies to achieve these objectives. Given the HFPP's broad membership encompassing a variety of players interested and involved in detection of fraud, waste, and abuse in the healthcare system, it is uniquely positioned to examine emerging trends and develop key recommendations and strategies to address them.

THE HFPP CURRENTLY HAS 91 PARTNERS, INCLUDING:

- 9 Federal Agencies
- 12 Associations
- 22 State & Local Partners
- 48 Private Payers

WHY DOES THE HEALTHCARE FRAUD PREVENTION PARTNERSHIP EXIST?



To deliver unique cross-payer analyses of healthcare data across the Centers for Medicare and Medicaid Services (CMS), state Medicaid offices, and private payers



To identify potential savings that Partners cannot identify in their data alone



To increase detection of fraud, waste, and abuse across the private and public healthcare spectrum

WHAT MAKES THE HFPP UNIQUE?



IMPACT

HFPP's studies enable Partners to take substantive actions to stop fraudulent and improper payments from going out the door



INSIGHT

HFPP provides Partners with broader visibility into the universe of payments beyond those issued by a single payer



INNOVATION

Partners work with experts to identify emerging threats and design new methods to combat them

WHAT ARE THE BENEFITS OF JOINING THE HEALTHCARE FRAUD PREVENTION PARTNERSHIP?



ENHANCED ANALYTICS USING PUBLIC AND PRIVATE DATA:

The HFPP is the only organization through which Partners can combine their data with public and private data, including the CMS, in order to gain heightened insights into fraud, waste, and abuse.



EXPAND RESEARCH: Partners inform study criteria and designs for maximum impact and join forces to address emerging trends with fraud, waste, and abuse implications.



CONFIDENTIALITY AND SECURITY: A Trusted Third Party (TTP) enforces the security and de-identification of Partner data. *No Partner – public or private – has access to the data of other Partners.*



COLLABORATION: Through a variety of HFPP events including General Assemblies, Regional Information Sharing Sessions, and webinars on trending topics, Partners leverage their collective experiences to play a leading role in shaping the future of the Partnership and in combating healthcare fraud across the nation.

To learn more about joining the Healthcare Fraud Prevention Partnership
Please contact us at TTP@csra.com, or visit our website at hfpp.cms.gov.

As of December 04, 2017

THE FOLLOWING DISCLAIMER APPLIES: All Healthcare Fraud Prevention Partnership (HFPP) communications and activities are purely voluntary. All HFPP activities, including all committees and the Executive Board, are to be used solely as venues for discussion whereby individual partners can voluntarily share facts, information, or individual input. No group consensus, advice, recommendations, policy-making, or decision-making will be sought or performed as a result of HFPP activities. The Secretary and the Attorney General or their designees will make final policies or other decisions.

