

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Administration for Children and Families**

[Program Announcement No. OCS 2001-07]

Family Violence Prevention and Services Program, National Resource Center on Domestic Violence and Four Special Issue Resource Centers; Availability of Funds for Fiscal Year 2001 and Request for Applications

AGENCY: Office of Community Services (OCS), ACF, DHHS.

ACTION: Notice; correction.

SUMMARY: This notice corrects the announcement of Family Violence Prevention and Services program, National Resource Center on Domestic Violence and Four Special Issue Resource Centers; Availability of funds for Fiscal Year 2001 and Request for Applications published on June 12, 2001 (66 FR 31657).

FOR FURTHER INFORMATION CONTACT:

Administration for Children and Families, Office of Community Services, Division of State Assistance, 370 L'Enfant Promenade, SW, Washington DC 20447. Telephone William Riley, (202) 401-5529, James Gray, (202) 401-5705, Sunni Knight (202) 401-5319 or Shena Russell, (202) 205-5932.

Correction

In the **Federal Register** issued June 12, 2001 (66 FR 34657), make the following correction. On page 31661 in the first column, remove the paragraph under Budget Period and Federal Share, and replace with:

"The total FY 2001 Federal share for the four cooperative agreements in support of four Special Issue Resource Centers (SIRCs) is \$4,351,075 for the first 12-month budget period, subject to the availability of funds."

(Catalog of Federal Domestic Assistance number 93.592, Family Violence Prevention and Services)

Dated: July 7, 2001.

Clarence H. Carter,*Director, Office of Community Services.*

[FR Doc. 01-17441 Filed 7-11-01; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Administration for Children and Families**

[Program Announcement No. OCS 2001-08]

Fiscal Year 2001 Training, Technical Assistance and Capacity-Building Program; Availability of Funds and Request for Applications

AGENCY: Office of Community Services (OCS), ACF, DHHS.

ACTION: Notice; correction.

SUMMARY: This notice corrects the announcement of Fiscal Year 2001 Training, Technical Assistance and Capacity-Building Program; Availability of Funds and Request for Applications published on July 2, 2001 (66 FR 34996).

FOR FURTHER INFORMATION CONTACT:

Margaret Washnitzer, Director of State Assistance, Office of Community Services, Administration for Children and Families, 370 L'Enfant Promenade, SW., Washington, DC 20447 (202) 401-9343.

Correction

In our notice issued July 2, 2001 (66 FR 34996), make the following correction. On page 34998 in the first column, the first full paragraph, in the fifth line after the word, "follows", remove the four priority and subpriority areas and all the language therein, and add;

Priority Area 1.0: Training and Technical Assistance for ROMA Implementation*Sub-Priority Areas*

- 1.1 National Academy (NA)
- 1.2 Leadership Development (LD)
- 1.3 Train-the-Trainers (TT)
- 1.4 Best Practices (BP)
- 1.5 Impact Information (IF)
- 1.6 Special ROMA Technical Assistance (RM)

Priority Area 2.0: CAA Capacity Building*Sub-Priority Areas*

- 2.1 National Training (CB)
- 2.2 Collection, Analysis and Dissemination of Information On the CSBG Activities (IS)
- 2.3 Local Capacity Building (CP)
- 2.4 Strengthening CAA Capacity to Address Legal Issues (LF)
- 2.5 Addressing Urban Needs (UI)
- 2.6 State CAA Association Capacity Building (EQ)

Priority Area 3.0: Strengthening At-Risk Agencies*Sub-Priority Areas*

- 3.1 Special State Technical Assistance
- 3.2 National Peer-to-Peer Assistance

Priority Area 4.0: Information Sharing*Sub-Priority Area***4.1 Information Sharing Tools**

Dated: July 7, 2001.

Clarence H. Carter,*Director, Office of Community Services.*

[FR Doc. 01-17440 Filed 7-11-01; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Office of Inspector General****Publication of OIG Special Advisory Bulletin on Practices of Business Consultants**

AGENCY: Office of Inspector General (OIG), HHS.

ACTION: Notice.

SUMMARY: This **Federal Register** notice sets forth a recently issued OIG Special Advisory Bulletin addressing certain questionable marketing and other practices by independent business consultants. These practices may put the Medicare and Medicaid programs at increased risk of fraud and abuse. The purpose in issuing this bulletin is to alert providers, suppliers and others to those practices.

FOR FURTHER INFORMATION CONTACT:

Vicki Robinson, Office of Counsel to the Inspector General, (202) 619-0335.

SUPPLEMENTARY INFORMATION: In an effort to identify and eliminate fraud, waste and abuse, the Office of Inspector General (OIG) periodically develops and issues Special Advisory Bulletins to alert health care providers about industry practices and arrangements that potentially pose a risk to the Federal health care programs. The purpose of this Special Advisory Bulletin is to identify certain questionable practices that are engaged in by a small number of consultants and to emphasize the need for health care providers to exercise good business judgment when selecting and relying on a consultant. A reprint of the recently issued Special Advisory Bulletin follows.

Special Advisory Bulletin on Practices of Business Consultants (June 2001)*Introduction*

The Office of Inspector General (OIG) was established at the Department of Health and Human Services (HHS) by Congress in 1976 to identify and eliminate fraud, abuse, and waste in the Department's programs, including the Medicare and Medicaid programs, and to promote efficiency, economy, and effectiveness in departmental operations. Historically, the OIG has

primarily carried out this mission through a nationwide program of audits, investigations, and inspections. More recently, the OIG has augmented its efforts to detect fraud, abuse, and waste with increased efforts to promote prevention through the issuance of guidance to the health care industry.

Providers, suppliers, and others¹ involved in the health care industry not only serve the health care needs of Federal program beneficiaries, but they also play an essential role in safeguarding the integrity of the Federal programs. As part of our commitment to working with industry, we want to alert providers to certain marketing and other practices used by some independent consultants that should concern providers and that may put the Medicare and Medicaid programs at increased risk of abuse. While some of the practices described in this bulletin do not themselves rise to the level of fraud and may not be illegal in all cases, all of the practices increase the risk of abuse of the Medicare and Medicaid programs. We encourage providers to recognize and protect themselves and the Federal programs against these questionable practices. Providers use the legitimate services of consultants, such as accountants, attorneys, business advisors, and reimbursement specialists, for many *bona fide* reasons, including, for example, improving the efficiency and effectiveness of the provider's operations (including its coding and billing systems), enhancing the accuracy of the provider's claims, conserving resources through outsourcing, and ensuring compliance with applicable laws, regulations, and rules. Responsible consultants play an integral role in developing and maintaining practices that enhance a client's business objectives, as well as improving the overall integrity of the health care system.

We believe that most consultants, like most providers, are honest and that the vast majority of relationships between providers and consultants are legitimate business activities. Unfortunately, a small minority of unscrupulous consultants engage in improper practices or encourage abuse of the Medicare and Medicaid programs. Depending on the circumstances, these practices may expose both the consultants and their clients to potential legal liability.² Hiring a consultant does not relieve a provider of responsibility for ensuring the integrity of its

dealings with the Federal health care programs.

Questionable Practices

To safeguard themselves, providers engaging the services of consultants should be alert to the following questionable practices:

Illegal or Misleading Representations. Consultants may make illegal or misleading statements or representations about their relationship with the Medicare program, the Centers for Medicare and Medicaid Services (CMS),³ or the OIG. For example, consultants may misrepresent that they have "inside" or "special" access to the OIG or to OIG materials. In other cases, consultants may misrepresent that their services or products are approved, certified, or recommended by Medicare, CMS, HHS, or the OIG. Such claims are misleading and potentially harmful to well-meaning providers. Illegal or misleading statements or representations include, for example:

- An educational consultant misrepresenting that its Medicare reimbursement seminars are mandatory for obtaining or maintaining a Medicare provider number. Although such training may be valuable, the Medicare program does not require a provider to attend training courses in order to participate in the Medicare program.
- A consultant misrepresenting that a provider that fails to attend its "Medicare-sanctioned" seminars will be subject to Government penalties. In truth, the Government does not penalize providers for such conduct.
- A consultant improperly using Federal program logos or symbols on its marketing materials.⁴
- A consultant claiming that it is recommended by the OIG. The OIG does not recommend or endorse particular consultants or particular consultants' services.
- A compliance consultant falsely asserting or implying that it offers recognized accreditation or certification for compliance programs or compliance officers.

Promises and Guarantees. Consultants may explicitly or implicitly promise or guarantee specific results that are unreasonable or improbable. In some cases, consultants may resort to improper means to effectuate these promises or guarantees, such as submitting

false claims or preparing false cost reports on behalf of a client. This misconduct potentially subjects both the consultant and the provider to liability under the False Claims Act.⁵ Problematic promises would include, for example:

- A valuation consultant promising or assuring a client that its appraisal of a physician's practice will yield a "fair market value" that satisfies the client's need for a particular valuation, regardless of the actual value of the practice.
- A billing consultant promising a prospective client that its advice or services will produce a specific dollar or percentage increase in the client's Medicare reimbursements. The consultant's fee is often based on a percentage of this increased reimbursement.

Encouraging Abusive Practices. Some consultants may knowingly encourage abuse of the Medicare or Medicaid programs. In some cases, reimbursement specialists or other consultants advocate that their clients engage in aggressive billing schemes or unreasonable practices that are fraudulent or abusive of the Medicare or Medicaid programs. This conduct potentially subjects both the consultant and the client to liability under the False Claims Act. For example:

- A reimbursement specialist may suggest that a client use inappropriate billing codes in order to elevate reimbursement and may describe methods to avoid detection.
- A consultant may encourage a client to modify or customize a routine medical supply in an insignificant manner to justify billing the supply as a device that generates higher reimbursement.
- A reimbursement specialist may advise a client to bill for an expensive item or service with a high reimbursement rate when a less expensive item or service with a lower reimbursement rate was actually provided to the patient.
- A consultant may advise a client to adopt a patently unreasonable interpretation of a reimbursement law, regulation, or rule to justify substantially greater reimbursement.
- A consultant may promise to increase Medicare revenues for laboratory services by showing its clients how to disguise double billings and claims for medically unnecessary services.
- A consultant may suggest the creation of deceptive documentation in order to mislead potential reviewers.

Discouraging Compliance Efforts. Some consultants may make absolute or blanket statements that a client should not undertake certain compliance efforts (such as retrospective billing reviews) or cooperate with payor audits, regardless of the client's circumstances. As reflected in the OIG's compliance guidances,⁶ the OIG believes that voluntary compliance efforts, such as internal auditing and self-review, are important tools for doing business with the Federal health care programs. Left undetected and, therefore, unchecked and

¹ For purposes of simplicity, the term "providers" as used in this bulletin refers to providers, suppliers, and practitioners that provide items or services payable in whole or in part by a Federal health care program.

² The practices described in this bulletin are illustrative, and this bulletin does not purport to identify every potentially improper practice arising from the relationship between a provider and a consultant, nor does it purport to identify every potential violation of the criminal or civil statutes. In particular, this bulletin is not intended to identify every potential violation of the False Claim Act or the anti-kickback statute, although some of the practices described may contribute to, or increase the risk of, violations of these provisions. This bulletin does not address the many fraud and abuse concerns that arise from sham consulting arrangements.

³ The Health Care Financing Administration (HCFA) renamed the Centers for Medicare and Medicaid Services; misuse of the new or former name would be equally deceptive.

⁴ Section 1140 of the Social Security Act prohibits the improper use of the words "Medicare", "Medicaid", "Health Care Financing Administration", "HCFA", "Department of Health and Human Services", "DHHS", "Health and Human Services", "HHS", "Social Security", "Social Security Account", "Social Security System", "Social Security Administration", "Supplemental Security Income Program", "SSI", and "SSA", and any variation on these words, as well as the symbols or emblems for the SSA, HCFA and HHS. Violations are punishable by civil money penalties of \$5,000 per violation (in the case of mail solicitation or advertisement, each piece of mail constitutes a separate violation) or \$25,000 in the case of a broadcast or telecast. The OIG enforces this authority.

⁵ The False Claims Act ascribes liability only where the party knows or acts with reckless disregard or deliberate ignorance of the falsity of the claim.

⁶ The OIG's compliance guidances are available on our webpage at <http://www.hhs.gov/oig>.

uncorrected, improper billing or other conduct may exacerbate fraud and abuse problems for a provider in the future.

Conclusion

Consultants who abuse their position of trust pose a risk to their provider clients, to the Federal health care programs, and to themselves. While most consultants are honest and provide valuable services to their clients, a small minority engage in questionable practices or promote abuse of the Federal health care programs. In general, if a consultant's advice seems too good to be true, it probably is. We urge providers to be vigilant and to exercise judgment when selecting and relying on consultants.

Dated: July 3, 2001.

Michael F. Mangano,

Acting Inspector General.

[FR Doc. 01-17484 Filed 7-11-01; 8:45 am]

BILLING CODE 4152-01-P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4650-N-46]

Notice of Submission of Proposed Information Collection to OMB Outline Specifications

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is

soliciting public comments on the subject proposal.

DATES: *Comments Due Date:* August 13, 2001.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB approval number (2577-0012) and should be sent to: Joseph F. Lackey, Jr., OMB Desk Officer, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

FOR FURTHER INFORMATION CONTACT:

Wayne Eddins, Reports Management Officer, Q, Department of Housing and Urban Development, 451 Seventh Street, Southwest, Washington, DC 20410; e-mail Wayne_Eddins@HUD.gov; telephone (202) 708-2374. This is not a toll-free number. Copies of the proposed forms and other available documents submitted to OMB may be obtained from Mr. Eddins.

SUPPLEMENTARY INFORMATION: The Department has submitted the proposal for the collection of information, as described below, to OMB for review, as required by the Paperwork Reduction Act (44 U.S.C. Chapter 35). The Notice lists the following information: (1) The title of the information collection proposal; (2) the office of the agency to collect the information; (3) the OMB approval number, if applicable; (4) the description of the need for the information and its proposed use; (5) the agency form number, if applicable; (6) what members of the public will be

affected by the proposal; (7) how frequently information submissions will be required; (8) an estimate of the total number of hours needed to prepare the information submission including number of respondents, frequency of response, and hours of response; (9) whether the proposal is new, an extension, reinstatement, or revision of an information collection requirement; and (10) the name and telephone number of an agency official familiar with the proposal and of the OMB Desk Officer for the Department.

This notice also lists the following information:

Title of Proposal: Outline Specifications.

OMB Approval Number: 2577-0012.

Form Numbers: HUD-5087.

Description of the Need for the Information and Its Proposed Use:

Information is prepared by the architect employed by the Public Housing Agency (PHA) or Turnkey Developers to establish types and qualities of materials and equipment to be incorporated into public housing developments. The PHA and HUD use this information to determine that suitable equipment and materials specified comply with the code and standards and are appropriate in the development. Applicable authority is Section 6(A) of the U.S. Housing Act of 1937.

Respondents: Not-for-profit institutions, State, Local or Tribal Government.

Frequency of Submission: On occasion and monthly.

	Number of respondents	×	Frequency of response	×	Hours per response	=	Burden hours
Reporting burden	240		2.98		3.70		2,652

Total Estimated Burden Hours: 2,652.

Status: Extension of currently approved collection.

Authority: Section 3507 of the Paperwork Reduction Act of 1995, 44 U.S.C. 35, as amended.

Dated: June 29, 2001.

Wayne Eddins,

*Departmental Reports Management Officer,
Office of the Chief Information Officer.*

[FR Doc. 01-17422 Filed 7-11-01; 8:45 am]

BILLING CODE 4210-72-M

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4650-N-47]

Notice of Submission of Proposed Information Collection to OMB Analysis of Proposed Main Construction Contract

AGENCY: Office of the Chief Information Officer, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is

soliciting public comments on the subject proposal.

DATES: *Comments Due Date:* August 13, 2001.

ADDRESSES: Interested persons are invited to submit comments regarding the proposal. Comments should refer to the proposal by name/or OMB approval number (2577-0037) and should be sent to: Joseph F. Lackey, Jr., OMB Desk Officer, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

FOR FURTHER INFORMATION CONTACT:

Wayne Eddins, Reports Management Officer, Q, Department of Housing and Urban Development, 451 Seventh Street, Southwest, Washington, DC 20410; e-mail Wayne_Eddins@HUD.gov;