

Commenter	Comment Summary	CMS Response
America's Health Insurance Plans	<p>America's Health Insurance Plans (AHIP), a founding member of the Healthcare Fraud Prevention Partnership (HFPP) expressed its support of the HFPP efforts and the goal to identify the optimal way to coordinate nationwide sharing of health care claims information to identify and prevent fraud, waste, and abuse and its commitment to helping the HFPP realize the great potential of enhanced cooperation between the public and private sectors in finding and fighting health care fraud. AHIP commented on the benefits to the public for the HFPP to be able to collect and share data and information across a larger group of payers in a timely and effective fashion. More specifically, AHIP recognized the deterrence effect that will increase as those, who would commit fraud realize their misconduct will be exposed by the HFPP data and information sharing and the effectiveness, nimbleness, and efficiency of distributed data models to the HFPP work.</p>	<p>The HFPP and its committees will design, develop, and manage studies in coordination with a Trusted Third Party to collect and consolidate partner (both public and private) study-related data in order to share information among the HFPP pertaining to the analytical tools and techniques; study analysis; successful anti-fraud practices, trends and vulnerabilities; and reports that maintain the confidentiality of its source data. AHIP's comments expressed its support for the HFPP information collection request and the studies targeting specific vulnerabilities within the payment systems in both the public and private sectors. CMS appreciates AHIP's interests in the information collection and its commitment, as a partner, toward achieving the HFPP goals. CMS has reviewed and considered AHIP's positive feedback, comments and suggestions and will continue to address this perspective moving forward with the implementation of the HFPP and the HFPP Trusted Third Party.</p>