



## NAMPI 2025 ANNUAL CONFERENCE

### CALL FOR SESSIONS

#### I. OVERVIEW

The NAMPI Board of Directors is thrilled to announce the Call for Sessions for the 2025 Annual Conference, scheduled to take place from Sunday, August 24, to Wednesday, August 27, 2025. New this year are areas for MCOs presentation submissions, nomination sections for NAMPI to seek out presenters, and space to provide additional background and content to better help NAMPI review submissions. Take a few moments to review the information provided below, designed to assist you in developing your session submission. **The submission deadline is Friday, April 4, 2025.**

This year's call for sessions invites you to select a category from the below list of program integrity functions. The Board will use these categories to build out the program, creating frameworks and tracks for the conference agenda.

- Provider investigations
- Provider and/or Program review audits
- Beneficiary fraud Prevention and Investigations
- Broad programmatic compliance efforts
- Law enforcement interactions
- Mental Health and Substance Abuse
- Claims Payment and Processing
- Provider Enrollment
- Other regulatory oversight implications

For more details on this year's session categories, please refer to the explanations below.

[Click here to access the Call for Sessions form.](#)

#### II. DETAILS ON NAVIGATING THE SUBMISSION PROCESS

##### PROVIDER INVESTIGATIONS

Provider investigations aim to distinguish themselves from provider review audits. These investigations, from a program integrity standpoint, focus on early-stage efforts to discern suggestions or intent of fraud that may warrant a law enforcement referral. Topics may include specific substantive issues, case studies, and investigative techniques.



#### PROVIDER and/or PROGRAM REVIEW AUDITS

Provider review audit functions encompass various procedural aspects of the audit processes, including interactions with Medicaid program/s, policy officials or providers, records handling, processes, statistical sampling, records reviews, and legal issues related to audits or administrative proceedings specific to overpayment recoveries.

#### BENEFICIARY FRAUD PREVENTION and/or INVESTIGATIONS

Beneficiary fraud covers topics where the primary educational focus is on schemes, investigations, audits, and recoveries related to fraud, abuse, or waste by beneficiaries. This may include policies and procedures regarding handling beneficiary fraud and the relationship between administrative activities and law enforcement/prosecutorial referrals. This also includes fraud prevention efforts undertaken to deter and limit fraud, abuse, or waste.

#### BROAD PROGRAMMATIC COMPLIANCE EFFORTS

Broad programmatic compliance efforts include topics such as provider or managed care plan contracting issues, program integrity infusion into provider enrollment efforts, special projects, and other program integrity activities not readily categorized as an audit or investigation.

#### LAW ENFORCEMENT INTERACTIONS

Law enforcement interactions cover topics ranging from referral processes to assisting law enforcement in investigations, aiding prosecutors in fraud prosecutions, in depth case joint case presentations, and any collaborative efforts with state and federal law enforcement. Regulatory oversight includes any other licensure issues or state/federal law-focused topics.

#### MENTAL HEALTH AND SUBSTANCE ABUSE

Mental health and substance abuse topics encompass medical and behavioral health programs, showcase focused efforts on alignment of policies, and highlight interaction between compliance and clinical collaboration.



## CLAIMS PAYMENT AND PROCESSING

Claims payment and processes covers a broad array of topics relevant to NAMPI members. Submissions should provide clarity on the specific topic being presented, including sub topics as listed in the provided reference, and link to areas of consideration relevant for fraud, waste, and abuse.

## PROVIDER ENROLLMENT

Provider Enrollment involves the use of contracting and capturing different federal and state regulations within enrollment and revalidations processes. Topics may include differences in licensing vs entity regulations, advanced screening reviews, site visit processes, agency best practices, provider moratoriums, or any other varied topic as it relates to program integrity considerations.

## III. ADDITIONAL INFORMATION

**Specificity in Session Ideas:** As title session and description is not always enough, please provide a short synopsis that connects additional narrative details for review by the NAMPI Board. Individuals submitting session ideas should be as specific as possible to set clear expectations for conference participants. Suggestions include:

**Data Analytics Presentations:** Include a detailed explanation of the methodology for easy replication by participants without requiring specific tools or software. Presentations should include tangible codes, algorithms, and trending methods for participants.

**Beneficiary Fraud Category:** In case of an overlap with investigation procedures, include a broad array of resources or tools used in investigations, enhancing the educational value for participants.

**Provider Moratorium and advanced screening methods,** including partnering with other divisions and/or agencies.

**Managed Care Plan Training and Reviews:** Covering fraud, waste and abuse reviews of the plan, training conducted to enhance specific areas, and leveraging engaged plan involvement in fraud schemes.

**Full Case presentations** that incorporate engagement from program integrity, law enforcement, and prosecution involvement.