

# Virtual Conference 2020

Clinical • Coding • Compliance

May 18-20, 2020



## **AAMAS 2020 Speaker** **Lou Saccoccio, JD, Chief Executive Officer,** **NHCCA**

**Wednesday, May 20**  
**8:30-10:00 AM**

Louis Saccoccio began his service as the chief staff executive of the National Health Care Anti-Fraud Association (NHCAA) in January, 2005. Reporting directly to the NHCAA Board of Directors, he serves as the CEO of the Washington D.C.-based association that protects and serves the public interest by increasing awareness and improving the detection, investigation, prosecution and prevention of health care fraud. He is responsible for the successful undertaking of the association's overall strategic objectives, as well as the management of all activities, operations, and staff.

Mr. Saccoccio's background includes legal, operational and business management expertise. Prior to joining NHCAA, he served as Senior Vice President of Professional Services at America's Health Insurance Plans (AHIP). In this capacity, he was responsible for all business operations of the association, including membership, business development, marketing, and education programs. Prior to overseeing AHIP's business operations, he served for six years as its General Counsel.

Prior to joining AHIP in 1996, Mr. Saccoccio practiced law in Washington, DC, specializing in health care law and representing a range of health care clients, including hospitals, physician groups, behavioral health providers and long-term care providers. He also served as an Assistant United States Attorney for the District of Columbia. His military experience includes eight years of service as a Navy JAG lawyer, including tours as an appellate counsel handling national security cases and as the Legal Officer of the aircraft carrier USS KITTY HAWK (CV 63). He is a graduate of the United States Naval Academy and Harvard Law School.



**Brief outline of session:**

Health care is in a state of perpetual change and evolution, yet fraud is seemingly a constant. It is a complex crime that can manifest in countless ways. In the United States the many payers—both private and public— together with the sheer volume of health care claims and the data they generate make fraud detection a challenge. There are many points of susceptibility along the path of a health insurance claim. And fraud can be committed by anyone: physicians and other providers, employees with access to medical and claims records, enterprise crime organizations, and even patients and their loved ones.

In this session, Louis Saccoccio from NHCAA will offer insights on recent trends in health care fraud, waste and abuse and examine the legal and regulatory environment in which health insurers operate to identify fraud.

