OFFICE OF INSPECTOR GENERAL’S

Work Plan 2008

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Introductions

- Georgeann Edford
  - President, Coding Compliance Solutions LLC
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  - Senior Vice President/Chief Compliance Officer and Audit Officer, UC System
- George M. Reeb
  - Assistant Inspector General for CMS within OIG, HHS
- Carol Lessans
  - Director of the Planning, Reporting, and Analysis Division of the Office of Management and Policy
- Brian Ritchie
  - Assistant Inspector General for Evaluation and Inspections, Office of Evaluation and Inspections,
- Steve Ortquist
  - Partner, Mead Roach
Today’s Objectives

- Foster an open dialogue that enables the sharing of information
- Obtain an insight into why the areas noted in the Work Plan pose a compliance concern.
- Obtain feedback from Providers relative to the issues outlined in the Work Plan.
THE WORK PLAN PROCESS

Multi-Agency Involvement
HISTORY OF THE WORK PLAN
The 2008 Work Plan
Place of Service Errors

- Different payment rates apply depending on Place of Service.
- Medicare pays a higher amount to physicians depending on place of service
  - Office
  - ASC
  - Outpatient Hospital
- Specific set of place of services codes exist for placement on the CMS 1500 (08/05)
E&M Services in Global Period

- “The global surgery fee includes payment for a certain number of E&M services during the global surgery period. “
- “We will determine industry practices related to the number of E&M services provided during the global surgery period have changed since the global surgery fee concept was developed in 1992”
Medicare Payment for Psychiatric Services

- Determine whether services are “reasonable and necessary”
- Former studies
- Ongoing assessments
Services Performed by Clinical Social Workers

- Services performed by Clinical Social Workers (CSW) to hospital inpatients and SNF’s to determine if services were billed to Medicare Part B.
- Examine Part A and Part B claims for overlapping dates of services.
Payment for Selected Physician Services

- “…appropriateness of Medicare Part B payments for selected physician services performed by physicians, including surgery;
  - Consultations; and
  - Home, office and institutional calls.
Medicare “Incident To”

- “... examine Medicare services that selected physicians bill “incident to.”

- Focused reviews “selected physicians”

- Focus on
  - Medical Necessity
  - Documentation
  - Quality of Care
Appropriateness of Payments for Polysomnography

- “Sleep Studies”
- Medicare coverage for limited number of conditions
- Payment increased by 62% in 3 years (2001 to 2004)
- Examine causes of increase
Long Distance Physician Claims

- Payment for physician services for care of patient’s receiving care from:
  - HHA’s or
  - Residing in a SNF
- Significant distances
Assignment Rules

- Providers comply with assignment rules
- “Balance Billing”
Business Relationship /MRI

- Examine the relationship under which MRI is provided.
- Describe relationships among physicians, billing providers and others who work together to provide imaging services.
- Does the type of relationship cause an increase in utilization of MRI services?
Interventional Pain Management

- Procedures include:
  - Needle Placement of drugs in targeted areas;
  - Ablation of targeted nerves; and
  - Certain surgical techniques.
- Examine the appropriateness of payments and
- Assess oversight
- Treatment for “Chronic, localized pain that does not respond well to other treatments.”
Geographic Utilization Variances

- Related to Ultrasound services
- Number of ultrasound services per beneficiary in certain areas dramatically higher than others areas of the Country.
Geographic High Density of IDTF’s

- Certain geographic areas have a disproportionate number of Independent Diagnostic Testing Facilities (IDTF’s)
- Performance standards
- Many of these facilities fail to meet the performance standards
- Examine service, provider and beneficiary profiles
- Billing patterns
Chiropractic Treatments

- Medicare coverage for manual manipulation of spine to correct subluxation of the spine.
- Not intended as maintenance therapy
Reassignment of Benefits

- Physicians reassign their right to Medicare payments
- South Florida Fraud Scheme
- Number of reassignments may be indicative of fraudulent or abusive activity.
Questions

Audience Submitted Questions
Session Summary

- Key Points
Assessment and Evaluation

- Please completed the evaluations …