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♦ McBride Orthopedic Hospital in Oklahoma agreed to pay \$414,649 in a Civil Monetary Penalties Law settlement with the HHS Office of Inspector General. The settlement stemmed from the hospital's self-disclosure. OIG alleged the hospital submitted false or fraudulent claims to Medicare, Medicaid, TRICARE and the Rural Carrier Benefit Plan from July 1, 2011, to June 30, 2017. The hospital allegedly billed (1) for professional services related to surgeries performed by two employed physicians with the modifiers 51, 58 and/or 59 improperly appended; (2) professional and facility fees related to post-surgical visits provided by a licensed practical nurse without physician supervision; and (3) evaluation and management services provided by an employed physician during office visits that had modifier −25 improperly appended and/or billed as split/shared, according to the settlement. OIG also alleged the hospital knew about the overpayments from "educational audits" but didn't report and return them. The hospital didn't admit liability in the settlement and declined to comment. It was accepted into OIG's Self-Disclosure Protocol in June 2018.

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