

Report on Medicare Compliance Volume 30, Number 12. March 29, 2021 Providers Risk Recoupment or Worse for PRF Noncompliance; Consider a Mock Audit

By Nina Youngstrom

The consequences for providers may be serious if they run afoul of the terms and conditions and/or reporting requirements of the Provider Relief Fund (PRF), attorneys said. They may find out soon, as multiple audits of PRF money disbursed to providers are underway or looming, and the director of audit at the HHS Office of Inspector General (OIG) said there's a possibility of a separate audit of balance billing, which is one of the PRF terms and conditions. Meanwhile, providers are still waiting to hear from HHS about certain reporting deadlines and a process for returning unused PRF money.

The penalties for PRF noncompliance run the gamut, attorney Julie Sullivan said March 24 at the Institute on Medicare and Medicaid Payment Issues sponsored by the American Health Law Association. According to HHS, hospitals and other health care organizations could have their money recouped if they report inaccurate information in connection with the PRF.

"Uglier cases of deliberate misinformation can be punishable by revocation of Medicare billing privileges" or criminal, civil or administrative penalties, said Sullivan, with Greenberg Traurig in Denver, Colorado. Providers also should be aware of whistleblower lawyers who are waiting in the wings to file false claims cases for alleged noncompliance with PRF terms and conditions, she said. As one ad for a whistleblower law firm stated, "Healthcare Fraud exists where the healthcare provider knowingly misrepresents, either that: Payment will or has been used to prevent, prepare for, and respond to coronavirus spread, and reimburse healthcare related expenses or lost revenues attributable to coronavirus; and/or Payment will or has been used for expenses or losses that have been or will be reimbursed from other sources, i.e., hospitals and other providers may not balance bill COVID-19 patients."

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