

## Report on Medicare Compliance Volume 30, Number 23. June 21, 2021

### News Briefs: June 21, 2021

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◆ **Quest Diagnostics Incorporated, a clinical lab company, agreed to pay \$50,000 in a civil monetary penalty settlement with the HHS Office of Inspector General (OIG).** According to the settlement, which was obtained through the Freedom of Information Act, the OIG alleged that between Dec. 14 and Dec. 20, 2018, Quest paid remuneration to two medical practices “in the form of nonmonetary compensation when it paid for expenses related to their holiday parties.” The settlement stemmed from Quest’s self-disclosure to the OIG. Quest didn’t admit liability in the settlement, and its attorney declined to comment.

◆ **Starting July 1, CMS’ prior authorization process for procedures performed in hospital outpatient departments will apply to two additional procedures:** cervical fusion with disc removal and implanted spinal neurostimulators. In May, CMS updated its parameters for neurostimulator prior authorization. For the time being, it is removing CPT codes 63685 and 63688 from the list of outpatient services that require prior authorization. “The only service that will require prior authorization for implanted spinal neurostimulators is CPT code 63650,” CMS said on its website.<sup>[1]</sup> “Providers who plan to perform both the trial and permanent implantation procedures using CPT code 63650 in the [outpatient department] OPD will only require prior authorization for the trial procedure. When the trial is rendered in a setting other than the OPD, providers will need to request prior authorization for CPT code 63650 as part of the permanent implantation procedure in the hospital OPD.”

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