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By Nina Youngstrom

◆ **In the latest in a series of hospice provider compliance audits, the HHS Office of Inspector General (OIG) said Northwest (NW) Hospice LLC in Tigard, Oregon, doing business as Signature Hospice or Signature Healthcare at Home, received Medicare overpayments of $3.9 million.**[1] OIG audited 100 claims for services provided between June 1, 2016, and May 31, 2018, and concluded "the clinical record did not support the beneficiary's terminal prognosis" for 19 claims. "On the basis of our sample results, we estimated that NW Hospice received at least $3.9 million in unallowable Medicare reimbursement for hospice services," OIG contended. The overpayments include claims outside the reopening period. OIG recommended the hospice repay Medicare overpayments within the four-year reopening period and "exercise reasonable diligence to identify, report, and return any overpayments in accordance with the 60-day rule." In a written response on behalf of NW Hospice, a law firm said the hospice retained a geriatric medicine expert to review the disputed claims. After consulting with the expert, the hospice agreed with OIG on seven of the 19 claims because of documentation insufficiency. But NW Hospice disagreed on the other 12. Documentation exists "to support the reasonable clinical judgment of Northwest Hospice personnel that the symptoms; multiple, serious, difficult-to-manage comorbidities; and probable prognosis of the six patients, all but one of whom was 92 years old or older, continued to render them eligible and appropriate for hospice care during the audited period," the law firm letter stated.