

## Report on Medicare Compliance Volume 29, Number 1. January 13, 2020

### Physicians Settle Locum Tenens FCA Case; Some Providers May Cut Corners in this Area

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By Nina Youngstrom

Two physicians who own San Diego Retina Associates have agreed to pay \$948,768 to settle false claims allegations that they billed Medicare for services as if they were provided by a locum tenens physician when the physician was actually an employee, the U.S. Attorney's Office for the Southern District of California said<sup>[1]</sup> Jan. 2.

According to the settlement, ophthalmologists Mark Smith, M.D., and Fane Robinson, M.D., submitted Medicare claims with the Q6 modifier for services provided by Henry Hudson, M.D., to patients of San Diego Retina Associates from July 1, 2014, through Dec. 31, 2014. The Q6 modifier is appended to HCPCS codes when services are performed by a locum tenens physician, who is a substitute physician briefly used by practices and hospitals when the regular physician is unavailable. But Hudson "was not a temporary, substitute or locum tenens physician," the U.S. attorney alleged. He was employed by San Diego Retina Associates, although not enrolled in Medicare.

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