

## Report on Medicare Compliance Volume 29, Number 19. May 18, 2020 When Hours Don't Add Up: Example From an OIG Report

By Nina Youngstrom

According to an audit report from the HHS Office of Inspector General (OIG), [1] the timing didn't make sense on Medicare claims for psychotherapy and evaluation and management (E/M) services reported by Grand Desert Psychiatric Services in Las Vegas, Nevada. In an audit of 100 psychotherapy services billed to Medicare in 2017 and 2018, OIG said Grand Desert only billed one of them correctly. As a result, Grand Desert was overpaid \$5,173, which OIG extrapolated to \$421,272. For example, for 73 services, Grand Desert billed 30 minutes of psychotherapy with an E/M service, and there was documentation of a start time and a stop time, but "the documentation did not specifically show how much of that time was spent providing the psychotherapy services. Therefore, Grand Desert did not have support to show that it had spent at least 16 minutes on psychotherapy." The report also said most services were billed under the psychiatrist's national provider identifier (NPI) instead of the NPI of the provider who rendered the services, and some providers weren't enrolled in Medicare.

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