

Report on Medicare Compliance Volume 33, Number 28. August 05, 2024

News Briefs: August 5, 2024

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◆ **The HHS Office of Inspector General (OIG) has updated its fraud risk and heightened scrutiny spectrum.**^[1] The spectrum ranges from exclusion (highest risk) to no integrity obligations because of a self-disclosure (lowest risk). When health care organizations refuse corporate integrity agreements, OIG assigns them to the heightened scrutiny category. Seven providers are subject to heightened scrutiny.

◆ **Burlington County Eye Physicians (BCEP)—which has locations in New Jersey and Pennsylvania—and owner/ophthalmologist Gregory H. Scimeca have agreed to pay \$469,232 to settle false claims allegations over medically unnecessary transcranial doppler (TCD) tests billed to Medicare and the Federal Employee Health Benefit (FEHB) Program, the U.S. Attorney’s Office for the District of Massachusetts said July 29.**^[2] A TCD test is a noninvasive diagnostic test that can estimate the blood flow through certain blood vessels in the brain. BCEP contracted with a medical diagnostics company “to perform TCD tests on BCEP patients. The company staffed BCEP with a technician, who reviewed patient files and filled out forms to order TCD tests for BCEP patients from the Company. BCEP physicians, including Dr. Scimeca, signed the order forms the Company’s technician completed,” according to the U.S. attorney’s office. The government alleged that between May 13, 2019, and Feb. 22, 2021, BCEP submitted false claims, or caused the submission of false claims, to Medicare and the Federal Employee Health Benefit (FEHB) Program for TCD tests. The reasons: “(1) the TCD tests were medically unnecessary because the patients did not have symptoms justifying the need for the tests, or the tests were not necessary for the patients’ treatment; (2) BCEP and Dr. Scimeca billed for professional services that they did not perform; and (3) the arrangement between BCEP and the TCD company violated the AKS because BCEP and Dr. Scimeca accepted remuneration from the Company by billing for and retaining payments from Medicare and the FEHB Program for services that the Company provided.” The False Claims Act lawsuit was set in motion by a whistleblower.

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