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◆ In an audit of 100 outlier payments, the HHS Office of Inspector General (OIG) said Baylor Scott & White – College Station, a hospital in Texas, didn't properly bill claims related to 82 outlier payments. "These 82 claims, which had outliers totaling \$474,282, contained 174 billing errors," OIG said in the report,^[1] which was posted Sept. 11. OIG attributed the errors mostly to College Station not having adequate controls to avoid errors related to overcharged observation time, charge errors and coding errors. In a written response, Jason Jennings, senior vice president of the College Station Region, said the hospital will refund overpayments and described compliance improvements.

◆ In a new provider compliance audit,^[2] the HHS OIG said Flagstaff Medical Center in Arizona complied with Medicare billing requirements for 97 of the 100 claims reviewed. There were errors on three, resulting in overpayments of \$79,216 for the audit period (2016 and 2017). The hospital billed Medicare for inpatient admissions that should have been billed as outpatient or observation services. OIG recommended the hospital refund the overpayment amount and "exercise reasonable diligence to identify, report, and return any overpayments in accordance with the 60-day rule." In a written response, the hospital's chief legal counsel, Colleen Maring, said it disagreed with some of the findings and noted the hospital works continually to strengthen controls and comply with Medicare requirements.

¹ Amy J. Frontz, "Baylor Scott & White – College Station: Audit of Outpatient Outlier Payments," HHS, September 2020, <https://bit.ly/2ZqUTi4>.

² Amy J. Frontz, "Medicare Hospital Provider Compliance Audit: Flagstaff Medical Center," HHS, September 2020, <https://go.usa.gov/xGTFT>.

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