

Part B Insider (Multispecialty) Coding Alert

Compliance: Practices Collected Over \$8 Million in Part B Pay for Services Rendered After Patients Died

OIG identified massive overpayments for services rendered after patients' dates of death.

Part B practices should always be sure to record the correct date of service on their Medicare claims -- and one easy way for the OIG to track whether you followed this rule or not is to investigate the date the patient passed away. In many cases, practices are still charging for services long after their patients died, and it's costing the Medicare system millions. On Sept. 23, the OIG released the results of its audit, "Review of Medicare Parts A and B Services Billed With Dates of Service After Beneficiaries' Deaths," which revealed that CMS paid approximately \$8.2 million in benefits for claims with dates of service after the beneficiaries' deaths.

The OIG noted that Medicare will only pay for expenses "reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member...because medically necessary items or services cannot be provided after beneficiaries' deaths, no items or services are allowable" thereafter.

Correct Date of Service Is Imperative

Although many practices might be surprised to find that they have made an error like this, the OIG found such problems with claims for over 69,000 deceased beneficiaries between Parts A and B over a two-year period.

"It appears that the OIG was using Social Security records to determine the patients' dates of death, so it's unlikely that the date of death data was inaccurate -- and that leaves the practice's service date as the inaccurate information," says **Jay Neal**, an Atlanta-based coding consultant. "This is less likely to happen with electronic health records because the date is usually already in the system on those, but on paper records, it can be a clerical error or just a matter of the person not being aware of the date," he says.

The OIG recommended that CMS recover any payments for dates of service after patients had passed away. Although some of these services may have been fraudulent, it's likely that many of them were a result of simple errors as Neal outlines above. Ensure that your practice doesn't fall into this trap by following these simple tips.

Watch your date protocol: Neal says he has seen errors where practice employees misinterpret the dates that the physician writes down. "If the physician writes down '06-04-10,' he might mean June 4, 2010, whereas someone else might interpret that as April 6, 2010, because the date is written differently by different people."

Advice: If you manually enter the date of service into the patient's claim form, be sure and have a uniform way of writing the date at your practice, between all providers and back office staff members. In addition, you should cross-reference the date of service against the records for all deceased patients to ensure that you have recorded all dates appropriately.

Follow through with other data: If you're making errors on deceased patients' records, it's likely that you've also applied the wrong date on other patients' claims as well. Confirm that everyone in your practice is using the same criteria to apply dates of service. If some physicians still write the date with the numbers for the month and year transposed, it might be a good idea to ask all of the practitioners to start writing out the month instead. For instance, instead of 06-04-10, you might have to ask everyone to start writing out June 4, 2010.

CMS Doesn't Dictate Date Annotation

Currently, there are no Medicare standards indicating how you should indicate the date of service in your medical



records. "Often, the fee slip is printed on the date of service, and thus, it would be typed right on the form," says **Suzan Berman, CPC, CEMC, CEDC**, senior manager of coding education and documentation compliance with the Physician Services Division at the UPMC in Pittsburgh, Penn. "If the physician is turning in rounding cards, he or she may want to write out the name of the month and then add the date of service."

Suggestion: At Berman's facilities, the physicians often use a card with the months written on it. "The physician circles the month in which they are seeing the patient. We only give them available space for one week's worth of visits. This way, very little confusion can come into play."

To read the complete OIG report, visit www.oig.hhs.gov/oas/reports/region1/10900519.pdf.