

Part B Insider (Multispecialty) Coding Alert

Fraud and Abuse: Watchdog Barks Out Dirty-Dozen List of Coding Errors

If you're concerned about avoiding the most heinous coding problems, the HHS Office of Inspector General's annual Work Plan is a must-read. After all, the carriers are reading the OIG's hit list as well.

The OIG just published its Work Plan, and the agency lists a dozen areas it will keep an eye on. The OIG plans a study on **consultations** to see whether physicians have been billing appropriately for them. The agency also has its eye on **evaluation and management coding**, especially the high volume of high-level E/M codes that lead to bigger Medicare payments.

Also on the radar is the **use of modifiers with National Correct Coding Initiative edits**, which may be letting some physicians bill for things they shouldn't, and the use of **modifier -25** (Significant, separately identifiable [E/M services](#) ...), which lets physicians unbundle E/M services from procedures. In 2001, physicians billed \$1.7 billion for E/M services using modifier -25. The OIG also has it in for physicians who bill **"incident-to" services and supplies** provided by allied professionals.

The OIG also has its eye on **place-of-service errors**, questioning whether physicians billed for services in ambulatory service centers and outpatient departments using the physician office place-of-service code.

And the agency will look at whether the **monthly capitation payment for ESRD services** accurately reflects ESRD services provided to patients both at home and at outpatient facilities. If your physician bills for **"long-distance" visits** from far-away beneficiaries, you can expect to hear more about it from the OIG.

Physicians who provide **care-plan oversight for home health agencies** or frequently order **diagnostic tests** such as nerve conduction studies will also come in for OIG scrutiny.

And, the OIG will look into **physicians excluded from Medicare** who still bill for services, and whether physicians have been receiving overpayments for **radiation therapy services**, which should be reimbursed as one billable unit of service per every five sessions of treatment.

The OIG Work Plan is useful as "a cute little check list, but it almost never has anything that I wouldn't have expected," says attorney **David Glaser** at Fredrickson & Byron in Minneapolis.

Editor's note: The work plan is at <http://oig.hhs.gov>.