

Part B Insider (Multispecialty) Coding Alert

HIGH-END BILLING PUTS YOUR MEDICAL RECORDS ON THE LINE

Feds see through alleged cover-up at KY clinic

If your billing patterns stick out from the norm, you could end up as the centerpiece in a federal investigation. Case in point: The government filed a false claims complaint April 30 against **Logan Pain Management Center, Inc** and anesthesiologist/clinic operator **Dr. Michael Stevens**, according to U.S. Attorney **David L. Huber**. From 1997 to 2003, Stevens allegedly billed Medicare \$1.9 million for only 99 patient treatments, and Medicaid \$1.5 million for only 45 patients.

The complaint charges that service claims, such as those for neuromuscular junction tests, overstated by several hours the amount of time Stevens actually treated patients. Also, the complaint alleges Stevens never performed some services.

The investigation turned into a family affair when Steven's wife and in-laws, who also worked for the clinic and provided billing services, were named in the complaint for allegedly altering patient files, at Steven's request, to support the fraudulent claims.