

Part B Insider (Multispecialty) Coding Alert

In other news

Coding urine drug testing seems pretty straightforward—but for one laboratory, reporting these services landed them in hot water with the government, and cost them a \$4.675 million settlement.

The lab billed Medicare and Medicaid over a four-year period for urine drug testing, and added pathology codes along with the standard CPT codes to increase its charges. The lab performed a medical review (which Medicare doesn't cover) with each urine drug screen and tacked on the pathology code for these services, the OIG said in a statement.

It's possible that the settlement could lead to increased scrutiny of laboratory services, if the OIG's report is any indication. "

"Medicare is the largest payer for clinical laboratory services and, therefore, is vulnerable to fraud, waste, and abuse," said **Gloria Jarmon**, Deputy Inspector General for Audit Services in the May 21 news release. "In addressing that vulnerability, HHS-OIG uses a multidisciplinary approach, including data-mining, audits, and, as appropriate, enforcement actions, to protect the integrity of HHS programs and recover taxpayer dollars."

To read the complete news release about the settlement, visit www.justice.gov/usao/wvs/press_releases/May2014/attachments/0521141_Calloway_Settlement.html.