

Part B Insider (Multispecialty) Coding Alert

PART B MYTHBUSTER: OIG Requests \$40+ Million More Funds to Beef Up Fraud Detection

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The OIG has been on a roll over the past year, and they don't intend to slow down anytime soon. The agency has requested an additional \$41.5 million from the 2011 federal budget to help its efforts.

According to a 38-page report issued by Inspector General **Daniel Levinson**, the OIG requests \$324 million in funds for 2011, including the following allotments:

- \$25 million more "to continue oversight of Medicare and Medicaid activities previously funded through mandatory appropriations"
- \$40 million in additional funding "to focus ... on preventing health care fraud and enforcing current anti-fraud laws around the country through the Health Care Fraud Prevention and Enforcement Team (HEAT) initiative".

The OIG will save \$25 million from the 2011 budget by ending mandatory funding for oversight of Medicaid activities, because "authority for this funding expires at the end of FY 2010," the report says.

Analysis: Although the OIG's budget increases will incite fear in many practices, you shouldn't worry about the additional scrutiny unless you are doing something wrong.

"For every dollar they put into enforcement, the government receives multiple back, so it's just good business on the government's part to increase enforcement funding to stop fraud," explains **Michael F. Schaff, Esq.**, with Wilentz, Goldman and Spitzer in Woodbridge,

N.J. "Practices have been leery about the increase in funding, but if you're doing things right, you don't have to worry," Schaff says.

Strategy: "Every practice should have appropriate compliance procedures in place and be careful what they do," Schaff says. Make sure your staff is properly trained and that you don't upcode or bill for unnecessary services, "because right now if you're an outlier (for instance, if you bill a disproportionate amount of level five E/M visits), that will cause the payer to look at you more carefully. Ensure that you properly document whatever services you perform, because even if you bill for the specific services you provide, if you don't document those services properly, it's as if you never performed those services and you could be in trouble."

To read the report, visit www.oig.hhs.gov/publications/docs/budget/FY2011_HHSOIG_Congressional_Justification.pdf