

Part B Insider (Multispecialty) Coding Alert

Physician Notes: Doctor Faces Over Five Years in Prison for Taking Bribes from Lab

Exchanging cash for referrals is never a good practice—and has blown up in the face of one New Jersey physician, who was sentenced to 63 months in prison on July 8.

The doctor pleaded guilty of accepting \$1.8 million in bribes in exchange for sending patients to a diagnostic laboratory nearby. The scheme also involved 27 other people, all of whom admitted their guilt to the government.

The feds reviewed several incriminating text messages between the doctor and the lab director, one of which said, "the testing is 90 percent legit." The doctor had agreed to send \$1 million worth of blood testing referrals to the lab per month, with many of the tests being medically unnecessary.

"Physicians who accept kickbacks in exchange for patient referrals and ordering medically unnecessary blood tests undermine the public's faith in the medical profession and the financial stability of Medicare," said OIG Special Agent in Charge **Scott J. Lampert** in a July 8 statement. "OIG will continue to protect both taxpayers and patients by holding physicians accountable for such wrongdoing."

Resource: To read the DOJ's announcement about the case, visit www.justice.gov/opa/pr/doctor-sentenced-63-months-prison-accepting-18-million-bribes-test-referrals.

In other news...

It might seem like your MAC is taking longer than you'd like for a decision on your Part B appeal—but if you repeatedly resubmit your redetermination request, you'll actually make the process slower, not faster.

Such was the advice from Part B MAC NGS Medicare, which released an alert on July 7 about the issue. "We have seen an increase of duplicate redetermination requests from the provider community," NGS said. "These requests are for the same patient, same date of service, same issue and same provider. Medicare contractors have up to 60 days to render a decision on appeal requests. Please do not submit any duplicate appeals within this 60-day period, as it causes delays in processing and results in unnecessary costs as well as duplicative efforts to our appeal processors and the provider's billing staff."

In addition, don't submit your request online and follow it up with a written appeal. You only have to send one type of request for the MAC to have all of the information it needs to make a determination, NGS added.