

Part B Insider (Multispecialty) Coding Alert

Physician Notes: DOJ Arrests 94 People in One Day for Medicare Fraud Totaling Over \$250 Million in Alleged False Billing

Plus: OIG Estimates \$137 Million In KX Overpayments For DME

When the Medicare Fraud Strike Force has a big day, it has a very big day.

On July 16, the Dept. of Justice-Health and Human Services Medicare Fraud Strike Force charged 94 people for allegedly participating in different schemes to bill over \$250 million in false claims to Medicare carriers.

The defendants span across five different states (Florida, Louisiana, New York, Michigan, and Texas), and were involved in various fraudulent schemes against the Medicare program. For instance, practitioners in Miami were accused of fraudulently billing for physical therapy, home health care, and HIV infusion services, and a medical biller in that state is charged with billing approximately \$49 million for fraudulent services.

Even Medicare patients were under the microscope, with one Medicare beneficiary accused of selling her Medicare number to various clinics in New York, according to a July 16 AP article on the topic.

"Today's arrests illustrate how health care fraud schemes can replicate virally and migrate rapidly across communities," said Inspector General **Daniel R. Levinson**. "To combat this fraud, the government's response must also be swift, agile, and organized -- a HEAT initiative goal which is well illustrated by today's Strike Force actions."

To read the entire DOJ press release on the initiative, visit www.stopmedicarefraud.gov/innews/dc.html#july-16-2010.