

Part B Insider (Multispecialty) Coding Alert

Physician Notes: HHS Nails 20 People for \$200 Million in Fraudulent Healthcare Billing

Plus: Providers Throng OIG Compliance Sessions

Despite massive scrutiny on healthcare billing fraud in South Florida, practitioners in that region continue to skirt the line between right and wrong. The Department of Justice and the OIG announced on Feb. 15 that the government filed a 38-count indictment against 20 people, including three doctors, for several fraudulent activities involving erroneous Medicare billing practices.

According to the DOJ's news release, the medical professionals are accused of submitting false claims for mental health services which were medically unnecessary or that never took place at a group of Miami-based clinics. The doctors who served as the clinic's medical directors are accused of altering patient charts and therapy documentation to insinuate that the patients qualified for partial hospital program treatments even when they didn't actually qualify. In addition, diagnoses and medication types were altered in the patients' records.

In all, the fraud involved approximately \$200 million in Medicare billing, the DOJ reports. To read the news release regarding the arrests, visit www.justice.gov/opa/pr/2011/February/11-crm-186.html.