

Eli's Hospice Insider

Fraud & Abuse: OIG Cracks Down On Hospice Medicaid Payments

State claims processing system at fault, new report says.

More evidence that the feds are putting hospices in their oversight crosshairs: a new report from the **HHS Office of Inspector General** examining a Massachusetts' hospice's Medicaid payments from 2007 to 2009.

The state incorrectly paid **Evercare Hospice & Palliative Care** \$1.27 million because "Evercare submitted claims that had incorrect information and the State agency's claims processing system was not designed to ensure that the appropriate per diem rate, payment reduction, and beneficiary financial contribution were used to calculate the correct claim payment amount," the report says.

Evercare agrees with about \$1.2 million of the incorrect payments, the hospice says in a response letter to the report. However, "we believe that Evercare's claims contained the most accurate information available to it at the time of billing," Evercare's compliance officer, **Beverly Duffy**, says in the letter. "Evercare did not intend to obtain payment from MassHealth to which it was not entitled, and reasonably expected MassHealth system edits to properly adjust claim payment amounts based on the information available to the state agency."

Evercare is a **UnitedHealth Group** hospice chain that provides hospice services in 11 states, it says on its website.

Note: The report is online at <http://oig.hhs.gov/oas/reports/region10/11000012.pdf>.