

OIG Turns Up Billing Errors in Physician Care Plan Oversight Claims Audit

"Physicians or physician billing contractors misunderstood the Medicare billing requirements for [care plan oversight] services or incorrectly billed due to computer software and clerical errors," the Department of Health & Human Services (HHS) Office of Inspector General (OIG) writes in an audit of a Medicare carrier that focused on physician claims for these services. OIG reviewed 115 care plan oversight claims from the 2001 to 2003 period in the audit.

OIG also determined that the Medicare carrier did not have sufficient controls to catch non-compliant billings. The primary problem OIG reported in this area related to billing for more than one unit of service, given that the coverage standards generally would lead to single-unit billing.

For the audit, OIG considered four separate billing codes to be under the umbrella of care plan oversight. These four codes involved certification of a Medicare-covered home health plan of care, recertification of a home health care plan, supervision of a patient receiving Medicare-covered home health services, and supervision of a patient under Medicare-approved hospice services.

All but two of the claims reviewed concerned certification and recertification. Regarding physician billing errors OIG uncovered, one situation involved a physician billing two units of service for the single-unit 30-minute care plan oversight supervision service. More than 30 claims had multiple units of service that had been misinterpreted by billing staff to mean the number of days between the first and last certifications.

In one case, the physician had billed 29 units of service for a single-unit recertification. Another error occurred when a billing contractor's software converted one unit of service into 10 on claims submitted to Medicare. OIG also faulted the Medicare carrier for its failure to add controls adequate to detect claims billed with more than one unit of service.

The ramifications of the audit report for the home care and hospice physician community may only be surfacing. The nature of the errors OIG reported indicates that the physician community may require educational support regarding care plan oversight billing requirements. In addition, software companies that support physician billing should be certain of the accuracy of their billing formats.

The OIG audit report, [number A-09-04-00056](#), is available at www.oig.hhs.gov.