

Health Headlines

February 13, 2012

OIG Issues Alert Warning Physicians that They Can Be Liable for False Claims Submitted by Entities to Which They Have Reassigned Their Medicare Billing Rights

On February 8, 2012, the Office of Inspector General (OIG) issued an OIG Alert warning physicians to exercise caution when reassigning their right to bill the Medicare program. According to the Alert, “[p]hysicians who reassign their right to bill the Medicare program and receive Medicare payments by executing the CMS-855-R application may be liable for false claims submitted by entities to which they reassigned their Medicare benefits.” The OIG indicated that it had recently reached settlements with eight physicians who had allegedly violated the civil monetary penalty law by causing the submission of false claims for claims submitted to Medicare by physical medicine companies to which the physicians had reassigned their Medicare billing rights in exchange for medical directorship positions. According to the OIG, the physical medicine companies billed Medicare for services that were not actually performed or performed as billed. The physical medicine companies, using the physicians' reassigned billing numbers, falsely certified to Medicare that services performed by unlicensed physical therapy technicians had been performed or directly supervised by the physicians, when such was not the case.

The Alert states that physicians have an obligation to monitor billing and other records to ensure that claims using their reassigned provider numbers are billed correctly. The OIG noted that physicians who reassign their billing rights to an entity have a right to access the entity's billing and claim information for the services that the physicians are alleged to have performed.

The OIG's alert is available [here](#).

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