

Road Map

• Why spend valuable resources auditing Physician Arrangements?

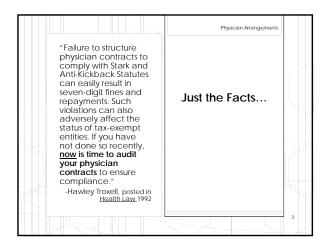
• What data to gather in developing the question sets.

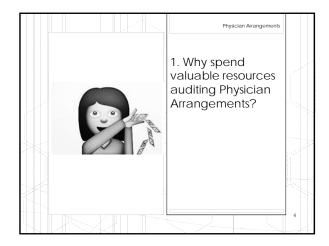
• Conduct a mock audit of a Medical Directorship.

• Define and interpret audit findings.

• How to report results to management and legal effectively.

• Distinguish roles of compliance officer and legal counsel during corrective action.





Why? It's the Law

• Physician Self-Referral Law ("Stark")

• Physician may not refer patients nor bill Medicare unless arrangement fits within a regulatory safe harbor.

• Anti Kickback Statute

• A criminal law that prohibits the knowing and willful payment of "remuneration" to induce or reward patient referrals

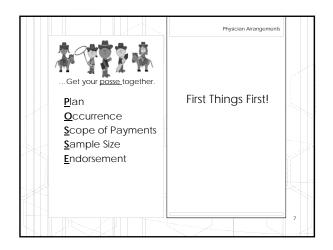
• False Claims Act

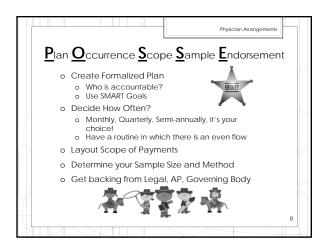
• It is illegal to submit claims for payment to Medicare or Medicaid that you know or should know are false or fraudulent.

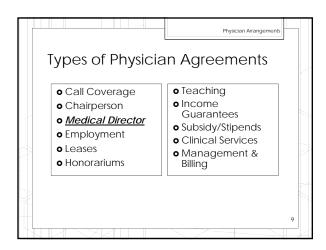
Why? Save Yourself from Trouble

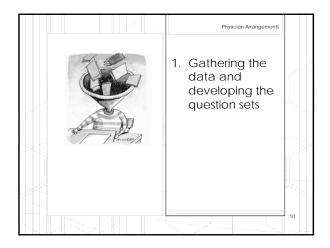
o Anti Kickback Statute Penalties
o Stark Penalties
o False Claims Act Penalties
o Mitigating Provider Liability
o Refund overpayments
o Whistleblowers
o The Regulatory Climate
o Increases in Government Enforcement
o Allegation that Compensation is not Fair Market
Value, not Commercially Reasonable, and that
Compensation Takes into Account Referrals

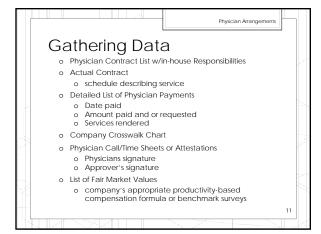
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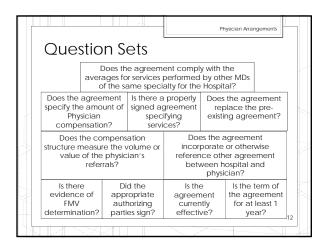


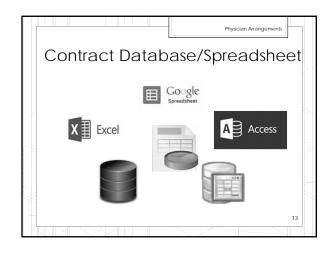


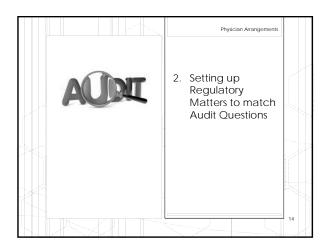




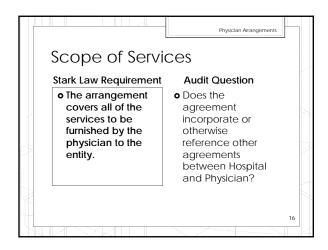


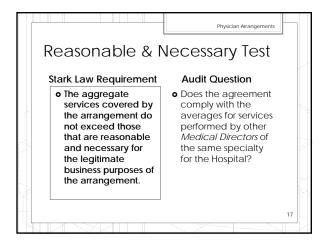


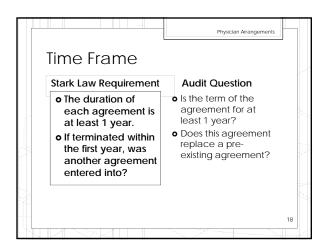


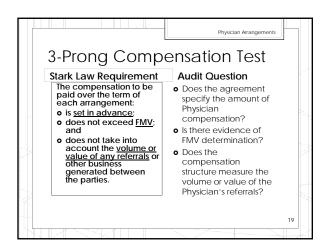


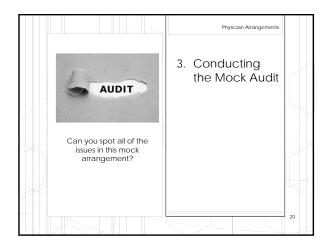


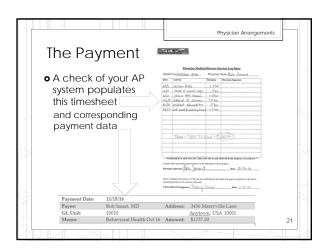




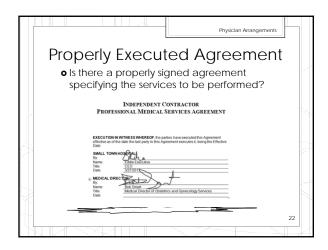


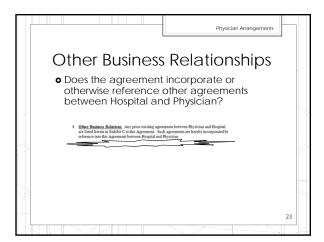


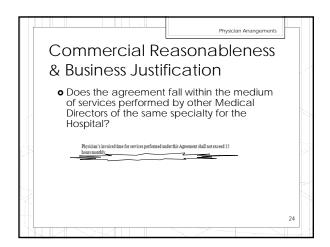




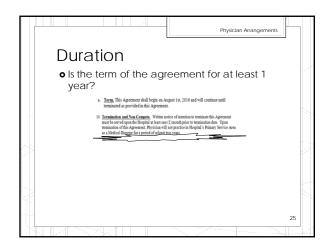
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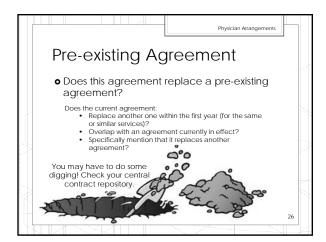


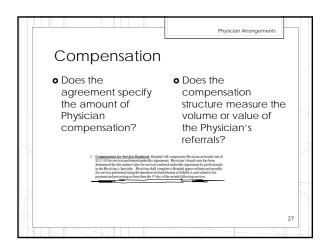


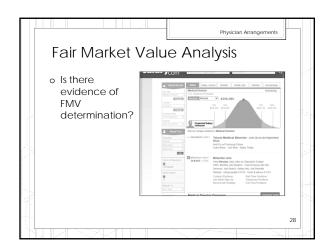


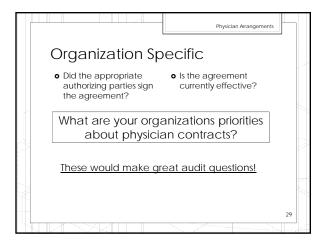
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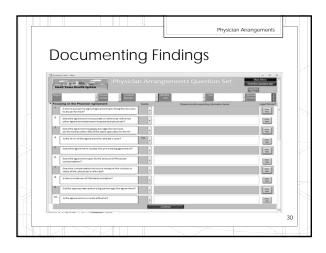


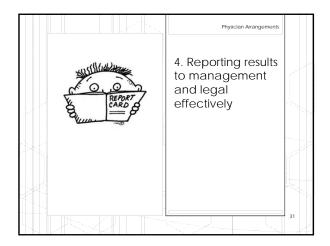


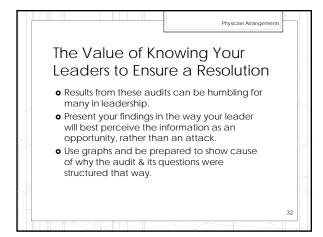


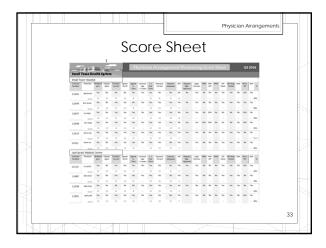


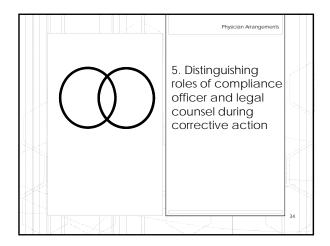


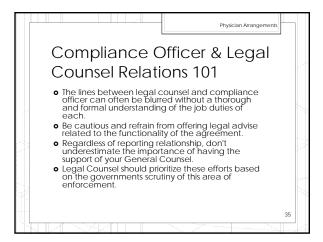


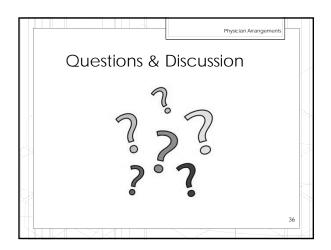












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