

Fraud & Abuse Outline

- Introduction and topic overview
- Setting the stage
 - What is co-management and how is it recognized by payers
 - Example – Medicare Claims Processing Manual, Chapter 12, Section 40.4(B) (providing codes and modifiers for physicians to use when billing for less than a full global surgery package)
 - Who are the various payers (Federal payers, commercial, self-pay)
- Legal framework
 - Anti-Kickback Statute
 - Overview
 - Safe Harbors
 - Penalties
 - Examples of how co-management can implicate the AKS, including where the surgery being co-managed is not reimbursable by federal health care programs (i.e., potential “swapping” arrangements)
 - False Claims Act
 - Overview
 - Penalties
 - Examples of AKS and FCA enforcement
 - Kentucky state laws
 - Overview
 - Penalties
 - What about the Stark Law?
- OIG guidance on co-management (2011 OIG Advisory Opinion)
- *U.S. v. Southeast Eye Specialists PLLC*
 - Overview of case and allegations in complaint
 - Review of district court ruling denying motion to dismiss
 - What’s next
- Guardrails to consider when co-managing patients
 - What can we take from the OIG guidance?
 - What care we take from *U.S. v. Southeast Eye Specialists PLLC*
- Questions