



## **2016 Billing Integrity Program – Sample of Health Care Practitioner Audit Results**

### **Health Practitioner A-16, Physical Therapist**

Health practitioner A-16 (HP A-16) is a physiotherapist who was practicing in an urban setting. HP A-16 initially came to the attention of the Billing Integrity Program as a result of a service verification audit that showed a large number of family constellation billings. Family constellation billings occur when multiple members of the same family are seen at the same visit. A majority of the billings for these family constellation patients had the same diagnostic code. It is possible, but very unusual, for multiple family members to have the same diagnosis and require concurrent physiotherapy treatment.

An on-site audit revealed that the clinical records did not substantiate the billings. In particular, the examination of the records found:

- Initial diagnoses were often not legible;
- Treatment plans were not documented;
- Current clinical findings were not documented; and
- Progress notes did not supply objective tests and were sometimes not legible.

In addition, there were concerns that not all services claimed by HP A-16 had been rendered based on the results of telephone interviews with members of 15 sample family groups.

Overall the audit found a 96 per cent error rate with 1,915 out of 1,994 services reviewed found to be in error.

A settlement was reached that resulted in the practitioner repaying the Medical Services Commission the sum of \$150,000 and having the practitioner's enrolment as a health care practitioner cancelled. The practitioner is prohibited from re-applying for enrolment for a period of 10 years from the date of the settlement.

### **Health Practitioner B-16, Acupuncturist**

Health practitioner B-16 (HP B-16) is an acupuncturist who was practicing in an urban setting. HP B-16 initially came to the attention of the Billing Integrity Program as a result of a project identifying high billing health care practitioners. Further investigation resulted in an on-site audit.



An on-site audit revealed that the clinical records did not substantiate the billings. In particular, the examination of the records found:

- 62 records where there was no entry on the date of service that was billed to the Medical Services Plan; and
- The clinical records for 1,354 services had no information regarding the presenting complaint, no patient history, no documentation of clinical findings, no diagnosis or treatment plan and no documentation of progress or the outcome of any treatment.

In addition, based on a sample of letters sent to beneficiaries, there were concerns that the services provided were not always acupuncture, but on occasion were herbal treatments which are not a benefit.

Overall the audit found a 98.8 per cent error rate with 1,424 out of 1,441 services reviewed found to be in error.

A settlement was reached that resulted in the practitioner repaying the Medical Services Commission the sum of \$108,124.00 and having the practitioner's enrolment as a health care practitioner cancelled. The practitioner agrees to not re-apply for enrolment as a health care practitioner.

### **Health Practitioner C-16, Acupuncturist**

Health practitioner C-16 (HP C-16) is an acupuncturist practicing in an urban setting. HP C-16 initially came to the attention of the Billing Integrity Program as a result of a complaint from a member of the public that the Medical Services Plan was billed for services which the complainant had not received. Further investigation resulted in an on-site audit.

An on-site audit revealed that the clinical records did not substantiate the billings. In particular, the examination of the records found:

- 84 services were billed where no record of any kind, including appointment records were found to substantiate the claim;
- The clinical records for 220 services were not complete and did not constitute an adequate clinical record; and
- 93 claims were identified where the fee item claimed by the practitioner were not consistent with the services described in the clinical records.

Overall the audit found a 27.5 per cent error rate with 511 out of 1,854 services reviewed found to be in error.

A settlement was reached that resulted in the practitioner repaying the Medical Services Commission the sum of \$10,000.00 and the practitioner agreeing to comply with a Pattern of Practice Order.



### **Health Practitioner D-16, Optometrist**

Health practitioner D-16 (HP D-16) is an optometrist who was practicing in an urban setting. HP D-16 initially came to the attention of the Billing Integrity Program as a result of a review of high billing health care practitioners. Further investigation resulted in an on-site audit.

An on-site audit revealed that HP D-16 had closed his practice and moved out of the country. He stated that his records had been transferred to another practitioner. Only a small portion of the requested records could be reviewed as the practitioner claimed that the information was in an electronic medical records system and that the data, including the back-up copy, had been damaged beyond recovery.

The audit found multiple inconsistencies with the practitioner's billing beyond the absence of records. An example was billing for eye examinations for patients who were in hospital at the time of the service, including one patient in intensive care on a ventilator. Correspondence with the hospitals and health authorities involved confirmed that the practitioner did not hold hospital privileges in any of the involved hospitals.

A settlement was reached that resulted in the practitioner repaying the Medical Services Commission the sum of \$1,153,000 and the practitioner agreeing to cancel his enrolment as a health care practitioner and to never apply for enrolment in the future.