

Report on Medicare Compliance Volume 28, Number 16. April 29, 2019 FQHC Pays \$300K to Put Telehealth Error to Rest; M.D.'s Name Was Not On List of Sites

By Nina Youngstrom

In a case at the intersection of technical compliance and telehealth, a federally qualified health center (FQHC) in southeastern Ohio agreed to pay \$99,683 to settle allegations it violated the Civil Monetary Penalties Law. Ironton-Lawrence County Community Action Organization billed Medicaid and, to a much lesser extent, Medicare for telepsychiatry services from a site of service that wasn't on its "scope of project," as required by the HHS Health Resources and Services Administration (HRSA), according to the settlement. The FQHC, which self-disclosed the lapse to the HHS Office of Inspector General, also repaid \$199,367 to Ohio Medicaid for the same error.

The site of service was the psychiatrist's home, says attorney Daphne Kackloudis, who represented Ironton–Lawrence County Community Action Organization. Although the FQHC already provided psychiatric services in the office setting, it arranged for the psychiatrist to treat patients by telehealth because "there's a general lack of psychiatrists participating in underserved areas," says Kackloudis, with Brennan Manna Diamond. "There probably isn't a psychiatrist who accepts Medicaid in that county."

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