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◆ The HHS Office of Inspector General (OIG) on Sept. 23 unveiled a new template for requesting advisory opinions.^[1]

◆ In a new report, OIG said CMS edits have reduced improper payments to acute-care hospitals for outpatient services they provide to beneficiaries who were inpatients at other facilities, such as inpatient rehabilitation and inpatient psychiatric facilities, but OIG puts providers on notice they “must exercise reasonable diligence to identify overpayments” stemming from this error because “OIG believes that this audit report constitutes credible information of potential overpayments.”^[2] According to the report, OIG found \$39.3 million in Part B payments to acute-care hospitals for 91,509 claims that included outpatient services rendered to beneficiaries who were inpatients of certain other facilities between Sept. 1, 2016, and Dec. 31, 2021. But after CMS modified its edits in May 2019, only \$3.4 million was incorrectly paid between June 2019 and December 2021. CMS explained that Medicare doesn’t pay acute-care hospitals for outpatient services they provide during Part A inpatient stays elsewhere in a 2017 MLN Matters article.^[3]

¹ U.S. Department of Health & Human Services, Office of Inspector General, “Advisory Opinion Request Template,” updated September 23, 2022, <https://bit.ly/3SffrDC>.

² Amy J. Frontz, *CMS’s System Edits Significantly Reduced Improper Payments to Acute-Care Hospitals After May 2019 for Outpatient Services Provided to Beneficiaries Who Were Inpatients of Other Facilities*, A-09-22-03007, Office of Inspector General, U.S. Department of Health & Human Services, September 2022, <https://bit.ly/3r7eVeA>.

³ Center for Medicare & Medicaid Services, MLN Matters, “Medicare Does Not Pay Acute-Care Hospitals for Outpatient Services They Provide to Beneficiaries in a Covered Part A Inpatient Stay at Other Facilities,” SE17033 Revised, updated December 13, 2017, <https://go.cms.gov/3LBSV54>.

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