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By Nina Youngstrom

◆ **Maury Regional Medical Center in Tennessee has agreed to pay \$1.7 million to settle false claims allegations over MS-DRG coding**, the U.S. Attorney's Office for the Middle District of Tennessee said April 13.^[1] After realizing there was "an aberrant rate of reimbursement" for certain DRGs with complications or comorbidities or major complications or comorbidities—stroke, respiratory infection, simple pneumonia and septicemia—the hospital did a self-audit, according to the settlement. "Based upon the results of the self-audit, Maury Regional made a voluntary disclosure to the United States." Data from the Program for Evaluating Payment Patterns Electronic Report, better known as PEPPER, prompted the self-audit, said attorney John Joseph, with Post & Schell, who represented the hospital. Ultimately, the U.S. attorney's office alleged the hospital submitted noncompliant claims for the DRGs from April 1, 2013, through March 31. In a statement, Maury Regional's CEO, Alan Watson, said "This settlement is based on the findings of our own internal review, during which we engaged the expertise of an independent auditor." The hospital statement said it "has developed a more robust pre-bill review process and conducted extensive education with staff. In addition, a member of the compliance team has attained additional certification in coding documentation and will be performing ongoing reviews for accuracy as well as engage independent auditors for periodic third-party reviews." Contact Joseph at jjoseph@postschell.com.

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