31ST ANNUAL HEALTH LAW CONFERENCE

March 27 - 29, 2016 Houston, Texas

Health Law Fundamentals: Fraud and Abuse Laws and HIPAA (Privacy Rule)

Violet M. Anderson

Violet M. Anderson Regional General Counsel CHRISTUS Health Irving, Texas

violet.anderson@christushealth.org (469) 282 - 2352

110570.1

TABLE OF CONTENTS

A.	The Stark Statute	1
В.	The Anti-Kickback Statute	7
C.	HIPAA	10

110570.1 - 11 -

COMPARISON OF THE ANTI-KICKBACK STATUTE AND STARK LAW*

	THE ANTI-KICKBACK STATUTE (42 USC § 1320a-7b(b))	THE STARK LAW (42 USC § 1395nn)	
Prohibition Prohibits offering, paying, soliciting or receiving anything of value to induce or reward referrals or generate Federal health care program business		 Prohibits a physician from referring Medicare patients for designated health services to an entity with which the physician (or immediate family member) has a financial relationship, unless an exception applies Prohibits the designated health services entity from submitting claims to Medicare for those services resulting from a prohibited referral 	
Referrals	Referrals from anyone	Referrals from a physician	
Items/ Services	Any items or services	Designated health services	
Intent	Intent must be proven (knowing and willful)	 No intent standard for overpayment (strict liability) Intent required for civil monetary penalties for <i>knowing</i> violations 	
Penalties	Criminal: Fines up to \$25,000 per violation Up to a 5 year prison term per violation Civil/Administrative: False Claims Act liability Civil monetary penalties and program exclusion Potential \$50,000 CMP per violation Civil assessment of up to three times amount of kickback	Civil: Overpayment/refund obligation False Claims Act liability Civil monetary penalties and program exclusion for knowing violations Potential \$15,000 CMP for each service Civil assessment of up to three times the amount claimed	
Exceptions	Voluntary safe harbors	Mandatory exceptions	
Federal Health Care Programs	All	Medicare/Medicaid	

^{*}This chart is for illustrative purposes only and is not a substitute for consulting the statutes and their regulations.



HEALTH CARE FRAUD PREVENTION AND ENFORCEMENT ACTION TEAM (HEAT)

See: https://www.oig.hhs.gov/compliance/provider-compliance-training/files/StarkandAKSChartHandout508.pdf

110570.1

B. The Stark Statute

Commonly known as the Stark Statute, The Ethics in Patient Referrals Act, Section 1877 of the Social Security Act (42 U.S.C. §1395nn), restricts referrals by physicians to providers of certain "designated health services" ("DHS") under the Medicare and Medicaid programs and prohibits designated health services entity from submitting claims to Medicare for services resulting from prohibited referrals. The Stark regulations are located in Title 42 of the Code of Federal Regulations §411.350 - §411.389.

1. DHS

The following items or services are DHS:

- (a) Clinical laboratory services;
- (b) Physical therapy services;
- (c) Occupational therapy services;
- (d) Outpatient speech-language pathology services;
- (e) Radiology and certain other imaging services;
- (f) Durable medical equipment and supplies;
- (g) Parenternal and enteral nutrients, equipment, and supplies;
- (h) Prosthetics, orthotics, and prosthetic devices and supplies;
- (i) Home health services;
- (j) Outpatient prescription drugs; and
- (k) Inpatient and outpatient hospital services.

The Centers for Medicare and Medicaid Services maintain and annually update a List of Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS) Codes (Code List), which identifies all items and services included within certain DHS categories. The updated Code List is published in the Federal Register as an addendum to the annual Physician Fee Schedule final rule. The DHS categories defined by the Code List are: clinical laboratory services; physical therapy services, occupational therapy services, outpatient speech-language pathology services, radiology and certain other imaging services, and radiation therapy services and supplies. The 2015 Code List is available for download at: https://www.cms.gov/Medicare/Fraud-and-Abuse/PhysicianSelfReferral/List of Codes.html

The following DHS categories are <u>defined at 42 C.F.R. §411.351 without</u> <u>reference to the Code List</u>: durable medical equipment and supplies; parenteral and enteral nutrients, equipment and supplies; prosthetics, orthotics, and prosthetic devices and

110570.1





Find the full text of this and thousands of other resources from leading experts in dozens of legal practice areas in the <u>UT Law CLE eLibrary (utcle.org/elibrary)</u>

Title search: Health Law Fundamentals: Fraud and Abuse Laws and HIPAA (Privacy Rule)

Also available as part of the eCourse Health Law Fundamentals

First appeared as part of the conference materials for the 31st Annual Health Law Conference session "Health Law Fundamentals"