

This newsletter is prepared monthly by the Midland Health Compliance Department and is intended to provide relevant compliance issues and hot topics.

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Investigation

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FRAUD & ABUSE LAWS

The five most important Federal Fraud and Abuse Laws that apply to physicians are:

- False Claims Act (FCA): The civil FCA protects the Government from being overcharged or sold shoddy goods or services. It is illegal to submit claims for payment to Medicare or Medicaid that you know or should know are false or fraudulent.
- Anti-Kickback Statute (AKS): The AKS is a criminal law that
 prohibits the knowing and willful payment of "remuneration" to induce
 or reward patient referrals or the generation of business involving
 any item or service payable by the Federal health care programs
 (e.g., drugs, supplies or health care services for Medicare or
 Medicaid patients).
- 3. Physician Self-Referral Law (Stark law): The Physician Self-Referral Law, commonly referred to as the Stark law, prohibits physicians from referring patients to receive "designated health services" payable by Medicare or Medicaid from entities with which the physician or an immediate family member has a financial relationship, unless an exception applies.
- 4. Exclusion Statute: OIG is legally required to exclude from participation in all Federal health care programs individuals and entities convicted of the following types of criminal offenses: (1) Medicare or Medicaid fraud; (2) patient abuse or neglect; (3) felony convictions for other health-care-related fraud, theft, or other financial misconduct; and (4) felony convictions for unlawful manufacture, distribution, prescription, or dispensing of controlled substances.
- 5. Civil Monetary Penalties Law (CMPL): OIG may seek civil monetary penalties and sometimes exclusion for a wide variety of conduct and is authorized to seek different amounts of penalties and assessments based on the type of violation at issue. Penalties range from \$10,000 to \$50,000 per violation.

Resource:

https://oig.hhs.gov/compliance/physician-education/fraud-abuse-laws/



MIDLAND **HEALTH**

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TikTok Live Incident Results in Termination and Board of Nursing Investigation

A registered practical nurse who livestreamed a med pass on TikTok has been terminated from her position and now faces a Board of Nursing investigation over a potential HIPAA violation. Sharing protected health information on social media without patient authorization is a violation of the HIPAA Privacy Rule. The HIPAA Privacy Rule generally limits uses and disclosures of protected health information (PHI) to those required for treatment, payment, and healthcare operations. Other uses and disclosures require authorization from the patient.

If a HIPAA violation is discovered, it can have serious implications for a healthcare professional. At best, it will likely result in a verbal or written warning, although for disclosures of PHI on social media, termination of employment is a likely outcome. The negative consequences do not end there. Licensing boards may launch investigations, and if a HIPAA violation is confirmed, a healthcare professional could receive a reprimand or sanction, financial penalty, or a temporary or permanent loss of licensure. Even if there is no HIPAA violation, sanctions are possible on the grounds of unprofessional or unethical conduct. Criminal charges are also a possibility for a HIPAA violation or violation of state law, which may result in a fine and even jail time. You can read more about social media in healthcare and HIPAA and social media in previously published HIPAA Journal articles.

Some social media platforms, such as Facebook and TikTok, support livestreaming, where users can record videos and have them posted to their social media accounts in real-time. Depending on the account settings, the video recordings may just be shared with the user's contacts, but livestreaming content is often available to all. Livestreaming at work carries a huge risk of an accidental HIPAA violation, such as accidentally recording video footage of documents containing PHI, computer screens showing medical records, or patients themselves.

One recent livestreaming incident serves as a stark warning to healthcare professionals on the dangers of social media use at work. Last month, a registered practical nurse livestreamed a video of herself at work during a med pass. During the TikTok Live, the nurse, Yazz Scott, was preparing medications. She did not film any patients, and claimed not to be showing any patient information; many viewers posted comments in real-time warning the nurse that she was violating HIPAA. At least one commenter warned her that she risked losing her medical license by livestreaming.

Viewers' concerns were dismissed by the nurse. "I'm not showing any patient information, so just relax," she explained, going on to say, "If y'all see some patient information, then just holler, but I'm not showing nothing, I'm just at work, so just chill. Sit back, you know, relax... Y'all suck the fun out of everything. Damn!" She also claimed that she was well aware of HIPAA, having been in the healthcare field for a very long time. While the nurse did not believe she was sharing any patient information, she was opening medications, and some patient information was visible, albeit barely discernible, and while filming, a patient's name was spoken on more than one occasion. The nurse also filmed herself making a medication error, potentially due to a lack of concentration from filming and reading comments. After using her teeth to open the packet, she administered a lidocaine patch to a patient at the wrong time.

Read entire article:

https://www.hipaajournal.com/tiktok-live-termination-board-of-nursing-investigation/



MIDLAND HEALTH Compliance HOTLINE 855•662•SAFE (7233)
ID#: 6874433130

ID# is required to submit a report.
You can make your report or concern <u>ANONYMOUSLY</u> .





MIDLAND **HEALTH**



HIPAA Section 6.23: E-mail and Text Message Communications

POLICY

MIDLAND MEMORIAL HOSPITAL and its workforce members may not communicate with patients and business associates via e-mail or text message outside of the MIDLAND MEMORIAL HOSPITAL e-mail system, if Protected Health Information (PHI) is included in that communication. Workforce members may communicate with other health care providers for treatment, payment, or health care operations purposes (as defined by HIPAA), if it is done in a secured manner as required by HIPAA and in accordance with MIDLAND MEMORIAL HOSPITAL policy (or, MIDLAND MEMORIAL HOSPITAL has written authorization from the patient for the release of the PHI). Permitted e-mail or text message communication shall be in accordance with the procedures set forth below and other safeguards implemented in this policy. MIDLAND MEMORIAL HOSPITAL workforce members with an e-mail account, access to approved text messaging application software, or access to a wireless device enabled with approved text messaging capabilities shall be familiar with this policy and shall follow these procedures when disclosing PHI via permitted e-mail or text message. Transmitting PHI via e-mail or text message other than as permitted herein is expressly prohibited, unless pre-approved by the Privacy Officer. This policy will establish guidelines for appropriate destruction of protected health information.

PROCEDURE

Safeguards. MIDLAND MEMORIAL HOSPITAL workforce members and medical staff may communicate with patients via hospital e-mail or text message or, in certain situations, with third parties via e-mail or text message with patient authorization, as described in Section 2 below, if appropriate safeguards are in place to protect a patient's PHI. The Information Technology (IT) Department shall be responsible for implementing technical safeguards to protect the security of e-mail and text message communication and training Users with respect to the use of such technical safeguards. MIDLAND MEMORIAL HOSPITAL shall also implement manual or administrative procedures, such as verifying e-mail addresses, requiring user account authentication prior to accessing text messaging applications and training workforce members on how to help safeguard PHI transmitted via e-mail or text message. MIDLAND MEMORIAL HOSPITAL workforce members shall be responsible for understanding and using required safeguards when they transmit PHI via hospital e-mail or text message.

Read entire Policy #2915:

"HIPAA Section 6.23: E-mail and Text Message Communications"

Midland Health PolicyTech Instructions

Click this link located on the Midland Health intranet "Policies" https://midland.policytech.com/dotNet/noAuth/login.aspx?ReturnUrl=%2f

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MIDLAND HEALTH

CERNER

N OTHER COMPLIANCE NEWS



NEWS

RESOURCES

DAYFORCE (

ICE365

DEPARTMENT PHONE LIST

LINK '

OCR Settles HIPAA Investigation with Comstar for \$75,000

https://www.hipaajournal.com/c omstar-hipaa-compliancepenalty/

LINK 2

Malicious Insider Incident Results in \$800,000 HIPAA Penalty for Florida Health System

https://www.hipaajournal.com/baycare-health-system-hipaa-penalty/

LINK 3

What are the Penalties for HIPAA Violations?

https://www.hipaajournal.com/what-are-the-penalties-for-hipaa-violations-7096/

LINK 4

What Kind of Lawyer Deals with HIPAA Violations?

https://www.hipaajournal.com/what-kind-of-lawyer-deals-with-hipaa-violations/

FALSE CLAIMS ACT (FCA)

United States Files False Claims Act Complaint Against Vohra Wound Physicians Management and Its Owner Alleging False Claims for Wound Care Services

MIAMI – The United States filed a complaint under the False Claims Act against Vohra Wound Physicians Management LLC (Vohra) and its founder and majority owner, Dr. Ameet Vohra, for allegedly causing the submission of false claims to Medicare for overbilled and medically unnecessary wound care services. Vohra is one of the nation's largest specialty wound care providers and contracts with hundreds of nursing homes and skilled nursing facilities throughout the country to provide wound care services to those facilities' patients at their bedside. "This office is committed to protecting our nation's seniors and the important federal programs that support them," said U.S. Attorney Hayden O'Byrne for the Southern District of Florida. "When providers seek to misappropriate public funds for private gain, we will work with our partners to pursue those responsible." "Providers that overbill the government for services, or bill for services that are unreasonable or medically unnecessary, undermine the integrity of the Medicare program and waste taxpayer dollars," said Deputy Assistant Attorney General Michael D. Granston of the Justice Department's Civil Division. "The Justice Department will hold accountable providers who prioritize their own enrichment over the medical needs of their patients." "Healthcare fraud is harmful to all consumers, artificially and unnecessarily increasing the costs of care for everyone," said Acting U.S. Attorney Tara M. Lyons for the Southern District of Georgia. "Identifying and ending fraudulent billing activity is essential to keeping healthcare costs manageable for patients and for taxpayer-funded healthcare programs."

According to the United States' complaint, Vohra and Dr. Vohra knowingly engaged in a nationwide scheme to falsely bill Medicare for surgical debridement procedures to maximize revenue. Debridement is a procedure to remove impediments to healing from a wound, such as dead or unhealthy tissue, and can be accomplished in several ways including nonsurgical and surgical methods.

Read entire article:

https://www.justice.gov/usao-sdfl/pr/united-states-files-false-claims-act-complaint-against-vohrawound-physicians

Louisiana Man Pleads Guilty to \$3.8 Million Durable Medical Equipment Fraud Scheme

A Louisiana man pleaded guilty today in connection with a five-year scheme to submit millions of dollars in fraudulent claims to Medicare for expensive and medically unnecessary medical equipment.

According to court documents, Michael L. Riggins, 62, of West Monroe, Louisiana, pleaded guilty to one count of conspiracy to commit health care fraud for his role in a durable medical equipment (DME) scheme. Riggins was the owner of Bluewater Healthcare (Bluewater), a DME supply company in West Monroe. From 2018 to 2023, Riggins paid for doctors' orders for medically unnecessary DME and tricked doctors into signing DME orders and certificates of medical necessity in order to bill for it. Despite receiving hundreds of complaints regarding the fraudulent orders, Riggins submitted over \$3.8 million in fraudulent claims to Medicare for supplying the DME and was reimbursed over \$1.8 million. Riggins is scheduled to be sentenced on Oct. 2, 2025 and faces a maximum penalty of 10 years in prison.

Read entire article:

https://www.justice.gov/opa/pr/louisiana-man-pleads-guilty-38-million-durable-medical-equipment-fraud-scheme



Do you have a hot topic or interesting COMPLIANCE NEWS to report?

If so, please email an article or news link to:

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