

STATE MEDICAL BOARD OF OHIO POLICY STATEMENT

LICENSEE RESPONSIBILITY FOR STATEMENTS ON REIMBURSEMENT OR BILLING DOCUMENTS

September 10, 1997

Revised December, 2014

The Board periodically receives complaints suggesting that some healthcare professionals licensed by the Board (Licensees) have falsely reported their activity for the purpose of obtaining payment from Medicaid, Medicare, private healthcare insurance companies and other third party payors. These complaints generally involve Licensees placing their signature, or allowing their signature to be placed, on a billing document when the Licensees did not personally provide the services for which payment is sought. These billing documents describe what the Licensees are certifying through the placement of their signature. The Board is concerned that some of its Licensees may not be approaching the signing of these forms with an appropriate amount of scrutiny. In this statement, the Board does not announce a new policy but instead gives licensees specific instruction regarding their obligations under existing law.

The Board considers the certifications made by a Licensee on reimbursement or billing documents to be statements made in the course of practicing medicine. The scenario described above may violate Medical Board statutes, such as allowing one's name to be used when the Licensee did not actually direct the treatment; making a false, fraudulent, deceptive or misleading statement; falling below the minimal standard of care; or violating the code of ethics of a national professional associations such as the American Medical Association, the American Osteopathic Association, the American Podiatric Medical Association, and others.

When analyzing complaints of this type, the Board compares the actual activities of the Licensee to the certification made on the billing document. If the actual activities do not match the certification, there are Medical Board statutory violations. For example, if the certification made by the Licensee is that the Licensee personally rendered the service or the service has been provided under the Licensee's direct supervision, when in fact the Licensee has had no or only slight patient contact, Medical Board statutory violations have occurred. Similarly, if a Licensee certifies that the service was medically necessary but the Licensee had no personal knowledge that would allow for that certification, Medical Board statutory violations have occurred.

When a Licensee is presented with a pre-printed billing form that asks for a certification that does not match the Licensee's actual activities, the Licensee should either refuse to sign the certification or change the certification so that it accurately describes the Licensee's activities. Billing convenience does not justify the making of false statements in the course of practice or other violations of the Medical Board's statutes.

The Board also considers activities that amount to selling one's signature to be a violation of the Medical Board's statutes. For example, if a Licensee enters into a fee splitting arrangement with a non-Licensee where the Licensee agrees to sign billing documents for some portion of the reimbursement or fee collected, and the Licensee has had no meaningful patient contact, Medical Board statutes have been violated.

Finally, Licensees must not enter into arrangements where they receive a fee for services without providing those services to the patient.

This policy or position statement is only a guideline and should not be interpreted as being all inclusive or exclusive. The Board will review possible violations of the Medical Practices Act and/or rules promulgated hereunder on a case by case basis.

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