

U.S. Senate Committee on Homeland Security and Governmental Affairs Subcommittee on Federal Spending Oversight

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Senator Rand Paul, M.D. (Kentucky), Chairman

WASTE REPORT for November 9, 2015

Dreaming of Waste: Medicare overpays for Sleep Studies

You have probably heard of sleep apnea, the condition where a person momentarily stops breathing during sleep. In fact, Medicare alone spends almost \$300 million a year on sleep studies to determining if patients have this condition. **Unfortunately, it seems Medicare has a problem with overpaying for these important studies, which costs taxpayers as much as \$175 million a year**.

In a recent report, the U.S. Department of Health and Human Services Office of the Inspector General (OIG) noted that one provider of sleep studies recently agreed to repay \$15.3 million resulting from false claims.¹

The OIG report delved into another sleep study provider from Orlando that was estimated to have been overpaid more than \$1 million, or almost 60 percent of all payments they received. Specifically, the OIG found, that in a sample of 100 patients, 74 percent of items billed were not allowable under Medicare guidelines. In addition, nearly one-third of those payments were made without supporting documentation, such as a doctor's referral. And, in one instance, Medicare paid for a procedure that was not even done.²

Shockingly, roughly 60 percent of payments made to this particular provider were over 3-years old. Which means Medicare paid the bill for services without the required documentation and never followed up again.³ This never would have been noticed if it were not for the Inspector General. If this is the trend, then the government could be improperly paying as much as \$175 million a year just on sleep studies.

It is no wonder that the Government Accountability Office (GAO) estimated earlier this year that Medicare makes over \$45 billion, or roughly 12.7 percent of its outlays, in improper payments annually. Further GAO lists a root cause of Medicare improper payments as "[i]nsufficient documentation for home health claims..."

For those keeping score, earlier this year, the Waste Report reported how Coast Guard members were able to use a <u>medical travel program to take vacations</u>. What made this waste possible? **Travel approvals made without required documentation**, including missing doctor referrals. See a trend?

¹ Pilcher, Lori S., *TOTAL SLEEP MANAGEMENT, INC., BILLED MEDICARE FOR UNALLOWABLE SLEEP STUDY SERVICES,* Office of the Inspector General, Department of Health and Human Services; Washington, D.C.; October 2015

² Ibid, pp 6

³ Ibid, pp 5

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⁴ Bertoni, Daniel; Davis, Beryl H.; *IMPROPER PAYMENTS: Government-Wide Estimates and Use of Death Data to Help Prevent Payments to Deceased Individuals;* Testimony Before the Before the Committee on Homeland Security and Governmental Affairs, U.S. Senate; Government Accountability Office; Washington, D.C.; March 2015