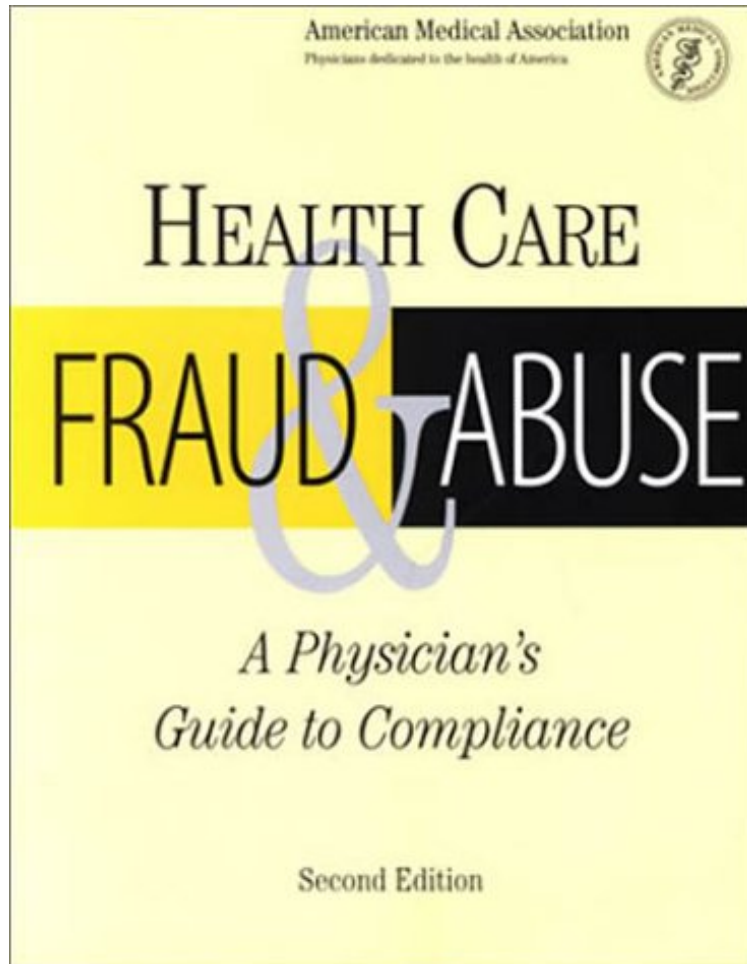


Health Care Fraud and Abuse: A Physician's Guide to Compliance (Billing and Compliance)

Hoyt W. Torras, American Medical Association, Healthcare Consultants
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A guide for physicians covering the legal aspects of health insurance and offers ways to design an effective billing, coding, and accounts receivable process.

From the Back Cover Implement a compliance program that ensures accuracy, minimizes risks, and increases revenues. Since the first edition of Health Care Fraud and Abuse was published in early 2001, government agencies have released new information that medical practices need to ensure compliance. This second edition provides updated, concise, and reliable guidance to help physicians understand the implications to the ever-changing fraud and abuse laws in relation to their day-to-day practice, identify areas where violations could occur, and determine what steps they should take to minimize and ensure compliance. Health Care Fraud and Abuse, Second Edition contains many new insights and tools, including: -Updated material on phase one of the final rule related to physician self-referral (Stark legislation) -Expanded examples and scenarios on what constitutes fraud and abuse -New information from the OIG semi-annual report and work plan -More Web links and references to help you stay current with the developing regulations Also included are effective compliance actions that even the smallest practice can afford to implement, as well as those concerns that the largest groups must address. Complying with complex laws and guidelines does not have to be another administrative impediment to the success of your medical practice. Health Care Fraud and Abuse: A Physicians Guide to Compliance, Second Edition offers the direction you need to design an effective program that can improve the results of your coding, billing, and accounts receivable management processes - and keep your practice focused on providing the best possible patient care.