



Robert W Liles

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Biography

Robert W Liles background is somewhat unique. In addition to a law degree, he holds both an MBA and an MS in health care administration. He is also a certified professional coder. Robert has worked on the provider side, as a federal prosecutor and now represents physician practices and other health care providers around the country in connection with medicare / medicaid / private payor audits, state board of licensure actions, and false claims act cases. He also currently serves as an iro on corporate integrity agreements for the office of inspector general. While working as a federal prosecutor, Robert was asked to serve as the country's first "National Health Care Fraud Coordinator" for DOJ's Executive Office for US. Attorneys. In this capacity, he advised federal prosecutors around the country regarding health care fraud statutes, schemes, investigative tools, privacy concerns, and compliance issues. Since entering private practice, Robert has continued to build on his health care background and experience. He currently serves as compliance counsel for the American Association of clinical endocrinology.

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Note:

THE BUSINESS OF MEDICINE: THE TOP 10 REGULATORY RISKS FACED BY ENDOCRINOLOGISTS AND THEIR PRACTICES

The business practices of Endocrinologists are under the regulatory microscope. Medicare, Medicaid and private payors are actively conducting audits of endocrinology claims for reimbursement. In this session, we will discuss a number of existing risk areas and what Endocrinologists and their practices should expect in 2019. Specific topics to be covered include:

1. The US Department of Justice's (DOJ's) current focus on "individual culpability," that has resulted in a renewed emphasis on individual, rather than merely corporate prosecutions in health care fraud cases. How should you respond if contacted by law enforcement?
2. The risks associated with the failure to collect copayments and deductibles and result in wide range of administrative, civil and / or criminal sanctions. Similarly, extending a "Professional Courtesy" discount or billing a patient "Insurance Only" may be a violation of the Federal Anti-Kickback Statute. How are supposed to handle copayments, deductibles and discounts?
3. How to respond if your practice is audited by a Medicare program integrity contractor such as UPIC or ZPIC.
4. The impact of hiring an individual who has been "excluded from participation" in medicare or medicaid.
5. The penalties associated with an improper breach of protected health information can be enormous. Is your practice compliant with applicable HIPAA / HITECH regulatory requirements?
6. Private payor "Special Investigative Units" are actively auditing endocrinology practices. How should you respond if your claims are audited by one or more private payor insurance companies?
7. Federal and state mandates require your practice to have developed and implemented an effective compliance program. Is your practice currently in compliance with federal and state law?
8. State licensure boards are focusing on a number of specific concerns. We will briefly cover several of these.
9. Steps you can take to reduce the likelihood of healthcare workplace violence.

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10. Recent EEOC decisions affecting your practice.”

Objectives:

1. Participants will learn about the current federal and state enforcement efforts and initiatives to identify and prosecute health care fraud.
2. Participants will learn about the efforts of “Special Investigations Units” working for private payors to identify improperly paid claims and refer instances of fraud to the government for possible prosecution.
3. Participants will learn about a number of the common medical necessity, documentation, coding and billing errors identified when auditing medical records and claims documentation.
4. Participants will learn how to reduce their level of regulatory risk and liability.



Note: