

Hospice of Arizona, along with a related entity, American Hospice Management LLC and their parent corporation, American Hospice Management Holdings LLC, have agreed to pay \$12 million to resolve allegations that they violated the False Claims Act by billing Medicare for ineligible hospice services. The Medicare hospice benefit is available for patients who have a life expectancy of six months or less if their disease runs its normal course. The government alleged that Hospice of Arizona and its related entities billed Medicare for patients who did not need end of life care or for whom the hospice billed at a higher reimbursement rate than it was entitled.

The false billings occurred between September 1, 2002 and December 31, 2010. In addition to paying \$12 million to resolve the False Claims Act violations, Hospice of Arizona and American Hospice Management Holdings have agreed to enter into a corporate integrity agreement with the Inspector General of the Department of Health and Human Services that provides for procedures and reviews to be put in place to avoid and promptly detect similar conduct in the future.

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