

Health Care Reimbursement

Krieg Devault's reimbursement team has unmatched experience in navigating the complex laws that govern Medicare and the Medicaid programs in Indiana and other states. We have an extensive and diverse background in various reimbursement matters including developing and implementing new reimbursement models, working with providers to ensure ongoing and proper payments, and assisting providers with resolving reimbursement disputes.

Our lawyers assist our clients in analyzing available funding and revenue opportunities, whether its assisting State agencies in leveraging matching sources or ensuring hospitals receive proper funding for low-income patients served. We also help our clients mitigate risks by responding to audit findings regarding identified inappropriate Medicare or Medicaid payments, addressing third-party payment and billing issues, and ensuring compliance with proper coding of services.

We have represented nearly all aspects of the healthcare industry in reimbursement issues, including government agencies, hospitals and health care systems, nursing facilities, trade associations, physicians, dentists, pharmacy companies, and other medical and health-related service providers. Such representation spans a broad array of reimbursement and Medicaid matters, including:

- Alternative reimbursement models, such as value based purchasing programs
- Medicare/Medicaid and third-party payment, billing, and coding issues
- Payer audits and appeals
- Cost report reviews, audits, and appeals
- Billing and payment compliance services
- Medicaid Disproportionate Share Hospital (DSH) counseling and legislation
- Hospital assessment fees and other provider tax programs
- Upper Payment Limit (UPL) programs, including maintaining such supplemental payments in the Medicaid managed care environment
- Graduate Medical Education (GME) reimbursement
- Provider-based reimbursement
- FQHC encounter rates and wrap around payments
- Prior authorization and medical necessity