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Office of the State Comptroller Audit Uncovers Billing and Documentation Violations Committed by Cranford-Based Hospice Provider

TRENTON - Care Alternatives of New Jersey, LLC ("Care Alternatives"), now known as Ascend Hospice, will reimburse \$153,095 to the Medicaid program and revise its business practices, as a result of an audit conducted by the Office of the State Comptroller, Medicaid Fraud Division ("OSC"). The OSC's audit uncovered multiple billing and documentation violations involving Care Alternatives that the company has agreed to address.

OSC Auditors found that Cranford-based hospice services provider Care Alternatives committed numerous violations of Medicaid regulations, including instances of double billing, failing to maintain physician certifications, billing for hospice services after the termination of such services and submitting claims for a beneficiary who had withdrawn from hospice services. Auditors found a total of 53 claim payments with violations totaling \$153,095.

"Our audit identified safeguards that Care Alternatives should have had in place and recommends specific actions that Care Alternatives should take to resolve the issues we uncovered," State Comptroller Philip James Degnan said. "We are pleased that Care Alternatives has agreed to repay the program in full and take important corrective action."

OSC's Medicaid Fraud Division ("MFD") serves as the State's independent watchdog for New Jersey's Medicaid program and works to ensure that the State's Medicaid dollars are being spent

appropriately. As part of its oversight role, MFD audits and investigates health care providers, managed care organizations and Medicaid beneficiaries to identify and recover improperly expended Medicaid funds.

Suspected Medicaid waste, fraud or abuse can be reported to the MFD by calling its toll-free hotline at 1-888-937-2835 or by submitting a complaint form located at <http://www.state.nj.us/comptroller/divisions/medicaid/complaint.html>.

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Click [here](#) to view the complete audit.

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