



Betty A. Hovey, BSHAM, CPC, COC, CPMA, CPCD, CPB, CPC-I, CCS-P, CDIP, CPA-EDU, CMRS, CPA-SA, CEMA

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PROFESSIONAL SUMMARY

Certified Professional Medical Auditor (CPMA) and health care compliance expert with over 35 years of experience in medical coding, billing, auditing, documentation integrity, and revenue cycle management. Since May 2025, actively serving as a medical coding and billing expert witness, having analyzed medical charges for usual, customary, and reasonable (UCR) value in over 200 cases. Provide forensic reviews of records and claims data to evaluate reasonableness of charges using industry-standard benchmarks (e.g., FAIR Health 80th percentile, PUF Pro, Find-A-Code), compliance with CPT/ICD-10-CM/HCPCS guidelines, medical necessity, and identification of abusive, upcoding, unbundling, or fraudulent practices. Offer objective opinions in support of or defense against allegations of improper coding, overbilling, fraud/abuse, and payor recoupment demands. Deposition testimony given; available for affidavit, report, deposition, and trial testimony in matters involving reimbursement disputes, overcharging allegations, False Claims Act/qui tam actions, and payor audits. Recognized national educator, author, and speaker on coding compliance and auditing best practices.

CERTIFICATIONS

- Certified Professional Medical Auditor (CPMA)
- Certified Professional Biller (CPB)
- Certified Coding Specialist - Physician Based (CCS-P)
- Certified Documentation Integrity Practitioner (CDIP)
- Certified Professional Coder (CPC)
- Certified Outpatient Coder (COC)
- Certified Professional Dermatology Coder (CPCD)
- Certified Professional Coder - Instructor Status (CPC-I)
- Certified Physician Educator (CPA-EDU)
- Certified Medical Reimbursement Specialist (CMRS)
- Certified Professional Auditor – Surgical Auditor (CPA-SA)
- Certified Evaluation and Management Auditor (CEMA)

EXPERT WITNESS AND LITIGATION SUPPORT EXPERIENCE

Since May 2025:

- Retained as medical coding and billing expert witness in over 200 cases, primarily focused on evaluation of usual, customary, and reasonable (UCR) charges, medical necessity, coding accuracy, billing compliance, and identification or defense of alleged abusive or fraudulent practices (e.g., upcoding, unbundling, modifier misuse, overbilling).
- Perform independent analyses of medical records, claims, and billing data to determine reasonableness of charges using validated databases (e.g., FAIR Health at the 80th percentile benchmark, Find-A-Code),



and to assess adherence to CMS, OIG, and payor guidelines.

- Prepare detailed expert reports, affidavits, and rebuttal reports opining on coding errors, improper billing patterns, potential fraud indicators, defenses against overbilling allegations, and successful defenses of providers against payor claims of improper reimbursement or recoupment.
- Participate in attorney-client strategy sessions and case consultations.
- Deposed nine times; no trial testimony to date.
- Experience supporting both plaintiff and defense matters, including provider defenses against insurance payor audits, overpayment demands, and allegations of fraud/abuse.
- Detailed case and testimony history available upon request (includes case names, jurisdictions, retention side, and disposition where permitted).

PROFESSIONAL EXPERIENCE

Compliant Health Care Solutions *Port Charlotte, FL*

Owner

February 2020 - Current

- I work with health care organizations to help them comply with laws and regulations related to health care coding, billing, and documentation practices and make recommendations for improvement. Provide auditing and education services to clients on CPT, ICD 10 CM, and documentation. Speak at regional and national conferences on health care topics. As a consulting expert, conduct research, analyze data, evaluate coding, billing, and documentation, participate in attorney/client calls and strategy sessions. Defend health care providers against insurance payor allegations of overbilling through forensic audits, identification of compliant practices, and preparation of rebuttal documentation and expert opinions. Since May 2025, expanded practice to include expert witness services in medical billing litigation; analyze charges for UCR reasonableness utilizing benchmark data, while evaluating for signs of abusive or fraudulent coding practices.

KarenZupko & Associates *Chicago, IL*

Senior Consultant

February 2016-February 2020

- I worked with health care organizations to help them comply with laws and regulations related to health care coding, billing, and documentation practices and made recommendations for improvement. Provided auditing and education services to clients on CPT, ICD 10 CM, and documentation. As a consulting expert, conducted research, analyzed data, evaluated coding/billing/documentation practices for compliance risks. Spoke at regional and national conferences on health care topics.

AAPC *Salt Lake City, UT*

Director, ICD-10 Development and Training

January 2011-June 2015

- Authored/co-authored/proofed national coding curriculum and exams on multiple specialties. Created and provided education and training on coding and practice management on a national level to physicians, advanced practice providers, and health care professionals from levels of beginner to advanced, conveying complex issues in a straightforward manner. Presented at regional and national conferences on coding, billing, and documentation subjects. Performed audits of physician and provider records, identified compliance deficiencies (including risks of upcoding or unbundling), provided detailed feedback on proper practices, and recommended improvements to defend against potential payor scrutiny.



EDUCATION

Colorado State University

Bachelor of Science | Health care Administration and Management

- Sigma Beta Delta Honor Society
- National Honor Society Member

PROFESSIONAL ACCOMPLISHMENTS

- Council Member/Workgroup Chair, AHIMA National Council for Excellence in Education
- AHIMA Subject Matter Expert, Professional Fee
- Editorial Board Member, Billing-Coding Advantage
- AAPC National Advisory Board Member
- AAPC National Advisory Board Officer
- AAPC Local Chapter Founder and President
- National Speaker, including AHIMA National Conference, AAPC National and Regional Conferences, MGMA, Kansas Dermatologic Society annual conference, Association of Dermatology Administrators and Managers (ADAM) national conference, ACDIS Outpatient conference, Texas Medical Association annual conference, and Wisconsin Medical Society annual conference.
- National Workshop Presenter, AAPC on multiple coding topics
- LinkedIn Live Broadcasts: Health Care Happenings and Compliance Capers

PUBLICATIONS

- Author, *Harnessing Artificial Intelligence (AI) for Health Care Practice Success: A Practical Guide*
- Author, *Paving the Way: Women Overcoming Adversity in the Health Care Field*
- Author, *What's the Gator in Your Lake? Navigating Life's Unexpected Chomps*
- Co-Author, *Comprehensive ICD-10-CM Instructional Manual*
- Chapter Author, *Telemedicine in Orthopaedic and Sports Medicine: Development and Implementation in Practice*
- Numerous articles published in national magazines including *Health care Business Monthly*, *Billing Coding Advantage*, *Physician Practice*, and *Journal of AHIMA*