

# Health Care Fraud: A Serious Problem with Devastating Consequences

Health care fraud is a serious problem that costs the U.S. billions of dollars each year. In 2019, the Centers for Medicare & Medicaid Services (CMS) estimated that Medicare improper payments totaled \$30 billion. Medicaid improper payments were estimated to be \$23 billion.

Health care fraud is not victimless. It can lead to higher health care costs, reduced access to care, and even death.



## Phantom Billing, Fake Prescriptions, and the High Cost of Medicine: Health Care Fraud and What to Do about It (The Culture and Politics of Health Care Work)

by Terry L. Leap

★★★★★ 5 out of 5

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Screen Reader : Supported  
Enhanced typesetting : Enabled  
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## Types of Health Care Fraud

There are many different types of health care fraud, but some of the most common include:

- **Billing for services not rendered.** This is when a health care provider bills for services that were never actually provided.
- **Upcoding.** This is when a health care provider bills for a more expensive service than was actually provided.
- **Unbundling.** This is when a health care provider bills for separate services that should be bundled together.
- **Duplicate billing.** This is when a health care provider bills for the same service multiple times.
- **Falsifying medical records.** This is when a health care provider alters medical records to make it appear that a patient has a more serious condition than they actually do.
- **Kickbacks.** This is when a health care provider receives payment or other benefits in exchange for referring patients to a particular provider or facility.

## **Consequences of Health Care Fraud**

Health care fraud has a number of serious consequences, including:

- **Higher health care costs.** Health care fraud can lead to higher health care costs for everyone, as insurers pass on the cost of fraud to consumers in the form of higher premiums.
- **Reduced access to care.** Health care fraud can reduce access to care for those who need it most, as insurers may be less likely to cover services that they believe are fraudulent.

- **Death.** In some cases, health care fraud can even lead to death. For example, if a patient is prescribed the wrong medication or treatment due to fraudulent billing, it could have serious consequences.

## **What Can Be Done to Prevent Health Care Fraud?**

There are a number of things that can be done to prevent health care fraud, including:

- **Educating consumers.** Consumers need to be aware of the different types of health care fraud and how to avoid it.
- **Strengthening enforcement.** Law enforcement agencies need to be given the resources they need to investigate and prosecute health care fraud.
- **Improving oversight.** Health care providers need to be subject to more oversight to ensure that they are not committing fraud.
- **Whistleblowing.** Whistleblowers play a vital role in exposing health care fraud. They need to be protected from retaliation.

Health care fraud is a serious problem that has devastating consequences. It is important to be aware of the different types of fraud and to take steps to prevent it.

## **Resources**

- CMS Improper Payments
- The Impact of Health Care Fraud on Medicare and Medicaid
- Health Care Fraud: Key Challenges and Opportunities to Improve Prevention and Detection



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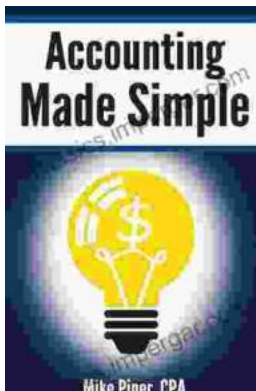
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