

Health Care Fraud Inservice

FRAUD is defined as: Deliberate deceit or misrepresentation of facts that results in the receipt of an illegal advantage or reward (such as pay for something that was not done).

What is Health Care Fraud?

Health care fraud occurs when an individual, group of people, or a company knowingly, misrepresents or mis-states something about the type, the scope, or the nature of the medical treatment or service provided, in a manner that could result in unauthorized payments being made.

Examples of Health Care Fraud:

- Payment for **ANY medical services**, treatment, supplies, ore equipment that was **not received (such as a HHA documenting they took care of a client when they did not)**.
- Dates of service or provision of items that differ from the dates on which the item or service was received.
- Payments for ambulance services that were not provided.
- Duplicate payments for the same service or item or medical equipment while the person was in the hospital.
- ALSO, remember, Medicaid PA services **MUST BE DONE IN THE RESIDENT WHERE THE CLIENT LIVES. (Heal at Home)**

Examples of Home Health Care Medical Fraud

1. Documenting care that was not given
 - a. Clocking into a visit when you are NOT at the place where the patient lives.
 - b. Documenting care as given that was NOT given.
 - c. Clocking in, to document that care was provided, when the patient was actually admitted under another health care provider or service. For example, the patient is in the hospital.
 - d. Clocking in, to document that care was provided, when the patient was not home. For example, patient out of town on vacation or visiting at another home.

ALSO, clocking in, to document care as given, when the patient was NOT home, and trying to get paid for doing care, when you did not do the care, is considered **PAYROLL FRAUD** as well as **HEALTH CARE FRAUD** and you will be terminated immediately. Additionally, employees that commit health care fraud, place Heal at Home and Comfort Keepers at risk for severe penalties and loss of ability to care for Medicare and Medicaid patients. Therefore, **ANY** employee that commits Health Care Fraud, will be reported to the Indiana Board of Nursing, and the Indiana Office of the Attorney General.

Remember, if you are unsure about any clocking in and/or clocking out, or have questions about charting, ALWAYS call the office. Do not risk getting terminated from employment, loss of your certification, or potential Felony charges that may result in imprisonment.