

### Healthcare Fraud in 2021

Holly Atkins, M.Ent., CFE, CGAP, CHC, AHFI, CHIAP

# WEALTH ADVISORY | OUTSOURCING AUDIT, TAX, AND CONSULTING

Investment advisory services are offered through CliftonLarsonAller
Wealth Advisors, LLC, an SEC-registered investment adviso

# Agenda

#### Top Fraud Areas Q4 of 2020

- Telehealth
- DNA Kickback Scheme (LA)
- Distribution Services Fraud
- Delivery of Services to Deceased Patients
- Out of Country Doctor Billing

2021

2020

#### Top Fraud Areas Q1 of 2021

- Durable Medical Equipment
- Pharmacogenetic Kickbacks
- Home Care Services Fraud
- Fraudulent Vendor Services
- False Healthcare Benefits Scheme



#### Telehealth Fraud

- Nationwide Scheme Costing \$6 Billion
- Federal and Private Health Insurance
- Ordering Unnecessary Medical Equipment
- Inflating Number of Patient Visits
- 345 People Charged 100 were Medical Professionals





# Telehealth Fraud – How to Spot It

- Ordering Unnecessary Medical Equipment
  - Orders for Healthy Patients with No Cause
  - Duplicate Equipment Requests
  - Lack of Supporting Documentation for Equipment
  - Exceeding Limits by Filing with More Than One Insurance
- Inflating Number of Patient Visits
  - Does Patient Count Seem Reasonable?
  - Days and Hours of Operation
  - Hosting Group Services But Charging Individual Sessions





#### DNA Kickback Scheme

- Occurred in Louisiana Costing \$117 Million
- Exchanged DNA Testing and Cancer Genetic Tests for Kickbacks
- Specialty Drug Testing, LLC Conspired with Others to Defraud Medicare Related to DNA Specimens and Testing
- Created Invoices & Spreadsheets to Track Amounts and Processing of Medicare Claims
- The Claims Potentially Led to Additional \$28.7 Million in False Claims
- Defendant Faces 15 Years in Prison





### DNA Kickback Scheme – How to Spot it

- Claims Filed Show No Deviation from People Involved
- Sudden Increase in Testing Claims
- Consistent Partnership Where None Existed Previously
- Physicians Involved Out of State (Never Filed Before)





#### Distribution Services Fraud

- Occurred in Florida Costing \$109 Million
- Medicare Patient Information Totaling Over 350,000 Patients
   Sold to Foreign Call Centers Offering DME
- Once Data was Received, Medicare Billed for Fraudulent Claims since DME Unnecessary & Not Prescribed
- Defendants Would Ensure Eligibility Prior to Submitting Claims





## Distribution Services Fraud – How to Spot It

- Services Claims from Out of State
- Increased Activity Surrounding One Person
- Increased Activity in One Area of Service Within One Service
   Line (Miami and Scooters for Example)
- Marked Increase in Insurance Enrollment Due to Moving
  - Verification of Address Can Take Time and Funds Already Received



