

Home Health & Medicare Fraud: An Explanation

Home health services help maintain the well-being and quality of life of people who are homebound and need skilled medical care in their homes. Medicare will and should pay for this service when an individual needs it and your doctor and home health agency follow Medicare rules.

Unfortunately, scam artists have taken advantage of the way Medicare pays for this vital service by fraudulently enrolling Medicare beneficiaries, like you, in home health in order to make a profit from your medical coverage. Not only is this wrong, but it could prevent you from getting medical care when you actually need it. In this article, we will discuss:

- How Medicare’s home health services work,
- What fraud in home health might look like,
- Why home health fraud is a problem, and
- How you can prevent, detect, and report home health fraud.



How Medicare’s Home Health Benefit Works

Anything that Medicare pays for must be **medically necessary**, which means you should always work with a trusted doctor (ideally your primary care physician, **not a doctor from the home health agency**) to order any service, equipment or test that you need. Home health care is no different.

According to [Medicare.gov](http://www.Medicare.gov), “The goal of home health care is to treat an illness or injury. Home health care helps you get better, regain your independence, and become as self-sufficient as possible.” In other words, home health is not meant to last forever. It is meant to treat a health condition.

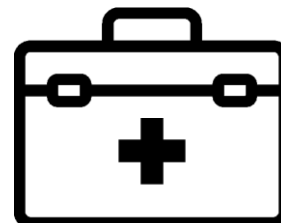
To Receive Home Health, You Must:



Be Homebound



Have a Plan of Care

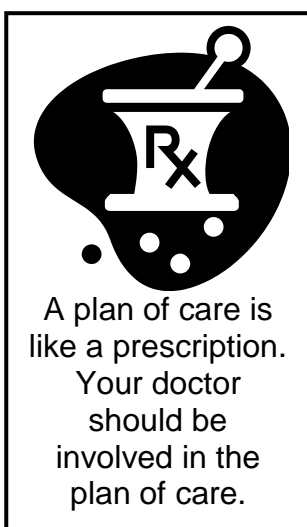


Need Skilled Care

Your doctor can decide if you need home health care and should be the only one to order it, just like your doctor would order a prescription medication.

To receive home health, your doctor must determine that you need a specific type of care to treat your condition. Your doctor must also certify that you are homebound and need to receive this care in your home. “Homebound” means you cannot leave your home without assistance. You may feel that you have difficulty leaving your home, but a doctor must certify you as homebound to meet Medicare’s specific definition.

If your doctor prescribes home health services for you, he or she can provide you with a list of Medicare-certified home health providers and help you find the one that would best fit your needs.



Once you have found a home health provider, they will:

- Schedule a visit in your home to assess your needs
- Assist your doctor in creating a “Plan of Care”
- Share the final Plan of Care with you and your doctor

A plan of care is like a prescription that specifies the type of care you need and why you need it. This is part of your medical record, and you have the right to request a copy. You should review this plan of care with your doctor, and your doctor may update it as your needs change.

The home health agency should follow this plan of care by going to your home as often as the physician prescribed. At the end of your treatment, you may still need home health services, and if so, a new plan of care should be developed. Or you may be ready to continue your care on your own. If so, the home health agency may provide you with things you can continue to do on your own (e.g. physical therapy exercises).

The home health agency will bill Medicare for the services provided under your plan of care, and when you check your Medicare Summary Notice (MSN), you will see a charge for home health services for the time period in which you received them.

The description above is how home health services should work. The services are prescribed in a plan of care that addresses a certain medical need or condition; your doctor approves and reviews your plan of care periodically; and Medicare is billed appropriately.

Fraud in Home Health

But what happens when you are being billed fraudulently for home health care?



There are two common home health fraud examples: In the first example, you receive no services at all. In the second example, you receive services that are different than what is billed or that you are not qualified to receive.

Example 1: No Services Received:

A scammer gets your Medicare number somehow. Maybe they call and say they can give you something for free if you give them your Medicare number. Or maybe they call saying they need to verify your Medicare number. Once a scammer has your Medicare number, they can falsify any documents they send to Medicare. When Medicare reviews these falsified claims, it seems like you are in need of and are actually receiving home health services. In fact, you are not receiving these services at all. If you read your MSN and see billing for services you are not receiving, you should let Medicare know.

Example 2: Agency Bills for Something Other Than What You Received



Find out what is being billed to your Medicare account by reading your Medicare Summary Notice (MSN)

A home health agency calls or visits your home (they may have gotten your name and address from a presentation or health fair). You are offered free services, like checking your blood pressure, running tests, cleaning your house, or buying groceries, and a representative may come to your home a few times to do these things. However, your doctor never ordered these tests, these are not any of the legitimate home health covered services, and you are not homebound. To get paid for these services, the home health agency submits false documents to Medicare that make it seem as if they provided skilled nursing services. If you read your MSN, you will see services that match when a representative was in your home, but the description may sound more complicated than simply taking your blood pressure. You also may see that the agency continues to bill Medicare after they stopped coming to your home.

These are two examples of home health care fraud. The two keys to avoiding fraud in either example are to **talk to your doctor** and **read your MSN**. You should have your own trusted doctor with whom you can discuss any services you need or are receiving. Some home health agencies have doctors on staff, but it is important to work with your independent primary care doctor.

If you find that your Medicare account was billed for anything that you did not receive, please report this to the Illinois SMP at AgeOptions at (800)699-9043.

Why Is Home Health Fraud So Bad?

Health care fraud not only costs taxpayers billions of dollars each year, it also can prevent you from getting Medicare-covered services when you actually need them. For example, the SMP program received a call from a Medicare beneficiary who was being



If you receive home health fraudulently, it may prevent you from accessing care when you need it in an emergency.

discharged from a hospital with a doctor's order for physical therapy. However, the beneficiary did not know that a home health agency was already billing for services she never received. Because the fraudulent home health billing on her account made it seem as if she were already receiving physical therapy, Medicare would not cover the actual physical therapy services ordered by her doctor.

What You Can Do

Protect, Detect, and Report. This is the SMP message and a simple way that you can help fight fraud:

- **Protect** your Medicare number by not giving it out over the phone or to a stranger. Remember that all a scammer needs is your Medicare number to fraudulently bill Medicare.
- **Detect** fraud by reading your Medicare Summary Notice (MSN) and looking for anything that does not match the services you actually received. Call the Illinois SMP at AgeOptions for tools and tips on reading your MSN.
- **Report** any potentially fraudulent charges on your MSN by calling the Illinois SMP Program at AgeOptions – **(800)699-9043**.

Remember You Can Prevent Fraud with Three Steps:



Protect



Detect



Report

Learn More

If you would like to learn more about how Medicare covers home health, visit Medicare.gov (<http://www.medicare.gov/coverage/home-health-services.html>) or call 1-800-MEDICARE.

Report Fraud to SMP



If you believe health care fraud has happened to you or you see a suspicious charge on your MSN,
**call the Illinois SMP at AgeOptions
(800)699-9043**