

Report Home Healthcare fraud and get a whistleblower reward

This article shows you how to get a reward for reporting home healthcare fraud.

Defining Home Healthcare Fraud

Medicare Home Healthcare reimbursement requires “Homebound” status

Medicare pays benefits to those who are homebound, which means that they are generally confined to their homes, including certain medical services provided at home. This means that a person is confined to the home except for infrequent or short absences or trips for medical care.

In addition, not all home healthcare services are covered by Medicare. To be reimbursable by Medicare, the home healthcare provider must also show that the Medicare recipient or beneficiary is in need of one of the following medical services: skilled nursing, physical therapy, continuing occupational therapy, or speech language pathology.

Home healthcare “Plan of Care” fraud

The amount of payment to a Home Health Agency (HHA) depends upon what home health resource group (HHRG) the Medicare patient is classified. The HHRG group assignment is based upon things such as the diagnosis and the functional capacity and service use. Basically, more is paid for patients with more severe medical conditions because that requires more home visits and more home provided Medical services.

To be covered by Medicare, any home health service must be provided under a “plan of care,” established by a doctor. If the doctor or physician does not determine that the Medicare patient is homebound and also review and sign a plan of care, it is likely Medicare home healthcare fraud. The plan of care is also important because Medicare only covers home healthcare services that are established to be medically necessary, properly documented, and authorized by a physician. If the home healthcare goes beyond 60 days, there must be a re-certification by the physician.

Some home healthcare providers cheat Medicare by providing home healthcare services when the patient is not home bound. The elderly are often pawn in this fraud, because the home healthcare providers offer to do the medical services at home. It is not wrong or the fault of the Medicare beneficiary to accept offers to receive medical services at home, but the home healthcare provider knows that they cannot bill for the home provided services.

Home healthcare kickback fraud

Two common fraud schemes by home healthcare companies are (1) paying a doctor a kickback, either financially or through other benefits, to certify the Medicare patient as homebound, or (2) forging the physician's signature or otherwise using false data or certifications.

1. Assisted living facility fraud (ALF fraud)

The forms of kickbacks are often disguised, such as trips or speaking fees. In addition, a form of a kickback or Stark violation is when the home healthcare company has an ownership interest in assisted living facility (ALF) and the home healthcare company provides home healthcare services at the assisted living facility (ALF). It is Medicare fraud for a home healthcare company or provider to have an assisted living facility (ALF) self-refer Medicare patients to a related entity.

There are many other forms of Medicare fraud associated with assisted living facility (ALF) in connection with home healthcare services.

2. Fraudulent billing for home healthcare services not provided or rendered

Another form of home healthcare fraud is billing for services not provided. Some home healthcare providers bill for making 3 visits a week but only go to the Medicare recipient's home 2 times a week. Other home healthcare fraud schemes include billing for services that they do not perform. They may provide one service, but claim to provide three services.

The types of fraud schemes are endless.

This rest of this article outlines the basics for how to report home healthcare fraud and how to apply for a whistleblower reward for reporting home healthcare fraud against Medicare or Medicaid.

Tips for reporting home healthcare fraud

To properly report home healthcare fraud and be eligible for a whistleblower reward, you cannot simply call a Medicare fraud hotline. To apply for a reward for reporting home healthcare fraud you must use an attorney (on a contingency basis) to file qui tam suit under the False Claims Act. Your attorney must follow the exact procedures of the whistleblower reward statute to get a reward for reporting home healthcare fraud.

In addition, you need to report in detail how the hospital or home healthcare provider is engaged in a home healthcare fraudulent scheme to cheat Medicare. The government needs your help in uncovering home healthcare fraud. But, since most whistleblower reward applications lack specific proof or contain other defects, the government turns away most reward claims. That's why selecting an experienced attorney that has handled Medicare fraud cases is important.

How much reward for reporting home healthcare fraud?

The amount of a whistleblower reward for reporting home healthcare fraud is based upon the amount of money Medicare recovers back due to the home healthcare fraud, and the reward is between 15% and 25% of what the government collects back from the hospital or home healthcare provider that is cheating Medicare and being overpaid by home healthcare fraud.

How to report home healthcare fraud

This website (and the books authored by Mr. Hesch) walk you step-by-step through the entire process of reporting home healthcare fraud against Medicare and shows you how to report home healthcare fraud to obtain a whistleblower reward.

Mr. Hesch has considerable experience with investigating Medicare fraud against the federal government while working for 15 years at the Civil Fraud Section of the U.S. Department of Justice in Washington, D.C., which is the office with nationwide authority over the whistleblower reward program. He is ready to confidentially review your information and show you whether and how to report fraud against Medicare by home healthcare fraud schemes.

Visit his website at www.HowToReportFraud.com to find out whether Mr. Hesch can help you report home healthcare fraud and receive a whistleblower reward.