Hospice Care and Medicare Fraud

Tips for Protecting Yourself and Medicare

Hospice is an important benefit for the Medicare population.

Hospice fraud threatens this benefit for all beneficiaries. Scammers are getting beneficiaries to agree to hospice care even though they do not qualify for the benefit.

What is Medicare Hospice Fraud?

Hospice fraud occurs when Medicare Part A is falsely billed for any level of hospice care or service.

What are Examples of Hospice Fraud?

- Falsely certifying and providing services to beneficiaries who are not terminally ill – that is, with a life expectancy of six months or less if the disease runs its normal course
- Enrolling in hospice without the knowledge or permission of the patient or family
- Falsely certifying or failing to obtain physician certification on plans of care
- Paying gifts or incentives to referral sources (such as physicians and nursing homes)
- Billing for a higher level of care than was needed or provided or for services not received
- Targeting assisted living facility and/or nursing home residents whose life expectancy exceeds six months
- Using high-pressure and unsolicited marketing tactics of hospice services
- Providing inadequate or incomplete services, including, for example, no skilled visits in the last week of life
- Providing/offering gifts or incentives, including noncovered benefits such as homemaker, housekeeping, or delivery services to encourage beneficiaries to elect hospice even though they may not be terminally ill
- Embezzling, abusing, or neglecting beneficiaries or medication theft by a hospice worker
- Keeping a beneficiary on hospice care for long periods of time without medical justification
- Providing less care on the weekends and disregarding a beneficiary's care plan

What Can You Do to Stop Hospice Fraud?

- Be sure your doctor has assessed your condition.
- Be sure your doctor has certified that you are terminally ill and expected to live six months or less if the disease runs its normal course.
- Never accept gifts (such as money, gift cards, or groceries) in return for hospice services and be wary of "too-good-to-be-true" offers.
- Report quality-of-care complaints to your local SMP and the Beneficiary and Family Centered Care-Quality Improvement Organization (BFCC-QIO) (qioprogram.org/file-complaint).

How are Fraudsters Benefiting from Hospice Fraud?

General inpatient care and continuous home care pay significantly more than routine home care. Falsely signing someone up for hospice and then providing routine home care at a continuous home care rate could be very lucrative for a fraudster.

What Medicare Paid for Hospice Care in 2021

Routine Home Care	General Inpatient care	Continuous Home Care
$199.25 per day for days 1-60 $157.49 per day for days 61+	**$1,045.66 per day**	**$1,432.41 per day**

Medicare Program; FY 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice and Home Health Quality Reporting Program Requirements 2021, 147 Fed. Reg. 42528 Page 16, 17 (August 4, 2021)

How Your Senior Medicare Patrol (SMP) Can Help

Your local SMP is ready to provide you with the information you need to **PROTECT** yourself from Medicare fraud, errors, and abuse; **DETECT** potential fraud, errors, and abuse; and **REPORT** your concerns. SMPs and their trained volunteers help educate and empower Medicare beneficiaries in the fight against health care fraud. Your SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. It also can provide information and educational presentations.

To locate your state Senior Medicare Patrol (SMP):
Visit www.smpresource.org or call 1-877-808-2468.

Supported by a grant (No. 90MPRC0001) from the Administration for Community Living (ACL), U.S. Department of Health and Human Services (DHHS).