This official government booklet explains the following:

- How to protect yourself and Medicare from fraud
- How to identify and report billing errors and concerns
- What to do if you suspect Medicare fraud
- How to protect your personal information
“Protecting Medicare and You from Fraud” isn’t a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.
Introduction

Most doctors, health care providers, suppliers, and private companies who work with Medicare are honest. However, there are a few who aren’t. Medicare is trying harder than ever to find and prevent fraud and abuse by working more closely with health care providers and strengthening oversight. There is also a joint effort between the Department of Health and Human Services and the Department of Justice to launch an enforcement team to review claims and investigate providers for possible Medicare fraud.

Fraud costs the Medicare Program millions of dollars every year. You pay for fraud with higher health care costs. Fraud schemes may be carried out by individuals, companies, or groups of individuals.

The following are examples of possible Medicare fraud:

- A health care provider bills Medicare for services you never got.
- A supplier bills Medicare for equipment you never got.
- Someone uses another person’s Medicare card to get medical care, supplies, or equipment.
- Someone bills Medicare for home medical equipment after it has been returned.
- A company offers a Medicare drug plan that hasn’t been approved by Medicare.
- A company uses false information to mislead you into joining a Medicare plan.

In addition to watching for Medicare fraud, you should also protect yourself from identity theft. Identity theft happens when an individual uses your personal information (like your name, Medicare number, credit card number, or Social Security number) without your consent to commit fraud or other crimes. See page 9 for more information on how to protect yourself from identity theft.
What you can do to protect against fraud

Review your Medicare Summary Notice for errors
If you have Original Medicare, you get a Medicare Summary Notice (MSN) from a company that handles bills for Medicare. The MSN shows what was charged for health care services, medical supplies, or equipment and how much Medicare paid.

Review each MSN you get to make sure Medicare wasn’t billed for services or items you didn’t get. If you see a charge on your MSN that may be wrong, call the doctor, health care provider, or supplier to ask about it. The person you speak to may give you information that helps you better understand the services or supplies you got. Or, they may realize a billing error was made that needs to be corrected. Correcting a billing error helps both you and Medicare.

It’s also helpful to learn more about what Medicare will and won’t pay for. You can find this information in your “Medicare & You” handbook. If you don’t have a copy, visit www.medicare.gov/Publications/Pubs/pdf/10050.pdf. You can also call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Report errors and concerns
If your doctor, health care provider, or supplier doesn’t help you with your questions or concerns or if you can’t contact them, you can do any of the following and explain the issue:
- Call 1-800-MEDICARE.
- Write a letter to Medicare. Mail it to: Beneficiary Contact Center, PO Box 39, Lawrence KS, 66044.
- Call the HHS Office of Inspector General Hotline at 1-800-HHS-TIPS (1-800-447-8477). TTY users should call 1-800-377-4950.
- Send an e-mail to the HHS Office of Inspector General at hhstips@oig.hhs.gov.
- Write a letter to the Department of Health and Human Services. Mail it to: HHS Tips Hotline, PO Box 23489, Washington, DC 20026-3489.

Medicare won’t use your name if you ask that it not be used.
What you can do to protect against fraud

Before you contact the provider, Medicare, or the Inspector General’s hotline, carefully review the facts, and have the following information ready:

- The provider’s name and any identifying number you may have
- The service or item you are questioning
- The date the service or item was supposedly given or delivered
- The payment amount approved and paid by Medicare
- The date on your Medicare Summary Notice
- Your name and Medicare number (as listed on your Medicare card)
- The reason you think Medicare shouldn’t have paid
- Any other information you have showing why Medicare shouldn’t have paid for a service or item

If the suspicious activity turns out to be fraud, you may be eligible for a reward of up to $1,000.

To be eligible for a reward, all of the following conditions must be met:

- You report your suspicion
- Your suspicion is referred to the Inspector General’s office for review
- The fraud you report isn’t already being investigated
- Your report leads directly to the recovery of at least $100 of Medicare money
- You aren’t related to people who work for certain Federal agencies

If you want to know more about this reward program, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
What might make you suspect fraud

Be suspicious of doctors, health care providers, or suppliers that tell you the following:

- The equipment or service is free; it won’t cost you anything, and they only need your Medicare number for their records
- Medicare wants you to have the item or service
- They know how to get Medicare to pay for the item or service
- The more tests they provide, the cheaper the tests become

Be suspicious of doctors or plans that do the following:

- Don’t charge copayments without checking on your ability to pay
- Advertise “free” consultations to people with Medicare
- Claim they represent Medicare or a branch of the Federal government
- Use pressure or scare tactics to sell you high-priced medical services or diagnostic tests
- Bill Medicare for services you didn’t get
- Use telephone calls and door-to-door selling as marketing tools
- Offer non-medical transportation or housekeeping as Medicare-approved services
- Put the wrong diagnosis on the claim so Medicare will pay
- Bill home health services for patients who aren’t confined to their home, or for Medicare patients who still drive a car
- Bill Medicare for medical equipment for people in nursing homes
- Ask you to contact your doctor and ask for a service or supplies that you don’t need
- Bill Medicare for tests you received as a hospital inpatient or within 72 hours of admission or discharge
- Bill Medicare for a power wheelchair or scooter when you don’t meet Medicare’s qualifications
Protect yourself from identity theft

Identity theft happens when someone uses your personal information without your consent to commit fraud or other crimes. Personal information includes things like your name, Social Security, Medicare, or credit card numbers.

Keep this information safe. Don’t give your information out over the web, or to anyone who comes to your home (or calls you) uninvited. **Only give personal information to doctors or other providers approved by Medicare.** Call 1-800-MEDICARE (1-800-633-4227) if you aren’t sure if a provider is approved by Medicare. TTY users should call 1-877-486-2048.

You can always give personal information if you call or contact the following organizations:
- Medicare, when you report errors and concerns as explained on page 6
- Social Security
- Medicare health or prescription drug plans
- Your State Health Insurance Assistance Program (SHIP)

You also shouldn’t send personal information like your Medicare number over the web or over the telephone. However, if you choose to join a Medicare Advantage Plan (like an HMO or PPO) or Medicare Prescription Drug Plan over the telephone, you may be asked to give this information to the plan. You may also be asked for this information if you use the Medicare Prescription Drug Plan Finder at www.medicare.gov or if you report errors and concerns as explained on page 6.

Call one of the following if you suspect identity theft:
- 1-800-MEDICARE
- The HHS Office of the Inspector General Hotline at 1-800-447-8477. TTY users should call 1-800-377-4950.

Visit www.consumer.gov/idtheft to learn more about identity theft.

**Note:** If you lose your Medicare card or it’s stolen, or if you need a new Social Security card, visit www.socialsecurity.gov, or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. If you get benefits from the Railroad Retirement Board, call 1-877-772-5772, or visit www.rrb.gov.
Protect yourself when dealing with private companies

With Medicare, you have options in how you get your health and prescription drug coverage. The information below and on the next page will help you protect yourself when dealing with private companies (approved by Medicare) that offer Medicare Advantage and Medicare Prescription Drug Plans.

Understand the type of plan you join.

There are different types of Medicare Advantage Plans (like HMOs or PPOs). Medicare has information to help you compare how these different plans work. Look at your “Medicare & You” handbook for more information.

If you get your health care from a Medicare Advantage Plan, you won’t get a Medicare Summary Notice (MSN). However, your plan will send you information about your services. Review any information you get from your plan carefully and contact the plan if you notice anything suspicious.

If you join a Medicare Private Fee-for-Service Plan (a type of Medicare Advantage Plan), the plan will contact you to verify that you wanted to join. The plan representative will also make sure that you understand how a Medicare Private Fee-for-Service Plan works and answer any questions you may have about the plan. The plan will send you a letter with this information if the plan can’t reach you by telephone.

Call 1-800-MEDICARE (1-800-633-4227) for any of the following reasons:
- You aren’t sure about Medicare’s rules.
- You think someone working with Medicare may be breaking these rules.
- You believe you have been misled by a Medicare plan.

TTY users should call 1-877-486-2048.

If you are in a Medicare Prescription Drug Plan and you suspect fraud, call the Medicare Drug Integrity Contractor at 1-877-7SAFERX (1-877-772-3379).
Protect yourself when dealing with private companies

Know the rules Medicare Advantage Plans and Medicare Prescription Drug Plans must follow when they try to get you to join a plan.

Medicare plans and people who work with Medicare aren’t allowed to do the following:

- Ask for your Social Security number, bank account number, or credit card information over the telephone. (However, if you applied for extra help paying for Medicare prescription drug coverage, someone from the plan may contact you if any information is missing from your application.)
- Come to your home uninvited to sell or endorse any Medicare-related product.
- Offer you cash to join their plan or give you free meals while marketing to you.
- Enroll you in a drug plan over the telephone unless you call them.
- Ask you for payment over the telephone or web. The plan must send you a bill.
- Call you unless you are already a member of the plan. If you are a member, the agent who helped you join can call you.
- Sell you a non-health related product, like an annuity or life insurance policy, while trying to sell you a Medicare health or drug plan.
- Make an appointment to tell you about their plan unless you agree in writing or through a recorded telephone discussion to learn more about the products being discussed. During the appointment, they can only try to sell you the products you agreed to hear about.
- Talk to you about their plan in areas where you get health care, like an exam room, hospital patient room, or a pharmacy counter.
- Market their plans or enroll you during an educational event, like a health fair or conference.

If plans use independent agents and brokers to sell their plans, they must be licensed by the state, and the plan must tell the state which agents are selling their plans.
Summary

To help protect yourself and Medicare, you should report all suspected instances of fraud and identity theft. Remember, whenever you get a payment notice from Medicare, review it for errors. The notice shows what Medicare was billed for, what Medicare paid, and what (if anything) you owe. Make sure Medicare wasn’t billed for health care services or medical supplies and equipment you didn’t get.

Health care fraud and abuse should be reported, whether it involves Medicare or private insurers. Fraud increases everyone’s health care costs, much the same as shoplifting increases the price of food and clothing. To protect you and Medicare, we must work together to reduce costs.

With help from honest health care providers, suppliers, law enforcement, and citizens like you, Medicare is doing a better job of preventing fraud and identity theft. Some dishonest health care providers have gone to jail or have been removed from the Medicare Program. Also, Medicare has been able to recover millions of dollars in overpayments. These actions are saving money for taxpayers and protecting Medicare for the future.
What else you should know about fraud

If you want to know more

The SMP Program (formerly called Senior Medicare Patrol) educates and empowers people with Medicare to take an active role in detecting and preventing health care fraud and abuse. There is a SMP Program in every state, the District of Columbia, Guam, U.S. Virgin Islands, and Puerto Rico. For more information or to find your local SMP Program, visit www.smpresource.org or call your State Health Insurance Assistance Program (SHIP). If you don’t have a computer, your local library or senior center may be able to help you get this information.

For more information

- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
  A customer service representative can answer your questions 24 hours a day, 7 days a week. You can also use this number to order Medicare publications and get detailed information about the Medicare health and prescription drug plans in your area (including quality and customer satisfaction information).
- Visit www.medicare.gov/fraudabuse/overview.asp.
- Visit www.hhs.gov/stopmedicarefraud/.
Tips to help prevent Medicare fraud

DOs

**DO** protect your Medicare number (on your Medicare card). Treat your Medicare card like it is a credit card. Don’t ever give it out except to your doctor or other Medicare provider. Never give your Medicare or Medicaid number in exchange for free medical equipment or any other free offer. Dishonest providers will use your numbers to get payment for services they never delivered.

**DO** remember that nothing is ever “free.” Don’t accept offers of money or gifts for free medical care.

**DO** ask questions! You have a right to know everything about your medical care including the costs billed to Medicare.

**DO** educate yourself about Medicare. Know your rights and know what a provider can and can’t bill to Medicare.

**DO** use a calendar to record all of your doctor’s appointments and what tests or X-rays you get. Then check your Medicare statements carefully to make sure you got each service listed and that all the details are correct.

**DO** be cautious of any provider or plan representative who says he has been approved by the Federal government.

**DO** be wary of providers who tell you that the item or service isn’t usually covered, but they “know how to bill Medicare” so Medicare will pay.

**DO** make sure you understand how a plan works before you join.
**Tips to help prevent Medicare fraud**

**DO** always check your pills before you leave the pharmacy to be sure you got the full amount. If you don’t get your full prescription, report the problem to the pharmacist.

**DO** report suspected instances of fraud. See page 6 to find out who to call.

**DO** review your Medicare payment notice for errors. The payment notice shows what services or supplies were billed to Medicare, what Medicare paid, and what you owe. Make sure Medicare wasn’t billed for health care services or medical supplies and equipment you didn’t get. If you spend time in a hospital, make sure the admission date, discharge date, and diagnosis on your bill are correct.

**DON’Ts**

**DON’T** allow anyone, except your doctor or other Medicare providers, to review your medical records or recommend services.

**DON’T** contact your doctor to request a service that you don’t need. Don’t let anyone persuade you to see a doctor for care or services you don’t need.

**DON’T** accept medical supplies from a door-to-door salesman. If someone comes to your door claiming to be from Medicare or Medicaid, remember that Medicare and Medicaid don’t send representatives to your home.

**DON’T** be influenced by certain media advertising about your health. Many television and radio ads don’t have your best interest at heart.