

# Top Fraud Waste Abuse Trends 2024



## Fraudulent hospice Services: \$15 million

A striking case involves [hospice care fraud](#), where hospice providers submitted claims for patients who did not meet the terminal illness criteria, falsely certifying patients to qualify for hospice services by allegedly using doctors' identities. Fraudsters also inflated claims by using higher reimbursement codes, such as General Inpatient Hospice Care (GIP), even when patients were not receiving such intensive care.

## Genetic Testing Fraud: \$12 Million

[Genetic testing fraud](#) is increasingly impacting healthcare, with providers and companies marketing unnecessary tests to Medicare beneficiaries as "free" or low-cost, often involving kickbacks for healthcare professionals who authorize these tests without medical necessity. A recent case highlights this issue: A New Orleans nurse was indicted for allegedly submitting \$12 million in fraudulent Medicare claims for cancer genetic tests. The indictment claims she accepted bribes from a Utah company over the year to submit claims without physician orders and had minimal interaction with patients before submitting the claims, making the tests medically unnecessary.



## High-level Procedure Codes

Healthcare providers frequently submit claims using the highest reimbursable codes within certain categories, such as Evaluation and Management (E/M) codes, laboratory testing, and molecular pathology procedures. For example, a recent report highlighted improper billing testing codes, where providers submitted claims for higher levels of testing than actually performed, leading to overpayments from Medicare.

## Fraudulent Prescriptions: \$300 Million

A California pharmacist has been charged with submitting over [\\$300 million](#) in fraudulent claims to Medi-Cal for unnecessary prescription medications. Exploiting Medi-Cal's temporary suspension of prior authorization from May 2022 to March 2023, the pharmacist is accused of billing tens of millions per month for high-reimbursement generic drugs, leading to two counts of healthcare fraud.



## Physical Therapy Fraud: \$80 Million

Three people were arrested for submitting fraudulent claims aimed to allegedly defraud a federal worker's compensation program that involves physical therapy services costing around [\\$80 million](#).