

Healthcare Fraud and Abuse www.healthychoicesformindandbody.org 3/7/09

We all want to believe that people are honest and capable of only the most ethical and honest behavior. We entrust doctors with significant control over our well-being and hope that they safeguard that trust with exemplary behavior. We expect patients to seek care for real problems and make good-faith efforts to achieve wellness. But doctors and patients are humans and, like priests, politicians, investment bankers and police, they sometimes violate our trust with fraudulent or unethical behavior.

One way that we can all assure that fraud doesn't occur is to review your insurance company's Explanations of Benefits (EOB), even if you don't have to pay any money. The EOB details charges by a doctor, facility or medical supply company and how they were compensated. If you believe that Medicare, Medicaid (MediCal) or your insurance company was billed for a service you never received, call the provider's office for clarification. (Sometimes your concern is just a matter of coding language.) If you still believe you did not receive the contested service, notify the company.

The insurance company has no way to know what was done to or for you or your family member. Only you can let the company know when a billing is fraudulent. I know of a physician who billed for hospital care for a dead person. The daughter notified Medicare.

Workers compensation and personal injury doctors and lawyers "churn" patients through doctor and therapy visits long after any hope for improvement has died. Anything labeled 'medical' costs five times what it would at Ikea or Crate and Barrel. Medical supply companies charge equipment rental fees for returned supplies. And on and on...

On the flip side, patients game the system too. They may see multiple doctors to get narcotics. Some demand insurance coverage for gym memberships, special bedding or bizarre therapies that they should pay for themselves. Others push for brand name drugs when generics would do. Or expect test after expensive test when they don't like the obvious diagnosis.

My personal favorites are those who expect to be waited on in Hotel (insert name) Hospital throughout testing, treatment and recovery that could be accomplished more safely as an outpatient. Or the families who just can't let go and demand weeks of futile intensive care instead of letting nature gently pursue its course.

In case you are feeling smug, I should add to that list the majority who end up as healthcare consumers because they can't adopt a lifestyle that might preclude premature health problems and healthcare resource consumption.

Entitlement has become an American way of life. But deep pockets are not bottomless pits, and expecting a fair, honest, reasonable share would allow more to be available for everyone. Most people want insurance premiums and medical costs to decline by paying only for necessary, delivered service. But costs won't decline if healthcare providers receive payment without benefiting the patient. Or if each patient has a double standard – reasonable care for the other guy and extraordinary service for him/herself.

Ridding the system of bad apple doctors makes the rest look good and restores faith in the medical profession. Patients who strive for health as hard as they expect their doctors to work for them end up healthier. **Without both sides using the healthcare system rationally, how can evolve an efficient, cost-effective medical system, in which there is enough to care for everyone?** Or is that too Pollyanna-ish?