

## Protect Yourself Against Nursing Home Fraud

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What can you do to stop nursing home care fraud?

### What You Should Know:

Unfortunately, there are unscrupulous providers and nursing home administrators who prey on the vulnerability of their patients/residents.

Some examples include:

- ⇒ Billing Medicare for skilled nursing services after you have been released from a skilled nursing facility.
- ⇒ Billing Medicare for services that were never rendered.
- ⇒ Billing Medicare for unnecessary tests and procedures.
- ⇒ Billing Medicare for more expensive procedures and medications.
- ⇒ Paying kickbacks to providers for referring patients to nursing homes.
- ⇒ Receiving kickbacks for prescribing unnecessary medications and medical equipment.

### TIPS

- ⇒ Read your Medicare Summary Notice (MSN) or Explanation of Benefits (EOB) to compare the services Medicare was charged with what you received.
- ⇒ Be sure you work with your doctor to enroll you in any skilled nursing facility (SNF) therapy services you may need and to determine medical necessity for these services.
- ⇒ Do not accept gifts (such as money, gift cards, or groceries) in return for choosing a nursing home in which to receive skilled nursing.
- ⇒ Do not sign forms that you do not understand, including a Medicare Outpatient Observation Notice (MOON), an Advance Beneficiary Notice (ABN), or any form that is blank.

### How to Respond:

- ⇒ Report charges on your MSN or EOB for services or visits you did not receive.
- ⇒ Report charges on your MSN or EOB for services that are different than what you received.
- ⇒ Report quality-of-care complaints to KEPRO, Arkansas' Beneficiary Family Centered Care Quality Improvement Organization (BFCC-QIO) — 844-430-9504.
- ⇒ Report nursing home fraud to the HHS OIG—800-447-8477 / [www.tips.hhs.gov](http://www.tips.hhs.gov)
- ⇒ Contact the Arkansas Senior Medicare Patrol (SMP) to report nursing home fraud—866-726-2916.

**REPORT all scams to the Arkansas SMP—866-726-2916**



SNFs are commonly used for short-term rehabilitative stays, which are at least partially covered by Medicare for up to 100 days in many instances. Medicare does not pay for long-term or permanent stays in nursing homes.