Understanding Medicaid Fraud Medicaid Fraud & Vulnerable Victims Unit

What is Medicaid?

Medicaid is a government program that helps cover medical costs for people with low incomes who meet eligibility requirements. Funded by both federal and state tax dollars, it provides essential health care to those who otherwise could not afford it. Medicaid is a joint state and federal effort, managed by states with oversight and funding from the federal Centers for Medicare and Medicaid Services. In Maryland, the Department of Health administers Medicaid.

What is Medicaid Fraud?

Medicaid Fraud occurs when health care providers or others intentionally deceive the Medicaid program to receive money or services they are not entitled to. Fraud diverts critical resources from vulnerable individuals, driving up health care costs. The most common forms of Medicaid fraud include:

- Falsifying Claims ➤ Intentionally billing for services or equipment that were unnecessary or never provided.
- **Double Billing** ► Charging both Medicaid and another payer for the same service.
- **Kickbacks** ► Accepting payments in exchange for referring patients to specific providers or facilities.
- Drug Diversion ➤ Writing unnecessary prescriptions or altering prescriptions to obtain drugs for personal use or to sell them.
- Upcoding ► Billing Medicaid for a more expensive service or procedure than was actually provided.
- Unbundling Services ➤ Billing separately for services that should be combined into one claim.
- Misusing ID Cards ► Treating and claiming reimbursement for someone other than the eligible patient or accepting multiple ID cards from the same patient.



Medicaid Fraud Affects Everyone

- Improper payments, including those due to fraud, cost U.S. taxpayers and the Medicaid program over \$100 billion in 2023. (Source: U.S. Government Accountability Office)
- Fraud diverts money from care for people who need it.
- Fraud drives up program costs, leading to rising health insurance premiums and higher taxes.



Access our online reporting form by scanning the QR code below.

Report
Medicaid Fraud:





What Does the Medicaid Fraud & Vulnerable Victims Unit (MFVVU) Do?

The MFVVU investigates and prosecutes Medicaid fraud and abuse cases involving health care providers in Maryland. Using both civil and criminal actions, the MFVVU works to protect taxpayer dollars, improve health care quality and safeguard the well-being of vulnerable individuals in Maryland.

Types of Cases the MFVVU Handles

The MFVVU focuses on **provider fraud**, including civil and criminal cases involving health care providers who improperly bill or abuse the Medicaid system. **The MFVVU does not investigate recipient fraud**. To report fraud or abuse by a Medicaid recipient, please contact Maryland's Office of the Inspector General for Health (OIGH) at 866-770-7175 or use the OIGH online fraud reporting form.

What You Can Do

If you suspect Medicaid fraud by a **health care provider**, contact the MFVVU to report what you know. Use the online reporting form or contact us via the methods below to give details.

Contact Us

Maryland Office of the Attorney General Medicaid Fraud & Vulnerable Victims Unit

- Address: 200 St. Paul Place, 18th Floor, Baltimore, MD 21202
- Phone: 410-576-6521 or toll-free at 1-888-743-0023
- Email: medicaidfraud@oag.state.md.us
- Online: oag.maryland.gov/i-need-to/Pages/medicaid-fraud-vulnerable-victims.aspx