Those of us who live in Hawai‘i often say that we live in paradise. Our state is blessed with a bounty of natural resources and an amazing mix of people and cultures. However even paradise has its share of problems.

My name is Lori Yancura and I’m an Assistant Professor in the Department of Family and Consumer Sciences and the College of Tropical Agriculture in Human Resources at the University of Hawaii at Manoa. My job is to study the problems that affect older adults in Hawai‘i and to look for solutions to improve their health, well-being, and quality of life.

Elders in our state are very fortunate because most people living in Hawai‘i have a strong sense of family. We believe in taking care of our kupuna. According to the National Family Caregivers Alliance there are over 100,000 family caregivers taking care of older family members in the State of Hawaii. Because of the strong sense of family I believe the best solutions to problems faced by the older adults in Hawaii are those that involve the entire family.

One problem that elders in Hawai‘i are currently facing is healthcare fraud. In Hawaii, as well as nationally, approximately 10% of the money spent on the Medicare program is estimated to be lost due to healthcare fraud, waste, and abuse. This comes out to about $80 million every year or $861,000 every week, $123,000 everyday, or $85.00 each and every minute. This is a huge problem because that money could be used to provide better healthcare services for our kupuna.

We started the Ohana Caregivers Project to find solutions to issues facing family caregivers in Hawaii. One of the things we are interested in learning about is using the strengths of our families to help lessen or even eliminate the problem of healthcare fraud. In researching possible solutions we have decided to get advice from experts and the following series of programs will explore some solutions to this problem and talk about specific ways that family caregivers can help keep their loved ones safe.

So far in our continuing series on Helping Family Caregivers to Help Prevent Healthcare Fraud for Older Adults in Hawaii we’ve learned about many different aspects of healthcare fraud. In this final segment we will cover information that family caregivers need to apply the tips and techniques covered throughout this series.

Our next guest Mernie Miyasato-Crawford, a social worker from Tripler Army Medical Center will discuss some techniques that have been successful with local families.
(Lori) Mernie as a social worker you work with real families who are involved with many aspects of the healthcare system. Thank you very much for agreeing to share your front-line perspective. Can you tell me why families should care about healthcare fraud?

(Mernie) Commonly we think of healthcare fraud as impacting the insurance companies and not thinking of it as directly impacting us (me and my pocketbook) but it absolutely does. It ends up raising costs across the boards so that we all end up paying more just because of the waste and the lost. I like to think of it in terms of shoplifting. If a shoplifter goes into a grocery store and steals a candy bar that’s not any skin off my nose. It’s not taking it out of my pocketbook but you think about that grocery store owner who is suffering the losses of hundreds of candy bars and any other kinds of things that are shoplifted and over time the cost to him running that business is huge and so what does he end up doing? He ends up raising the price of every single thing on the shelf and I when I go to the cashier my bill is that much greater overall. It’s the same concept in healthcare fraud. I may not be directly impacted but we need to care because it’s going to end up costing huge over the long-term.

That makes a lot sense. Thank you. So what exactly is healthcare fraud?

To put it very simply healthcare fraud is stealing. It’s basically stealing. It’s stealing money again as we say in the shoplifting scenario. It’s not directly out of my pocketbook but what it is it’s using individual people, these scamsters, fraudsters are using individual people such as me and our family members and they’re stealing from the insurance companies at the point that we are seeking or receiving healthcare services so they maybe individual people. It could be that the scam artists are using or under the guys of Healthcare providers or their own companies as part of their whole scale business practices as a healthcare company organization.

So that’s really frightening. How much does healthcare fraud cost the consumer, you and me?

Again it’s really hard to think of it in terms of you and me. Basically what has been looked at in terms of calculating costs is industry wide in terms of the insurance companies we have heard recent calculations to estimate that $80 million annually are lost to these kinds of scam schemes.

So what are some common types of healthcare fraud? What are you seeing out there?

Again remember that healthcare fraud is committed by way of scamming money out of Medicare or other insurance companies and some of the common schemes have to do with the whole process that is basically invisible to us (the patient consumer). It has to do with billing or faking claims. So one of the common ways to steal is just out and out lying on a claim where in you don’t receive a service but the provider bills as if he provided that service. For example saying, “I saw you on an office visit,” and submitting a claim for an office visit and you never went to the doctor’s office. That is one common type.

Another type is again having to do with billing and filing the claim after we leave is maybe you did receive a covered service but it was misrepresented on the bill or the claim and this is commonly referred to in the industry as “upcoding” wherein I can think of a recent local example where there was a specialist who was caught after some time upcoding a procedure that was not a surgical procedure but on the billing he would represent it as having been a surgical type of procedure and which of course brought him more reimbursement. That would be an example of misrepresenting in upcoding. So you get a service but it is billed inaccurately and illegitimately.

Another little spin is that you’re getting sent for and billed for services for treatments that really were not medically necessary. For example and it is hard to pin this down you could be sent for a more complicated
invasive ultrasound type of diagnostic test when really a simple x-ray could of sufficed and the doctor or radiology provider might say, “don’t worry about it I know how to get Medicare to pay for it.” So again it is about how they’re submitting the claim in your name on your account and then receiving the reimbursement back.

Finally there’s also another scheme called unbundling and there are complicated rules such as Medicare and how any other health insurance program pays for services for certain types of procedures and treatment are required to be filed in one total procedure. Some providers have gotten very savvy at putting them as separate itemized items so that in total they up getting greater reimbursement than the lesser bundle properly submitted claim. So that might be another example of fraud.

And those are really common. What about some other less common and more exotic types?

As I think about it, again a lot of that we spoke of was really hard to detect because it was done on the provider on the bill filing and the claim filing and there’s a whole another area of healthcare fraud that has to do with the consumer side of the transaction fee.

One example of that would be that you’re just falsely receiving or billing for services under a card carrying member’s name. It is a form of identity theft. Somebody uses my, say if I’m a Medicare beneficiary, and take my Medicare number and then bill as if I received a certain service and that was totally false and misrepresentation of my identity. That would be one example.

Another one where it is more the consumer driven side of healthcare fraud is where a person might decide that they’re going to doctor shop and they go from one doctor to another to multiple different doctors seeking narcotic medication, drugs for example. So this is a type of fraud that may not be directly frauding the company or putting money in the consumer’s pocket but it has to do with fraudulently using or gaming the system for another purpose which may include substance abuse or some other types of issues and problems. But deceit is involved.

Another type is where and sometimes I have to admit this is just for lack of attention but you maintain eligibility on your insurance account for people or other family members or persons that really are not supposed to be added on to your coverage plan.

As an example somebody who was already has been deceased, never been removed as a family member card carrying beneficiary under that plan and inappropriately or illegitimately therefore receiving coverage and payouts on that member’s behalf. So that might be a more exotic way of getting at the fraud. So it’s huge. There’s so many scenarios to think of.

That’s what I was thinking. So what to actually people can do, what steps can caregivers take to prevent this type of fraud?

I really have to refer in my thinking and the reason why we put this slide up as stated as other steps. As I research this I realize that most of the steps or the methods or strategies to tackle and combat healthcare fraud are really more at the corporate level where it is the federal government, it’s the state government having major strategies in place with whole entire departments of staff and whole entire computer networks with accountants and billing, experts, people who are there looking at overtime thousands of claims, thousands of beneficiaries, looking for trends and trying to track providers and the practices and then to root out fraudulent schemes that way and again they’re looking to protect what they’re paying out and the bottom line is it’s a price and cost of doing business. So I’m thinking that is the corporate level.
Well what can we do at home to prevent it? Those types of measures are really more at stopping it once it has occurred and maybe it might have some deterrent effect to the extent the anybody knows that these companies are doing that and the government is doing that it so that I better not try that scheme because I’m going to get caught at some point but true prevention really begins at home and that’s really what I wanted to talk about here.

First and foremost and most of these things are very common sense is if you remember back to the types of fraud we talked about initially in that it has to do with billing and stuff that happens after we leave the office and we don’t have direct control over what happens well to the extent you can engage directly in that visit if you can go directly with your family member and be in the interview and the evaluation then the better chance you have of preventing fraud or at least catching it before it gets to be a paid claim by Medicare.

Here as a medical social worker I like to always take the opportunity to put in another plug about the importance of having a conversation about advanced directives in general. It is not just about I need to go tag along to my mother’s doctor’s appointment because it is all about prevention of fraud. It’s certainly as I hope that we’re conveying in this presentation but ideally we are becoming directly engaged and involved in that transaction for the larger purpose of being engaged and involve for all kinds of things that we want to be able to directly support our elder family member. It’s being close to the scene to be able to be in all discussions to include the end of life discussions and therefore prevention of healthcare fraud and paying attention to those types of potential risks just becomes a natural part of our ongoing engagement. So it is a small tip of a big iceberg is what I’m hoping to convey here but the trust factor with your family member and the provider is the deal that is very important.

Also along with that and I know it’s going to sound like a lot of work but it can be very simple is to keep a record. So as you get in the room and have the involvement is to keep a record. Literally get a steno pad and keep notes. My late father when he was multiple times going back and forth to his doctor’s and in the hospital, our family had a scheme of where we just had a steno pad at the hospital bed and we just made it a real routine habit to when it was my turn to go in then we would just keep a chronological guidebook. Oh 10:00 on Friday doctor so and so came in today. So then I know that I can connect back. Yes there was a bedside visit and I should expect that on the Medicare statement that there will be a bill for that. Everything comes with a charge. Let’s face it so you kind of want to keep track.

So write it down and that would be a key thing to do. It will be big help down the road because as we discussed earlier on that whole identity theft using my name and my account is a huge part of a huge example of the scams out there. So we can’t say enough that you really want to protect your family member’s Medicare Medicaid and any other insurance cards. Treat it as just as you do with your credit cards and your social security cards, new passports, and all those other identifying stuff. It’s just as crucial.

Identity theft is just as damaging when it’s your insurance identity that’s stolen because as you have heard with some of the examples because there could be hundreds, thousands of dollars stolen in your name and your account. So don’t give that card, don’t give that number out to anybody other than your trusted doctors or bonafide office staff.

Be especially aware if you go to these healthcare fairs and these wellness fairs and other places where they have the so call quasi medical things on display. If any of those types of providers ask you to provide this type of information or to have to a copy of your card to just be really aware that you should not. You want to protect that information and then also know that no government agency and neither does any insurance company call
you up on the phone to say, “we’re updating our Medicare files so we need your card number,” and the same is true on the Internet. Nobody makes those queries on the Internet.

Then as we have been alluding to already is you got to go through those horrid Medicare explanation benefit statements that many times will come weeks and weeks later and this is why if you remember back to keeping note is really helpful because who can remember that this is June, that last February I went to this doctor and had that home healthcare agency and this pharmacy. You check it again just very briefly against your notes just to reconfirm that what was filed with Medicare did indeed happen in accordance with what was provided. Without those Medicare statements you don’t know. That’s your window and snapshot view into knowing who filed the official claims.

So all of that backdoor lying on bills, upcoding, unbundling, all of that stuff you should be able to at least have a clue that maybe something strange is going on if you’re checking your statements.

This is huge. The TV, the radio, a lot of folks especially locally they’ll deliberately go get the advertising on TV because they know a lot of seniors out there, if it shows up on the channel then it must be legit. It is so easy to be seduced and caught. All they have to do is catch the attention. So you want to be very careful to remind your family members not allowing the television, radio, or Internet advertising influence what they choose to buy or send their number in for and be especially skeptical and I have seen that every night if you’re watching TV. The tag line on many of these is that famous line, “we know how to get Medicare to pay don’t worry.” So it is out there.

A lot of older people sit home and watch TV during the day so they see a lot of advertising.

It is so common sense but it is stuff like this. Don’t accept money or gifts in exchange for anything and certainly not medical care. It is not so subtle when you think is just so obvious but much of fraud has to do with your traditional scam artists and it’s about these little ways to get people’s attention and just hook them and it just so happens that instead of frauding you with those shell games, healthcare fraud and scamming the money out of the pockets of the government insurance programs is really the deep pocket right now. So it’s the same idea, that same concept that same psychology of the approach that is I think out there being used to really draw people and before you know it there you are just really being illegitimately used. So it is worth repeating again. It’s like with any kind of scam that could be out there, healthcare fraud is the same, buyer beware.

It’s that old saying it that if it sounds too good to be true it probably is.

Yes. Absolutely. Finally it is embedded in everything we have been talking about but you always want to be asking questions. I don’t care who is speaking an approach and even if it is your doctor that you have been going to for 30 years and he knows you and the whole family is you want to ask these basic questions.

Is this service, is this test, is this medical equipment necessary and is it covered by my insurance? If it is then, how so? Last year you sent me for this but now it you’re saying I need that so how is that? If there’s coverage there, is there a co-pay because many doctors are now requiring that you pay up front as you leave the room. So again it is like with any kind of financial transaction you want to know what you’re getting. So you ask your questions.

Then you can educate yourself if you can generically speaking about the programs and their numbers to directly call. Here I can put in a plug for…I can’t say for all but most hospitals have medical social workers such as me and my staff and I would be certainly some place that you can go that we can help you answer some of those questions.
Do you have time to show us any of these resources today?

Yeah and very quickly and hopefully some of these are not new but there is a program called SMP Hawaii. It is a state-volunteer based agency out of the Executive Office on Aging. Here are the numbers to call on Oahu and the Neighbor islands. They are toll-free numbers. Basically it is a real good place to call in if you’ve even think. So there you’re doing your homework and you’re reading the Medicare benefit statements and you see something strange and you’re not sure. You can just call them and they have trained volunteers who can help you sort it out, clarify, and if indeed if it looks very concerning then they can appropriately report it to the proper people. So it is a free easy to call service.

These are generic resources for anything related frail, vulnerable elderly people. So if you have been caring for a family member in a long-term care facility then another advocate option will be the Long-term Care Ombudsman Program and they are also readily available. They are actually housed in that same Executive Office on Aging. That could be a place to start. They are there to advocate and investigate any and all concerns related to the care provided to the residents in long-term care facilities. So that is another option.

Even more generically every county in the state and across the nation has its area agency on aging and why I reference them is if you don’t even know how to call those other two numbers than even more generically every county has its information referral lines and of course it’s county specific. So you don’t have to call toll free. Just call your island county’s office in Honolulu. You can say that this is what I’m looking and who can you refer me to talk to and that is another good resource.

Ultimately State Adult Protective Services is the State Department of Human Services agency tasked and charged with a mission state by state law to investigate and address the abuse and neglect of frail seniors, adults I should say. Again is not directly at all focused on healthcare fraud but it could be a real good place to call just to get pointed in the right direction and who knows that might be some other types of schemes that a person might be a victim that they could get involved in. That is another resource.

Finally as I said before you could seek out folks such as myself, the medical social work staff we deal with these kinds of issues everyday at the front-line as Lori says and we can certainly be a way to connect you up to appropriate resources or just help you sort things through.

Really it is amazing to me that healthcare fraud has morphed into such a whole huge industry problem in the last few years alone. We can easily lose sight of its impact on us little people and what has that got to do with me going to the doctor. Well I hope we have conveyed in a little way that it directly impacts us in true ways and there are these little things that we can do to help hopefully prevent and monitor for these abuses. So doing our small part makes a big difference.

That’s great to hear. Thank you so much Mernie for sharing with us. I learned many things from today’s presentation and I’m sure that our viewers did too.

Thank you for the opportunity.

I hope you enjoyed the discussion with Mernie as much I did. At the beginning of the series we started on a quest to discover how to prevent a huge problem that is facing our elders in Hawaii (healthcare fraud). We have learned many things. We’ve seen some specific examples of health care fraud such as offers that seem too good to be true.
We’ve also learned some valuable answers to questions that many caregivers have about healthcare insurance or billing and some specific tips for preventing identity fraud. Knowing this information can help us protect our loved ones.

Perhaps the most important thing that we have learned is how to make this information work in our families. As I talked about it at the beginning of this program the families of Hawaii are our greatest strength. We have learned ways which each and every member can get involved in protecting the family’s older members.

You can visit our Ohana Caregivers Project website for more information. That’s www.hawaii.edu/ohanacaregivers. I’d like to conclude with a very sincere thank you to all of the experts who shared their knowledge with us throughout this series. Hopefully you have learned as much from them as I have and you can use your new knowledge to protect your loved ones from healthcare fraud. Mahalo and aloha!

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