



# What to know about fraud and abuse

[AetnaBetterHealth.com/Illinois-Medicaid](https://AetnaBetterHealth.com/Illinois-Medicaid)

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Aetna Better Health® of Illinois

# Fraud and abuse

## Our commitment to you

We're dedicated to doing business in an ethical and legal manner. As a key partner, it's critical that you understand that we're committed to preventing, detecting and responding to fraud, wrongdoing or any type of misconduct. If you ever have any concerns or are ever asked by anyone, including an Aetna Better Health employee, to engage in any behavior that you believe is wrong, unethical or illegal, please immediately take action. You can call us at **1-866-536-0542**. And you can also call the Illinois Department of Healthcare and Family Services, Office of Inspector General.

## Illinois Department of Healthcare and Family Services

Office of Inspector General Fraud Hotline:

**1-844-453-7283**

[Illinois.gov/hfs/oig/Pages/ReportFraud.aspx](https://www.illinois.gov/hfs/oig/Pages/ReportFraud.aspx)

## Our pledge

Our Ethics and Compliance department will promptly investigate allegations of wrongful, illegal or unethical business practices by any Aetna Better Health employee or any provider. And when necessary, report allegations of the Anti-Kickback Statute, Stark Law violations and the False Claims Act to government regulators.

## Aetna Better Health of Illinois fraud, waste and abuse hotline

**1-866-536-0542**

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Illinois-Medicaid](https://www.AetnaBetterHealth.com/Illinois-Medicaid)

## WHAT ARE FRAUD, WASTE AND ABUSE?



### Fraud

refers to a false action that's used to gain something of value.



### Waste

is the misuse of services.



### Abuse

refers to overused or unneeded services.



# Fraud statutes

## The **ANTI-KICKBACK STATUTE**

is a criminal statute that prohibits anyone (not only physicians) from knowingly and willfully offering, paying, soliciting or accepting anything of value to induce or reward patient referrals or generate Medicaid business. When contracting with physicians for services, these factors are required:

- There's a legitimate need for those services.
- The services are provided as described in the contract.
- Payment is consistent with the terms of the provider agreement or contract and conducted in an arm's length transaction.
- The arrangement is completely decoupled from the volume or value of Medicaid business generated.

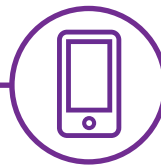
Violations of Anti-Kickback rules require proof of intent. Penalties can include fines, jail time and exclusion from federal health care programs.

## The **STARK LAW**

is a strict liability statute that doesn't require proof of intent. This means that even inadvertent infringements are illegal. Quite simply, it's illegal for physicians to refer patients for Medicaid-insured "designated health services." This includes clinical lab services, home health services, physical therapy, etc. — to an entity in which they (or a complete list of related family members) have a financial stake. Penalties for Stark violations can include fines, jail time and exclusion from federal health care programs.

## The **FALSE CLAIMS ACT**

prohibits the submission of "knowing" false claims to get federal funds. The United States may sue violators for treble damages (three times the government's loss), plus \$5,500 to \$11,000 per false claim. The law isn't limited to claims submitted with fraudulent intent. It also applies to "ostriches with their heads in the sand" who make false claims with "deliberate ignorance" or "reckless disregard" of truth or falsity or "gross negligence." Everyone involved in a scheme can be prosecuted. This includes "downstream" providers or subcontractors who get federal funds through third parties, like government contractors and HMOs.



For more information, please call the  
**AETNA BETTER HEALTH OF ILLINOIS  
FRAUD, WASTE AND ABUSE**  
hotline at  
**1-866-536-0542.**

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