

dependent person to unwanted physical contact, or threatens that or other harassing activity. Financial exploitation can occur anytime a person in position of trust to the victim abuses that position to steal money or property from an older or care-dependent person.

INDICATORS OF PATIENT NEGLECT

- Care-dependent persons who are malnourished, dehydrated, or have untreated bedsores.
- Staff failing to follow doctors' orders with regard to treatment of a care-dependent person.
- Failure to seek needed medical treatment for a care-dependent person in a timely manner or not at all.
- Care-dependent persons who appear unkempt, unclean, or disheveled for an extended time.

The Pennsylvania Medicaid Fraud Control Unit receives 75 percent of its funding from the U.S. Department of Health and Human Services under a grant award totaling \$12,839,940 for Federal fiscal year (FY) 2025. The remaining 25 percent, totaling \$4,279,979 for FY 2025, is funded by Pennsylvania.

Referrals

If you suspect that Medicaid Fraud is being committed, or that a care-dependent person is suffering from patient neglect or abuse, please email mfcsintake@attorneygeneral.gov to refer the case, submit online at www.attorneygeneral.gov/submit-a-complaint/medicaid-fraud-referral, and/or call the Medicaid Fraud Control Section intake team at the Pennsylvania Office of Attorney General Strawberry Square Headquarters in Harrisburg, PA, at (717) 783-1481.

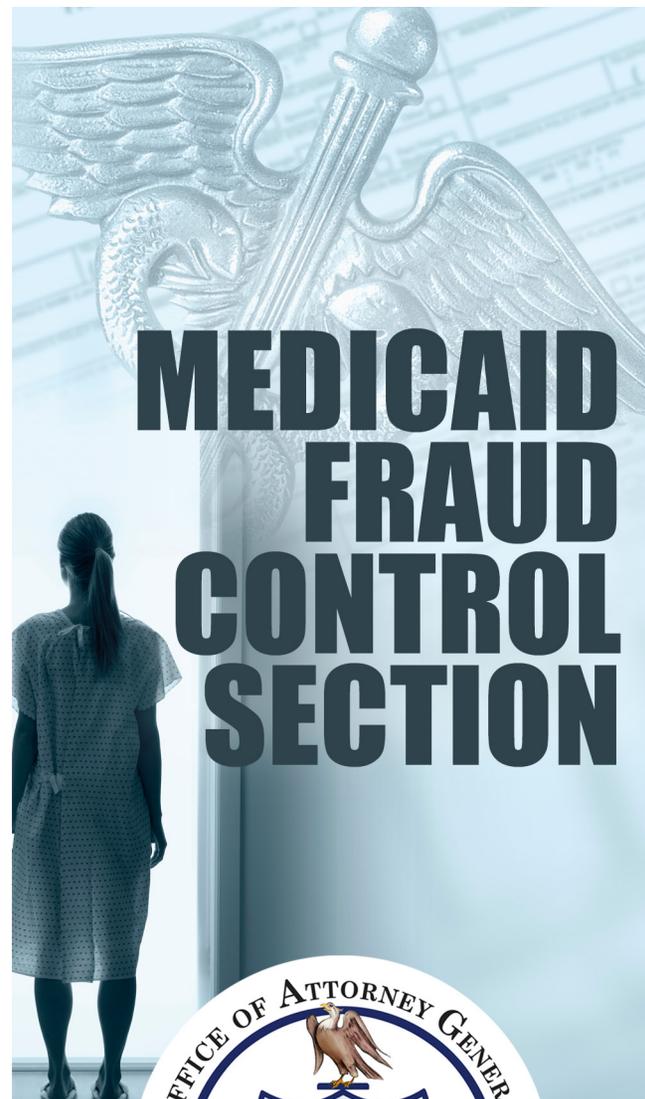
The Medicaid Fraud Control Section also has three regional field offices throughout the Commonwealth: the Western Regional Office, the Central Regional Office, and the Eastern Regional Office. To contact a specific region within the Medicaid Fraud Control Section, please use the following contact information:

Western Regional Office:
10950 Route 30
North Huntingdon, PA 15642
(724) 861-3670

Central Regional Office:
Strawberry Square, 7th Floor
Harrisburg, PA 17120
(717) 712-1220

Eastern Regional Office:
1000 Madison Avenue, Suite 310
Norristown, PA 19403
(610) 631-5920

mfcsintake@attorneygeneral.gov
www.attorneygeneral.gov



Dave Sunday
Attorney General



MEDICAID FRAUD CONTROL SECTION

This section is a part of the Office of Attorney General's Criminal Law Division and is comprised of prosecutors, agents, auditors, forensic data specialists, and analysts housed in three regional offices across the Commonwealth. The Medicaid Fraud Control Section has the authority to file criminal charges against those who defraud the Medicaid program or commit care-dependent neglect, abuse, endangerment or financial exploitation.

The Medicaid Fraud Control Section investigates Medicaid provider fraud. A provider is any individual or business that supplies health care goods and services to Medicaid recipients. Providers can be medical doctors, dentists, nurses, nursing homes, pharmacies, home care aides and agencies, behavioral health specialists, and anyone else who bills Medicaid for providing health care goods and services. Medicaid provides essential medical treatment to the most vulnerable Pennsylvanians at the cost of almost \$45 billion a year. Medicaid Fraud results in the loss of these scarce tax dollars and resources for those most in need of health care assistance.

EXAMPLES OF MEDICAID FRAUD

Anyone can refer a case involving fraud, neglect or abuse to the Medicaid Fraud Control Section - managed care organizations, insurance companies, health care providers, and even concerned citizens provide essential information and investigative leads to the Medicaid Fraud Control Section. The team uses this information to protect Pennsylvanians by prosecuting illegally prescribing doctors, fraudulent home health aides, and neglectful caregivers, among other criminals.

Some examples of Medicaid Fraud include:

- Billing for medical and/or caregiving services not actually performed
- Billing for more expensive services than were actually rendered
- Prescribing medically unnecessary controlled substances
- Claiming to provide behavioral health treatment while failing to meet with clients
- Billing twice for the same medical service
- Referring unnecessary services to another provider
- Dispensing generic drugs and billing for name-brand drugs
- Billing for professional services which are being performed by unlicensed staff
- Filling forged and/or invalid prescriptions

Medicaid is a joint federal and state program that traditionally provides health care benefits to low-income Pennsylvanians, as well as to persons with disabilities or the elderly. Federal law authorizes a Medicaid Fraud Control Section in every state to investigate Medicaid Fraud. The Pennsylvania Office of Attorney General Medicaid Fraud Control Unit regularly partners with local, state, and federal authorities to identify and prosecute Medicaid Fraud throughout the Commonwealth.

PATIENT NEGLECT, ABUSE, AND EXPLOITATION

As the elderly and disabled become more dependent on others for their care, it becomes increasingly important for individuals who accept the position of trust as caregivers of these vulnerable people to be held accountable for neglecting or endangering those in their care. Failure to provide the care and treatment necessary to maintain the welfare of those who depend on that care is every bit as dangerous and harmful as intentional assaultive behavior.

Criminal neglect of a care-dependent person can happen anywhere, including at home or in a long term care facility. It occurs when a caregiver knowingly, intentionally, or recklessly fails to provide treatment, care, goods, or services that are necessary to maintain the health or safety of that person, or endangers that person's well-being through those failures. Abuse of a care-dependent person occurs when a caregiver intentionally strikes, shoves, kicks, or subjects a care-