TRICARE Operation Fraud Watch Tough On Health Care Abuse

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The Department of Defense is proud of its success tracking down and prosecuting health care providers who commit fraud and abuse within the Military Health System and TRICARE.

Beginning in 1998, the Program Integrity Office and the Office of the Inspector General Defense Criminal Investigative Service (DCIS) have worked together to identify and prosecute cases of TRICARE fraud, waste and abuse. For 2001, the dollar amount recovered and returned to DoD as a result of successful prosecution of fraudulent TRICARE payments made to providers was $11.3 million.

"The reduction of fraud and abuse ensures the confidence of the beneficiaries, and taxpayers at large; that we are effective stewards of the taxpayer's money," said Thomas F. Carrato, Executive Director, TRICARE Management Activity (TMA). "It also results in decreased health care costs to both the Department of Defense and our beneficiaries."

The TMA Program Integrity Office refers its provider fraud cases to the DCIS and collaborates with other federal, state and local government agencies to provide technical assistance and expert witness testimony as required for cases being prosecuted. It also serves as the principal point of contact for research and analysis of Department of Defense hotline complaints. "By continuing to share information with other government agencies and the private sector, health care fraud can be brought under control," said Rose Sabo, TMA Chief of Program Integrity.

TRICARE beneficiaries are also key players in assisting the Defense department with wiping out fraud, waste and abuse. A provision of the Federal Civil False Claims Act known as "qui tam," allows private citizens to file lawsuits in the name of the U.S. government to recover lost revenue as a result of fraud.

During 2001, the TMA Program Integrity Office opened 311 new cases, responded to 532 requests for assistance, evaluated 141 new qui tam cases and closed 387 fraud cases. For example, it is considered fraud for a TRICARE participating provider to collect payment from a beneficiary in excess of the CHAMPUS maximum allowable charge, a practice otherwise known as "balance billing."

TMA and the Program Integrity Office are committed to reducing fraud, waste, and abuse and ensuring effective fraud detection. Prevention programs are in place to deter and prosecute those who commit fraud against TRICARE and its beneficiaries.

To report TRICARE fraud, beneficiaries can write to TRICARE Management Activity, Attn: Program Integrity Office, 16401 East Centertech Parkway, Aurora, CO, 80011-9043; or send a fax to (303) 676-3981.

Additional information on TRICARE fraud, waste and abuse is available on the TRICARE web site at: www.tricare.osd.mil/fraud. The site provides visitors with a list of frequently asked

questions, news releases on criminal and civil fraud and abuse cases, and the names of providers who were prosecuted or sanctioned for committing health care fraud against agencies within the Department of Defense.