

# News Clippings

## [7 Tips to Protect Yourself from Fraud](#)

More than \$2.25 trillion is spent on health care in the United States; of that, between \$68 billion to \$225 billion is lost each year because of health care fraud and abuse. And it's not all about losing your insurance card. "The majority of health care fraud is committed by a very small minority of dishonest..."

## [How Insurers Can Combat Fraud](#)

Fraudulent medical schemes are a growing problem in the health and property/casualty insurance sectors. In fact, they are the largest issue facing the industry today. Unfortunately, the volume and expansion rate of medical fraud is uncontrolled in comparison with other property/casualty risks. The Insurance Research Council (IRC) estimates that fraud and abuse losses in the health care industry...

## [High-Tech Tools Offer Hope in the Battle against Health Care Fraud](#)

In 2009, health care fraud will cost the United States as much as \$485,000 per minute, according to statistics from the National Health Care Anti-Fraud Association (NHCAA), which conservatively estimates that at least 3 percent (i.e., \$60 billion) of the \$2 trillion spent...

## [How to Join the Crackdown on Medicare Fraud](#)

Nobody knows exactly how much money is lost to bogus and inflated medical bills every year. The National Health Care Anti-Fraud Association, a public-private partnership, says it could be as much as \$255 billion—enough to cover 60% of the Americans who lack health insurance...

## [Controlling Medical Fraud in Health and P&C Insurance](#)

At the 2009 Insurance Fraud Management Conference (sponsored by ISO and the National Insurance Crime Bureau), one key speaker identified medical schemes as the single most significant fraud issue facing the property/casualty industry this year. Several of the conference breakout sessions...

## [Detect-Stop-Prevent: The Approach to Fighting Health Care Fraud](#)

Quantifying the annual losses attributed to health care fraud and abuse remains a difficult proposition. Given the covert nature of fraud, a definitive number remains elusive, and polling the perpetrators isn't a viable option. According to the National Health Care Anti-Fraud Association (NHCAA), 3 to 10 percent...

## [Identifying Fraud](#)

Preventing fraud, abuse and overpayments is an increasing challenge for payers. The complexity of the healthcare system's billing procedures and frequent code and rules updates presents vulnerabilities and provides many opportunities for billing mistakes. These factors are part of the reason up to \$230...