MEDICARE FRAUD DETECTION

VARIABLES

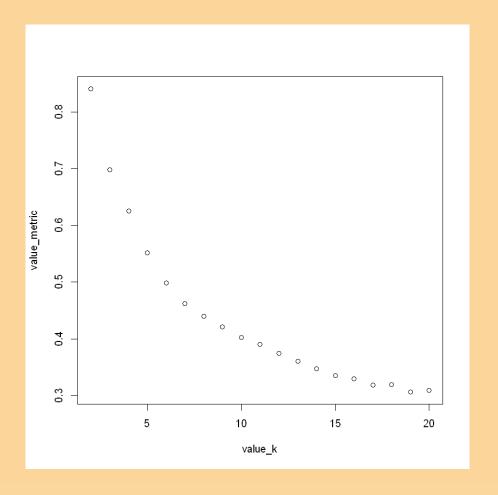
I chose 6 Variables for analysis:

BY City and Provider

- Ratio total discharges
- Ratio average covered charges
- Ratio average total payments
- Ratio average Medicare payments
- Ratio payment to Charge
- percent of DRG by Provider

SCALE VARIABLES train <- scale(data)

OPTIMAL NUMBER OF CLUSTERS



: seg.k\$center

ratio.total.discharges	ratio.average.covered.charges	ratio.average.total.payments	ratio.average.medicare.payments	numberofDRGs	payments.to.charges
0.70946543	-0.72896921	-1.45767616	-1.45736559	0.66870985	-0.21163809
2.92056452	0.13580321	-0.02270212	-0.08523607	0.88576354	-0.15365113
-1.22981191	0.26596396	-1.16627528	-1.17969081	-0.43802038	-0.52150506
-0.74940323	-0.61625450	2.77250128	3.00323848	-0.13549041	0.97252083
0.47613235	0.62379088	1.48189523	1.42798025	0.67299366	-0.09730207
-1.16521543	-1.84640221	-1.32042044	-1.22661996	-0.83888238	0.59484358
-0.10969208	-0.62089171	0.12035116	0.16316999	0.05227521	3.29239188
-0.03690331	-0.24386824	0.04862950	0.06984779	0.49604721	0.57102439
-0.15998824	2.33377012	-0.07240259	-0.16632775	0.22997825	-0.82826117
-0.13501416	0.02642084	0.03885347	0.03930699	-0.88280204	-0.46295266
0.12062027	3.01558200	3.52596442	3.35606259	0.40180904	-0.30162360
-0.16848185	-0.13448829	0.04160576	0.06420949	-1.65553967	0.77656567
0.03007155	0.03672661	-0.01186799	-0.02860994	0.66570463	-0.60121382

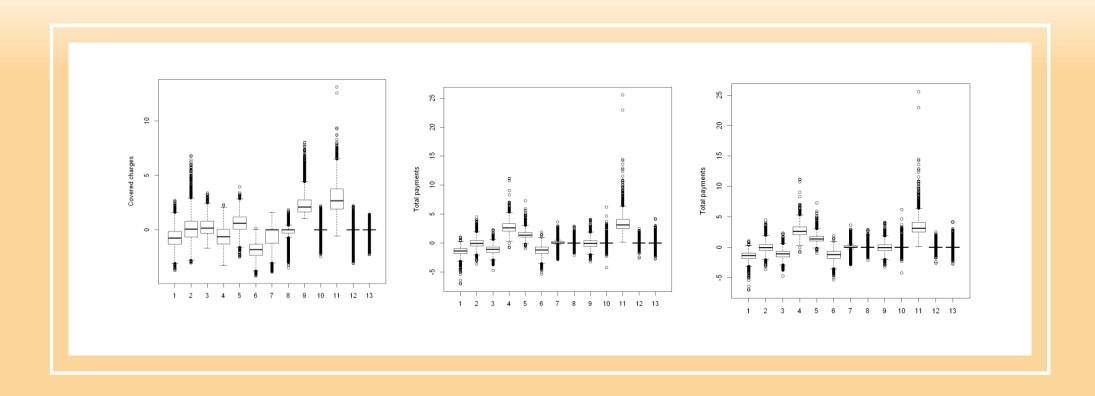
(By examining whether the clusters fall above or below the mean level for each interest category, we can begin to notice patterns that distinguish the clusters from each other.

seg.k[7]

\$size =

9284 6110 8318 3922 7558 6549 5832 22561 6895 26408 2120 15484 42024

13 clusters
(between SS / total SS = 64.4 %)



Centroids of each cluster.

Cluster 11 consists of 2120 observations, which is around 1.3% of the whole observations. have the highest

- "ratio.average.covered.charges"
- · "ratio.average.total.payments"
- "ratio.average.medicare.payments"