

Just how big is healthcare fraud?
The National Health Care
Anti-Fraud Association estimates
at least 3 percent of overall
healthcare costs is due to fraud,
leading to losses of over
\$60 billion in 2005.

Healthcare fraud is a problem
that's growing and making
healthcare more expensive
for everyone. But working
together, we can stop it.

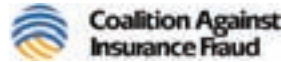
Working together to track healthcare fraud.

BCBSA's National Anti-Fraud Department works with communities nationwide to increase the effectiveness of our overall healthcare fraud management strategy.

We work with federal, state and local law enforcement, and other public and private organizations to find and catch those who commit healthcare fraud.



The Federal Bureau of Investigation
www.fbi.gov



**BlueCross BlueShield
Association**

An Association of Independent
Blue Cross and Blue Shield Plans



One problem.
300 million victims.

What you need to know
about healthcare fraud.



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For more information about healthcare fraud, visit
www.bcbs.com/antifraud.

If you suspect healthcare fraud, call **1.877.327.BLUE (2583)**
or report it on our website.



What is healthcare fraud?

Healthcare fraud is not an innocent mistake, such as a keystroke error on a medical bill. Rather, healthcare fraud is an intentional, unlawful and sometimes repetitive deception that costs every insured American about \$200 per year. That means a family of four pays about \$800 more for healthcare annually because of fraud.

Healthcare fraud takes many forms, including:

- Deliberately submitting or filing false claims.
- Purposely misrepresenting a condition or the types of services provided.
- Intentionally omitting information about a condition, symptoms or services received.
- Using someone else's insurance ID card to receive services.

Healthcare fraud is committed by a very small number of people. Yet the impact is costly and significant, leading to distrust among hospitals, doctors and patients. And it has an adverse affect on your healthcare premiums and co-payments.

In the end, the most potent weapon against healthcare fraud is you.

Call 1.877.327.BLUE (2583) or visit our website at www.bcbs.com/antifraud to report fraudulent activity.

What we're doing to stop healthcare fraud.

The Blue Cross and Blue Shield Association (BCBSA) and its independent licensees embrace fraud prevention and awareness



as essential tools in preserving affordable, quality healthcare. That's why we invest in numerous programs that set the industry standard for healthcare fraud prevention.

- The Blue Cross and Blue Shield Anti-Fraud Task Force works with hospitals, doctors, the National Health Care Anti-Fraud Association, the FBI and other law enforcement agencies to protect you from fraud.
- Each Blue Cross and Blue Shield company has its own investigative unit that actively pursues fraudulent activities and the recovery of premiums wasted on healthcare fraud.
- Our computer and software technology analyzes millions of claims for patterns of suspicious billing activity.

These efforts are making a difference. In 2005, for example, our anti-fraud efforts saved almost \$250 million by resolving or closing over 10,000 cases. We can do more, but only with your help.



How can you help?

There are several ways you can protect yourself while helping to curb fraud:

- Safeguard your insurance ID card and Social Security number.
- Beware of "free" services, especially if you're asked to provide your insurance ID card. The service may not be free and could be fraudulently charged to you or your insurance company.
- Compare your Explanation of Benefits statements to your medical bills to verify the reasons and costs for any services you receive.

We're here if you have any questions.

The Blue Cross and Blue Shield Anti-Fraud Hotlines receive more than 80,000 calls a year. If you suspect fraud, please take a minute to call us at 1-877-327-BLUE (2583) or go to www.bcbs.com/antifraud.

Compare your Explanation of Benefits statements to your bill in order to confirm the services you received.

