



Citizens' Council for Health Freedom

Health Freedom Minute

October 17, 2024

Medicare Advantage Defrauds Taxpayers

The Office of the Inspector General says three Medicare Advantage plans overcharged Medicare \$145 million by exaggerating the severity of patient illnesses. In short, they lied. They committed fraud that allowed them to receive millions in federal “risk adjustment” grants. The OIG found up to 84 percent of the patient diagnoses claimed by health plans were not supported by medical records.

Amazingly, federal HHS regulations limit the amount that can be recouped. So, the OIG suggests payback of just \$11.6 million, or 8 percent of the overpayments. How is it possible they can keep 92 percent?

“Federal Audit Finds Three Insurers Overcharged the Medicare Program,”
Wisconsin Hospital Association, October 3, 2024: bit.ly/400P5Mg

Presented daily by Twila Brase, President and Co-founder
Citizens' Council for Health Freedom.

*The Health Freedom Minute is now heard in 48 states:
Mon-Fri on more than 870 radio stations nationwide*

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