

QUALITY HEALTH PLANS

Asks Members For Help In Preventing Fraud, Waste and Abuse:

Fraud is generally defined as making a false claim in an effort to receive payment. For example, fraud in the healthcare industry can involve:

- “Doctor shopping” – when a patient who may or may not have a legitimate physical ailment goes from doctor to doctor to obtain multiple prescriptions for narcotic painkillers
- Someone obtains prescription drugs from a provider, possibly for a condition from which they do not suffer, and gives or sells this medication to you or someone you know.
- Inappropriate consumption or distribution of a consumer’s medications by a caregiver or anyone else.
- A person uses another person’s Medicare card to obtain services or prescriptions.

To protect yourself from fraud, thoroughly review your Explanation of Benefits (EOB) after you receive healthcare services. If you see something that doesn’t look right, you should report the situation to QHP right away.

Report Fraud, Waste & Abuse

If you suspect fraud, waste, or abuse in the healthcare system, please report it to QHP and we’ll investigate. Your actions may help to improve the healthcare system and reduce costs for our members and those that do business with us.

QHP COMPLIANCE HOTLINE @ 1-877-303-1768

compliance@qualityhealthplansny.com.

Remember all reports of suspected incidences are kept confidential.

