



CONSUMER ALERT

Hospice care is specialized medical care for people who are terminally ill and nearing the end-of-life. Instead of curative treatment for their illness, hospice focuses on making the patient as comfortable as possible until death. Hospice fraud occurs when hospice providers take advantage of the hospice system for financial gain. **This has become an alarming problem that** goes against everything hospice care is meant to be. It can seriously harm patients and costs taxpayers millions of dollars in false billings to Medi-Cal.

What is Hospice Care?

Hospice care is for people expected to live six months or less. Typically, a patient's doctor determines when the patient is terminally ill and then a hospice doctor assumes responsibility for the patient's care. Hospice can be provided in a facility, such as a hospital or nursing home, or in the patient's home. A team of doctors, nurses, counselors, and others work together to provide care. The goal of this team is to help patients live with dignity, receive assistance in activities of daily living, manage pain and other uncomfortable symptoms, support their loved ones, and help with end-of-life planning.

Common Fraud Schemes

In recent years, there has been a huge increase in hospice fraud. Hospice fraud involves intentionally deceptive practices by hospice providers aimed at using the healthcare system for financial gain. These fraud schemes can include:

- Submitting false claims for services not rendered.
- Billing for services that are not medically necessary.
- Engaging in kickback schemes to receive patient referrals.
- Enrolling and billing for patients who do not meet the criteria for hospice care, including those who are not terminally ill.

Impact on Patients and Families

Hospice is intended to be a lifeline for people at the end of life, a way to ease pain, bring comfort, and support families through a difficult time. But when fraud is involved, this thoughtful care becomes a dangerous trap.

Hospice fraud affects patients who are eligible for hospice services by not providing the necessary end-of-life care. Fraudulent hospice companies make enormous profit by providing substandard or no care. Fraudsters make money by not providing pain or other appropriate medications, failing to obtain medical equipment, skimping on caregiver visits, or by failing to provide caregiver visits all together.

Hospice fraud also affects patients who are not eligible for hospice services. When someone is wrongfully enrolled in hospice, they are no longer able to see their primary physician and no longer receive curative treatment. This treatment may include essential medications, medical equipment, and access to their regular doctors. In some cases, this kind of fraud can literally mean the difference between life and death.



While anyone can be a target, these criminals often focus on those least able to speak up: older adults, people with serious illnesses, individuals with limited English skills, or those who don't fully understand what hospice care means. That makes the need to speak up even more important.

Recognizing the Signs of Hospice Fraud

If you or a loved one is receiving hospice care, here are some red flags that could signal fraud:

- **Little or No Care Is Actually Being Provided**
 - The patient isn't getting regular visits from nurses, aides, or caregivers.
 - The patient is not receiving medication, nutrition or other promised services.
 - Scheduled visits are missed often or happen at odd or inconsistent times.
 - The hospice team rarely checks in or is hard to reach.
- **The Patient Doesn't Seem That Sick**
 - The patient was signed up for hospice but doesn't appear to have a life-limiting illness.
 - The person can still do most of their usual daily activities with no major changes.
 - There's no clear diagnosis explaining why hospice was recommended.
- **No One Explained What Hospice Really Is**
 - The family or patient didn't fully understand that hospice is for end-of-life care.
 - Hospice services started without a clear referral or explanation from the patient's regular doctor.
- **You Were Offered Gifts or Incentives**
 - Someone offered you gift cards, groceries, or cash in exchange for signing up.
 - The offer felt too good to be true or came from someone you didn't know.
- **Hospice Stays Are Dragging on Without Updates**
 - The patient has been in hospice care longer than six months with no change or discussion.
 - There's no clear plan for care, and no one is talking about the next steps.
- **Something Feels Off**
 - The staff seems rushed, unprofessional, or poorly trained.
 - You're getting bills or Medi-Cal statements for services that don't match what's happening.
 - You or your loved one feels pressured to stay enrolled, even if it doesn't feel right.

Tips to Protect Against Hospice Fraud:

- **Know the purpose:** Hospice is for terminally ill patients nearing end-of-life.
- **Check with your doctor:** Always consult the patient's regular doctor before agreeing to hospice.
- **Watch for red flags:** Avoid services offered without a referral, or providers offering incentives like gift cards.
- **Ask questions:** Legitimate hospice providers will be transparent about services and billing.

- **Verify providers:** Use licensed, accredited hospice services and check reviews.
- **Understand your benefits:** Know what Medi-Cal or insurance covers to spot false charges.
- **Keep records:** Document all care and compare with insurance statements.
- **Report fraud:** Speak up if anything looks suspicious and report it right away.

To report suspected hospice fraud:

- **Submit Your Complaint On-line at:** <https://oag.ca.gov/dmfea/reporting>
- **Call the Attorney General's Division of Medi-Cal Fraud & Elder Abuse Complaint Line**
Phone Toll-free: (800) 722-0432
- **Send A Written Complaint By Mail**
California Department of Justice
Division of Medi-Cal Fraud Elder Abuse
P.O. Box 944255
Sacramento, CA 94244-2550



oag.ca.gov/dmfea/reporting

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