

A new high-tech command center was recently opened in Baltimore. The command center is intended to assist investigators in their efforts to detect and combat Medicare fraud. The command center features a giant video screen that can display data and photos and also allows for face-to-face communication with investigators throughout the country.

It is estimated that Medicare fraud costs the federal government more than \$60 billion per year. For years, investigators have been involved in a game of “pay and chase,” trying to recover losses after Medicare fraud has been committed. The new anti-fraud command center implements tools used by credit card companies in its efforts to detect fraud committed against Medicare and Medicaid. Investigators will be able to query billing data for suspicious patterns and allow them to better coordinate enforcement efforts throughout the country.

The federal government and the states also rely on private citizens to help combat fraud. An individual or company that suspect fraud committed against the government can “blow the whistle” and become a “whistleblower” in a qui tam (“whistleblower”) suit against the company engaging in the fraud. It is customary for a whistleblower to receive an award of 15-25 percent of the total recovery, known as the “relator’s share,” for stepping forward and exposing the fraud.