Whereas, the FBI defines health fraud scams as including false marketing and impersonation, such as “convincing people to provide their health insurance identification number and other personal information to bill for non-rendered services, steal their identity, or enroll them in a fake benefit plan” and “providing or billing for health services or equipment without a license”; and

Whereas, the National Council on Aging lists health-related scams, such as fraudulent Medicare services, in their top ten scams targeting seniors, with victims losing a median of $800 per Medicare impersonation scam in 2022 (increasing from $500 in 2018); and

Whereas, scams increased during the COVID pandemic, specifically luring older individuals to disclose sensitive information and purchase fraudulent COVID treatments; and

Whereas, in 2021, the FTC reported over 75,000 healthcare-related fraud events, totaling a loss of nearly $20 million by victims, and another 400,000 impersonations of government entities (particularly HHS and CMS officials), resulting in over $1 million in losses; and

Whereas, federal and state officials have warned about increases in scams expected due to Medicaid unwinding as the COVID public health emergency ends; and

Whereas, while scams can build distrust between patients and health professionals or government agencies, studies (including a randomized controlled trial) demonstrate that educational efforts on avoiding scams significantly increase fraud detection by consumers without decreasing trust in legitimate communications; therefore be it

RESOLVED, that our American Medical Association encourage relevant parties to educate patients and physicians on healthcare-related scams, including how to avoid and report them.

(New HOD Policy)

Fiscal Note: Modest - between $1,000 - $5,000

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REFERENCES

RELEVANT AMA POLICY

H-315.983 Patient Privacy and Confidentiality