BENEFICIARY AWARENESS OF MEDICARE FRAUD
OFFICE OF INSPECTOR GENERAL

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Department of Health and Human Services

OFFICE OF INSPECTOR GENERAL

BENEFICIARY AWARENESS OF MEDICARE FRAUD

JUNE GIBBS BROWN
Inspector General

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EXECUTIVE SUMMARY

PURPOSE

To assess Medicare beneficiaries’ current knowledge and awareness of Medicare fraud and to gather information to assist in planning the outreach campaign advertising the Office of Inspector General (OIG) fraud hotline.

BACKGROUND

In 1996, the OIG launched a new initiative called “Outreach.” The primary goal of the outreach initiative is to combat Medicare fraud, waste, and abuse. The initiative involves three primary activities. The first activity was to create a more user-friendly OIG fraud hotline which was implemented in July 1997. The second major activity is to conduct a nationwide outreach campaign to educate beneficiaries and other citizens on Medicare fraud—what it is, how to recognize it, and where to report it. Third, we have developed partnerships with other agencies and organizations also involved in fighting Medicare fraud—the Health Care Financing Administration (HCFA), the Administration on Aging (AoA), and the American Association of Retired Persons (AARP).

AoA and AARP have related activities as part of the outreach campaign. AoA has received funding for two separate grant programs designed as health care anti-fraud outreach programs for older Americans. AARP plans to craft a education campaign to engage its members in the fight against health care fraud.

To gather data for this study, we conducted a telephone survey with 329 Medicare beneficiaries out of a simple random sample of 625.

FINDINGS

Knowledge about Fraud

More than half of beneficiaries believe that Medicare fraud is common. Fifty-three percent of Medicare beneficiaries agree that Medicare fraud is common.

Beneficiaries want to play a role in stopping Medicare fraud. Medicare beneficiaries overwhelmingly agree (94 percent) with the statement, “It is my personal responsibility to report suspected cases of Medicare fraud.”

Most beneficiaries say they read their Explanation of Medicare Benefits. Almost three out of four Medicare beneficiaries (74 percent) say they “always” read their Explanation of Medicare Benefits statements (EOMBs).
However, most Medicare beneficiaries believe that recognizing fraud is difficult. Almost six out of ten beneficiaries (58 percent) disagree with the statement “Medicare fraud is easy to recognize” and an additional 19 percent “don’t know” if Medicare fraud is easy to recognize.

Further, most beneficiaries say they have not received information on Medicare fraud. Only 15 percent of beneficiaries say that they have received or looked for information on Medicare fraud.

Finally, beneficiaries are not aware of agencies working to reduce Medicare fraud. Eighty-eight percent of beneficiaries say they are not aware of any agencies that work to reduce Medicare fraud.

Encountering and Reporting Potential Fraud

Almost one in five beneficiaries say they have encountered potential Medicare fraud. Beneficiaries who were both educated beyond high school and report that they were in fair or poor health were much more likely to have stated that they encountered fraud than all other beneficiaries.

Beneficiaries say they would report suspected Medicare fraud, but many do not when actually faced with a potentially fraudulent situation. Eighty-five percent of beneficiaries say that they would not be reluctant to report Medicare fraud. However, of those surveyed beneficiaries who said they have encountered potential fraud, only 55 percent reported it.

Most beneficiaries are not aware there is a toll-free number to report Medicare fraud. Eighty-six percent of beneficiaries do not know there is a toll-free hotline to report Medicare fraud. Almost one-third (29 percent) say they do not know whom they would contact if they encountered potential Medicare fraud.

If beneficiaries knew more, they would be more likely to report potential fraud. Almost nine out of 10 beneficiaries (89 percent) agree that if they knew more about Medicare fraud, they would be more likely to report it.

Reaching Medicare Beneficiaries through Outreach

Magazine readership is high among beneficiaries. Seventy-two percent of beneficiaries say they read magazines regularly. Over one-third read Modern Maturity, AARP’s magazine, regularly.

A large majority of beneficiaries regularly receive news through mainstream media. Three out of four beneficiaries say they regularly read the newspaper. Eighty percent of beneficiaries say they regularly watch national news on television and 77 percent regularly watch local news. This confirms the possibility of using the mainstream media for the outreach campaign.
Many beneficiaries watch cable television channels for news and entertainment. Nearly two-thirds (62 percent) of beneficiaries say they watch at least one cable channel.

NEXT STEPS

We conducted this survey to prepare for our outreach campaign to educate beneficiaries on Medicare fraud and where to report it. We collected baseline data on Medicare beneficiaries’ current awareness of Medicare fraud and data on the media preferences of beneficiaries.

The survey confirms the need for a campaign to educate beneficiaries. Beneficiaries appear to be on the right track with a large majority saying they already “always” read their EOMBs. Because of the information provided on the EOMB, reviewing EOMB statements is the best way to detect billing errors and potential fraud. However, the survey results suggest that beneficiaries may not know what to look for on their EOMBs. AARP and AoA have ongoing activities to address this. AARP is developing materials to educate beneficiaries about how to spot irregularities on their EOMBs. AoA has funded projects to educate beneficiaries how to read their EOMBs. The survey also found that few beneficiaries know of the existence of a toll-free Medicare fraud hotline number. To address this, we are working with HICFA to begin printing the phone number for the OIG fraud hotline on EOMBs along with a message encouraging beneficiaries to report suspected fraud and abuse.

As we prepare for the launch of the outreach campaign activities, the outreach partners (OIG, AoA, HICFA, and AARP) should keep in mind where beneficiaries receive information. We found that more than half of beneficiaries read AARP’s magazine, Modern Maturity, regularly or sometimes. This makes Modern Maturity an ideal publication in which to print stories and information about Medicare fraud. Further, because the mainstream media has a large following, newspapers and national and local news programs may be effective avenues for certain components of the campaign. Cable television, while not quite as popular as the mainstream media, may also effectively reach beneficiaries and other citizens. AARP is developing public service announcements for broadcast media.

We plan to repeat this survey after the outreach campaign has been underway for a year or two. This will enable us to measure the effect the outreach activities have had on Medicare beneficiaries’ awareness of Medicare fraud.
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INTRODUCTION

PURPOSE

To assess Medicare beneficiaries’ current knowledge and awareness of Medicare fraud and to gather information to assist in planning the outreach campaign advertising the Office of Inspector General (OIG) fraud hotline.

BACKGROUND

Consumer Awareness of Health Care Fraud

Evidence suggests that although consumers believe that health care fraud is rampant, they do not know how they can assist in combating it. In late 1996, the American Association of Retired Persons (AARP) conducted a survey on consumer awareness of general health care fraud and abuse. Overall, the survey found that consumers believe that health care fraud is widespread, and 18 percent said that they had personally experienced health care fraud. Consumers also believe that fraud in Government health care programs (Medicare and Medicaid) is more widespread than in the private sector. Almost 80 percent of consumers are not aware of any efforts to reduce health care fraud. However, the vast majority of survey respondents (85 percent) indicate that they would be inclined to report suspected fraud if they knew more about it.

Office of Inspector General Outreach Initiative

In 1996, the OIG launched a new initiative called “Outreach.” The primary goal of the outreach initiative is to combat Medicare fraud, waste, and abuse. Our first activity was to create a more user-friendly OIG fraud hotline (the toll-free number that people can call to report suspected fraud of the programs of the Department of Health and Human Services). This involved developing a simple menu system and having most callers connect with a person, rather than a recording. We implemented the improved hotline in July 1997.

Next, we plan to conduct a nationwide outreach campaign to educate beneficiaries and other citizens on Medicare fraud—what it is, how to recognize it, and where to report it. The campaign will promote the OIG hotline and educate consumers about its appropriate use. As a first step, we developed partnerships with other agencies and organizations also involved in fighting Medicare fraud—the Health Care Financing Administration (HCFA), the Administration on Aging (AoA), and AARP. Through the assistance of a marketing firm and a number of focus groups, we are designing the campaign and developing a variety of campaign materials, including a logo, poster, brochure, fact sheet, article series, Rolodex card, and public service announcements for print media.
AoA and AARP have related activities as part of the outreach campaign. AoA has received funding for two separate grant programs. Both are designed as health care anti-fraud outreach programs for older Americans. First, the Omnibus Consolidation Appropriations Act of 1997 (P.L. 104-209) established demonstration grants to train retired professionals to teach their peers how to read and interpret their Explanation of Medicare Benefits (EOMBs) statements in order to identify Medicare fraud, waste, and abuse. Twelve grants, referred to as “Harkin grants” because the legislation was offered by Senator Harkin of Iowa, were awarded by AoA in June 1997. Second, under the Health Insurance Portability and Accountability Act (HIPAA), AoA has funded anti-fraud and abuse grants to 15 State agencies on aging. In addition to funding outreach training for aging network staff, these “HIPAA grants” provide for public awareness campaigns.

AARP plans to craft an education campaign to engage its members in the fight against health care fraud. AARP will develop a brochure on health care fraud and the importance of reading Medicare claims statements. AARP will also develop a basic training kit to train volunteers how to teach Medicare beneficiaries about fraud and reading Medicare claims statements. Further, AARP will develop fact sheets about medical areas particularly vulnerable to fraud, such as home health, laboratories, nursing homes, and durable medical equipment. Finally, AARP plans to develop public service announcements for print and broadcast media.

We undertook this study to gather baseline data on Medicare beneficiaries prior to the launch of the various outreach activities. We will repeat this study in 1-2 years. This will enable us to measure the effect the outreach activities have had on beneficiaries’ awareness of Medicare fraud.

**METHODOLOGY**

We conducted a telephone survey of Medicare beneficiaries. Specifically, we selected a simple random sample of 625 Medicare beneficiaries from HCFA’s national claims history file. Of the 625 beneficiaries, we were able to find phone numbers for 467. The sampled beneficiaries had at least one claim submitted to a Medicare Part B carrier during 1996. We excluded beneficiaries currently enrolled in Medicare managed care, beneficiaries enrolled in managed care at some point during 1996, and deceased beneficiaries. We sent personalized letters to each of the 467 Medicare beneficiaries approximately 1 week before we fielded the survey.

We conducted interviews with 329 of the 625 beneficiaries or their proxy for a response rate of 53 percent. Of the 329 interviews, 48 (15 percent) were conducted with a proxy who answered the survey on behalf of the beneficiary when the beneficiary was unable to participate due to illness, cognitive impairment, or a disability that prevented participation. We asked that the proxy respondent be the person who handles the beneficiary’s medical business. Most commonly, proxies were a spouse (48 percent), a child (19 percent), or another family member (25 percent). In the report, when presenting data about “beneficiaries,” we are referring to beneficiaries and proxies. Appendix D presents an analysis of respondents and non-respondents.
We conducted this inspection in accordance with the *Quality Standards for Inspections* issued by the President's Council on Integrity and Efficiency.
KNOWLEDGE OF FRAUD

More than half of beneficiaries believe that Medicare fraud is common.

Our survey results showed 53 percent of sampled Medicare beneficiaries agree that Medicare fraud is common. Of those, 39 percent “strongly agree” and 14 percent “slightly agree.” Fourteen percent disagree that fraud is common. Interestingly, almost one-third (32 percent) “don’t know” if fraud is common.

Beneficiaries want to play a role in stopping Medicare fraud.

While Medicare beneficiaries believe that Medicare fraud is common, they also believe that they have a part to play in stopping it. Medicare beneficiaries overwhelmingly agree (94 percent) with the statement, “It is my personal responsibility to report suspected cases of Medicare fraud.” Further, beneficiaries believe it is worth their while to combat fraud. Just 17 percent of beneficiaries agreed with the statement “It’s not worth the time and effort for me to report and pursue suspected health care fraud.” Finally, 85 percent of beneficiaries said they would not be reluctant to report suspected fraud.

Most beneficiaries say they read their Explanation of Medicare Benefits statements (EOMBs).

Almost three out of four Medicare beneficiaries (74 percent) say they “always” read their EOMBs. Some beneficiaries (44 percent) also get help reading their EOMBs, most commonly from a spouse or a child. Only 11 percent of beneficiaries say they “hardly ever” or “never” read their EOMBs.1

Further, a relationship exists between reading EOMBs regularly and having knowledge about fraud. We define those having knowledge of fraud as beneficiaries who say they have either received information or asked about or looked for information on Medicare fraud.2 We found that 28 percent of beneficiaries who “always” read their EOMBs are knowledgeable about Medicare fraud compared to only 16 percent of beneficiaries who “sometimes” read their EOMBs and only 3 percent of those who “hardly ever” or “never” read their EOMBs. Possibly, the relationship occurs because beneficiaries who are already knowledgeable about fraud know the importance of reading their EOMBs rather than that the beneficiaries become knowledgeable about fraud because they read their EOMBs.
However, most Medicare beneficiaries believe that recognizing fraud is difficult.

The first step to detecting fraud is reviewing one’s EOMB statements. Yet, beneficiaries may not know what they should keep an eye out for. Many do not know how to recognize Medicare fraud. Almost six out of ten beneficiaries (58 percent) disagree with the statement “Medicare fraud is easy to recognize” and an additional 19 percent “don’t know” if Medicare fraud is easy to recognize.

Further, most beneficiaries say they have not received information on Medicare fraud.

Only 15 percent of beneficiaries say they have received or looked for information on Medicare fraud. Of those who received information, 31 percent say they received information from Medicare in some way, such as the Medicare handbook, EOMBs, or from Medicare carriers that process Medicare claims.

<table>
<thead>
<tr>
<th>Source of Information</th>
<th>Percent of Beneficiaries Receiving Information from Source (of those who received information)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare</td>
<td>31%</td>
</tr>
<tr>
<td>AARP</td>
<td>21%</td>
</tr>
<tr>
<td>Newspaper or magazines</td>
<td>19%</td>
</tr>
<tr>
<td>Television or radio</td>
<td>13%</td>
</tr>
<tr>
<td>Other source</td>
<td>27%</td>
</tr>
</tbody>
</table>

Finally, beneficiaries are not aware of agencies working to reduce Medicare fraud.

Beneficiaries may not think to look for Medicare fraud not only because they do not know what to look for, but also because they are not aware that government agencies are interested in stopping Medicare fraud. Eighty-eight percent of beneficiaries say they are not aware of any agencies that work to reduce Medicare fraud. This finding closely mirrors the AARP survey that found 79 percent of consumers were not aware of any efforts to reduce health care fraud.
ENCOUNTERING AND REPORTING POTENTIAL FRAUD

Almost one in five beneficiaries say they have encountered potential Medicare fraud while they have been in the Medicare program.

In our survey of Medicare beneficiaries, 19 percent of respondents report that they have encountered potential Medicare fraud. Ten percent of beneficiaries have encountered a doctor or other health care provider that billed Medicare for services or equipment they did not receive. Seven percent have encountered a doctor or other health care provider that billed Medicare for the same services or equipment more than once.

We analyzed a number of variables to determine which beneficiaries are more likely to encounter fraud, including income level, age, marital status, education level, and self-reported health status. Two factors appear to predict if a beneficiary will encounter fraud—education level and self-reported health status. Beneficiaries were asked to rate their health as either excellent (21 percent), good (36 percent), fair (31 percent), or poor (11 percent). As shown in Table 2 below, beneficiaries who were both educated beyond high school and in fair or poor health were much more likely to report encountering fraud than all other beneficiaries. This probably does not suggest that having a higher educational level leads a person to be a “target” for Medicare fraud. Rather, this could suggest that having a higher educational level may cause a person to be more knowledgeable about potential fraud and abuse situations.

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Self-reported Health Status</th>
<th>Percent Reporting Encountering Potential Fraud</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beyond High School</td>
<td>Fair or Poor</td>
<td>36%</td>
</tr>
<tr>
<td></td>
<td>Excellent or Good</td>
<td>18%</td>
</tr>
<tr>
<td>High School or Less</td>
<td>Fair or Poor</td>
<td>13%</td>
</tr>
<tr>
<td></td>
<td>Excellent or Good</td>
<td>15%</td>
</tr>
</tbody>
</table>

Beneficiaries say they would report suspected Medicare fraud, but many do not when actually faced with a potentially fraudulent situation.

Eighty-five percent of beneficiaries say that they would not be reluctant to report Medicare fraud. However, of those beneficiaries who said they have encountered potential fraud, only 55 percent reported it.
Most beneficiaries are not aware there is a toll-free number to report Medicare fraud.

Eighty-six percent of beneficiaries do not know there is a toll-free hotline to report Medicare fraud. We asked beneficiaries whom they would contact if they encountered Medicare fraud. Almost one-third (29 percent) say they do not know whom to contact. Likewise, if an EOMB showed that Medicare had paid for services or products the beneficiary did not receive, 21 percent of beneficiaries do not know whom to contact.

Beneficiaries have different ideas about where to report potential fraud or problems with their EOMBs. Table 3 shows where beneficiaries say they would report fraud or billing errors. Interestingly, a significantly higher percentage of beneficiaries with suspected errors on their EOMBs (26 percent) would contact their health care provider as opposed to those who believe they have encountered actual fraud (9 percent). This could suggest that beneficiaries are more comfortable checking out billing errors with their physician, rather than accusing their physician of fraud. It could also suggest that beneficiaries do not understand that apparent billing errors on EOMBs could potentially be a fraud or abuse situation.

<table>
<thead>
<tr>
<th>Whom beneficiary would contact</th>
<th>If beneficiary encountered health care fraud (q. 23)</th>
<th>If beneficiary's EOMB showed that Medicare had paid for services or products not received (q. 34)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare/HCFA</td>
<td>27%</td>
<td>28%</td>
</tr>
<tr>
<td>Doctor or hospital who</td>
<td>9%</td>
<td>26%</td>
</tr>
<tr>
<td>committed the fraud/billed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>for services or products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance company that</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td>processes Medicare claims</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Security office</td>
<td>11%</td>
<td>6%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>29%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Of those beneficiaries who had reported a potential fraud, 46 percent reported it to the doctor or hospital that committed the potential fraud. Thirty-three percent of beneficiaries reported the potential fraud to Medicare and 21 percent reported it to their insurance company.
If beneficiaries knew more, they would be more likely to report potential fraud.

Almost nine out of 10 beneficiaries (89 percent) agree that if they knew more about Medicare fraud, they would be more likely to report it.

REACHING MEDICARE BENEFICIARIES THROUGH OUTREACH

To look at the bigger picture, beneficiaries want to play a role in stopping Medicare fraud and have taken the first step by reading their EOMBs, but they are not sure how to recognize fraud and where to report it. Therefore, designing an education campaign to reach them is a natural step. When designing outreach campaign activities to educate beneficiaries and other citizens about recognizing and reporting Medicare fraud, it is important to understand from where they receive information. This understanding can assist in preparing the campaign to reach as many people as effectively as possible.

Magazine readership is high among beneficiaries.

Seventy-two percent of beneficiaries say they read magazines regularly. We asked respondents to identify which magazines they read, and then we categorized the magazines into 12 types of magazines (e.g., news, women’s). Entertainment and general interest magazines are the most popular among respondents with 40 percent saying they read a magazine in that category. News magazines and women’s magazines are also popular with approximately one-quarter of beneficiaries. The chart on the following page shows the most commonly read categories of magazines.

<table>
<thead>
<tr>
<th>Category of magazine</th>
<th>Percent reading “regularly”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entertainment/general interest</td>
<td>40%</td>
</tr>
<tr>
<td>News</td>
<td>25%</td>
</tr>
<tr>
<td>Women’s</td>
<td>23%</td>
</tr>
<tr>
<td>Hobbies/crafts/sports</td>
<td>17%</td>
</tr>
<tr>
<td>Homes &amp; gardens</td>
<td>16%</td>
</tr>
</tbody>
</table>

We specifically asked how often beneficiaries read Modern Maturity, AARP’s magazine. More than half say they read it; 36 percent say “regularly” and 19 percent “sometimes.” Additionally, 30 percent of beneficiaries read AARP’s The Bulletin “regularly” and 15 percent “sometimes.”
A large majority of beneficiaries regularly receive news through mainstream media.

Beneficiaries regularly read the newspaper and watch national and local news. Three out of four beneficiaries say they regularly read the newspaper. Eighty percent of beneficiaries say they regularly watch national news on television and 77 percent regularly watch local news. This confirms the desirability of using the mainstream media, where possible, for the outreach campaign.

Many beneficiaries watch cable television channels for news and entertainment.

Almost two-thirds (62 percent) of beneficiaries say they regularly watch at least one cable channel. Because beneficiaries commonly watch cable television, we should consider cable as a possible avenue for the outreach campaign.
We conducted this survey to prepare for our outreach campaign to educate beneficiaries on Medicare fraud and where to report it. We collected baseline data on Medicare beneficiaries’ current awareness of Medicare fraud and data on the media preferences of beneficiaries.

The survey confirms the need for a campaign to educate beneficiaries. Beneficiaries appear to be on the right track with a large majority saying they already “always” read their EOMBs. Because of the information provided on the EOMB, reviewing EOMB statements is the best way to detect billing errors and potential fraud. However, the survey results suggest that beneficiaries may not know what to look for on their EOMBs. As mentioned earlier, AARP and AoA have ongoing activities to address this. AARP is developing materials to educate beneficiaries about how to spot irregularities on their EOMBs. AoA has funded projects to educate beneficiaries how to read their EOMBs. The survey also found that few beneficiaries know of the existence of a toll-free Medicare fraud hotline number. To address this, we are working with HCFA to begin printing the phone number for the OIG fraud hotline on EOMBs along with a message encouraging beneficiaries to report suspected fraud and abuse.

As we prepare for the launch of the outreach campaign activities, the outreach partners (OIG, AoA, HCFA, and AARP) should keep in mind where beneficiaries receive information. We found that more than half of beneficiaries read AARP’s magazine, Modern Maturity, regularly or sometimes. This makes Modern Maturity an ideal publication in which to print stories and information about Medicare fraud. Further, because the mainstream media has a large following, newspapers and national and local news programs may be effective avenues for certain components of the campaign. Cable television, while not quite as popular as the mainstream media, may also effectively reach beneficiaries and other citizens. AARP is developing public service announcements for broadcast media.

We plan to repeat this survey after the outreach campaign has been underway for a year or two. This will enable us to measure the effect the outreach activities have had on Medicare beneficiaries’ awareness of Medicare fraud.
ENDNOTES

1. In the 11 percent, we included those beneficiaries who also said they "don't know" how often they read their EOMBs.

2. Beneficiaries defined to be "knowledgeable about Medicare fraud" are those who answered "yes" to survey questions 19, 21, or 25. See appendix A for survey questions.

3. To calculate the percentage of beneficiaries who have received or have asked or looked for information on Medicare fraud, we added the results of survey questions 19 and 21. When a beneficiary said "yes" to both questions, we counted that response only once. See appendix A for survey questions.

4. To calculate the percentage of beneficiaries who have received or have asked or looked for information on Medicare fraud from a variety of sources, we added the results of survey questions 20 and 21A. When a beneficiary said he or she received information from the same source for both questions, we counted that response only once. See appendix A for survey questions.

5. To calculate the percentage of beneficiaries encountering potential fraud, we added the results of survey questions 14, 15a, 15b, 15c, and 18 when a beneficiary had a "yes" answer to one or more of the questions. Each beneficiary with more than one "yes" response was counted only once. See appendix A for survey questions.
### APPENDIX A

**Telephone Survey Instrument and Frequencies**

n=329 respondents

**MEDIA OUTREACH:**

1. I'd like to know how often, if ever, you read certain types of publications, listen to the radio, or watch certain types of TV shows. How often do you ...? Would you say regularly, sometimes, hardly ever, or never. **(IF NECESSARY, READ SCALE FOR EACH QUESTION)**

<table>
<thead>
<tr>
<th></th>
<th>Regularly</th>
<th>Sometimes</th>
<th>Hardly Ever</th>
<th>Never</th>
<th>Don't know</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A. Read a newspaper</td>
<td>75%</td>
<td>11%</td>
<td>5%</td>
<td>8%</td>
<td>0%</td>
<td>1%</td>
</tr>
<tr>
<td>1B. Watch NATIONAL news</td>
<td>80</td>
<td>13</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>1C. Watch LOCAL news</td>
<td>77</td>
<td>14</td>
<td>5</td>
<td>3</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>1D. Watch television talk shows such as Oprah, Rosie O'Donnell, or Geraldo</td>
<td>13</td>
<td>19</td>
<td>23</td>
<td>43</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>1E. Listen to public radio shows that invite listeners to call in to discuss current events, public issues, and politics</td>
<td>16</td>
<td>17</td>
<td>15</td>
<td>51</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

2. Which of the following cable channels, if any, do you watch regularly? Do you watch...?

**INTERVIEWER: IF NO CABLE, ENTER NO FOR ALL**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>2A. A&amp;E (Arts &amp; Entertainment Network)</td>
<td>37</td>
<td>58</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>2B. The Family Channel</td>
<td>41</td>
<td>55</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2C. Lifetime</td>
<td>31</td>
<td>65</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>2D. Discovery Channel</td>
<td>49</td>
<td>49</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2E. USA</td>
<td>40</td>
<td>57</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2F. CNN</td>
<td>56</td>
<td>42</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>
3. Are there any magazines that you read regularly?
   72__ Yes (CONTINUE WITH Q3A)
   27__ No (SKIP TO Q4)
   0__ Don’t Know (SKIP TO Q4)
   1__ Refused (SKIP TO Q4)

3A. Which magazines?

(DO NOT ASK) INTERVIEWER SHOULD CATEGORIZE. SELECT ONLY ONE CATEGORY PER MAGAZINE: Which categories do they tend to fall under?

25__ News
23__ Women’s
54__ Seniors’
16__ Homes & Gardens
17__ Hobbies/Crafts/Sports
8__ Literary/Arts & Science
40__ Entertainment/General Interest
8__ Nature/Environment
8__ Health & Nutrition
2__ Regional/Metropolitan/Local
5__ Consumer
3__ Business/Financial
19__ Other

<table>
<thead>
<tr>
<th></th>
<th>Regularly</th>
<th>Sometimes</th>
<th>Hardly Ever</th>
<th>Never</th>
<th>Don’t Know</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>36</td>
<td>19</td>
<td>6</td>
<td>36</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><strong>Modern Maturity</strong>, a magazine produced by AARP (American Association of Retired Persons)? Would you say...</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>30</td>
<td>15</td>
<td>8</td>
<td>43</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><strong>AARP’s monthly newspaper called The Bulletin? Would you say...</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
6. Are you employed at a regular full-time job, employed at a part-time job, unemployed, retired, or a homemaker? (RECORD ALL MENTIONS)

- 6 full-time job
- 5 part-time job
- 4 unemployed
- 72 retired
- 10 homemaker
- 2 "on disability"
- 2 other; specify ____________________________
- 0 don't know
- 1 refused

MEDICARE FRAUD. INTERVIEWER Reads: Now I am going to ask you some questions about Medicare fraud. First, I'm going to read several statements and then ask you whether you agree or disagree with each statement. FOR PROXY RESPONDENTS ONLY: Your answers should be about your attitudes.

The first statement is ____________. AFTER INTERVIEWEE responds with AGREE OR DISAGREE, ASK: Would that by slightly or strongly?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree strongly</th>
<th>Agree slightly</th>
<th>Disagree slightly</th>
<th>Disagree strongly</th>
<th>Don't Know</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. It's my personal responsibility to report suspected cases of Medicare fraud.</td>
<td>85</td>
<td>9</td>
<td>2</td>
<td>1</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>9. It's not worth the time and effort for me to report and pursue suspected health care fraud.</td>
<td>12</td>
<td>5</td>
<td>14</td>
<td>64</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>10 If I knew more about Medicare fraud, I would be more likely to report it.</td>
<td>71</td>
<td>17</td>
<td>4</td>
<td>2</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>11 Medicare fraud is easy to recognize.</td>
<td>13</td>
<td>9</td>
<td>22</td>
<td>37</td>
<td>19</td>
<td>1</td>
</tr>
<tr>
<td>12 Medicare fraud is common.</td>
<td>39</td>
<td>14</td>
<td>7</td>
<td>7</td>
<td>32</td>
<td>1</td>
</tr>
</tbody>
</table>
13. Are you aware of any agencies that work to reduce Medicare fraud?
   12 Yes (CONTINUE WITH Q13A)
   85 No (SKIP TO Q14)
   3_ Don't Know (SKIP TO Q14)
   1_ Refused (SKIP TO Q14)

13a. Do you remember who they are? (RECORD ALL MENTIONS)
   42_ federal government; General response (ASK: Which agency or department?)
   16_ The federal government: Medicare Program/HCFA
   5_ The federal government: HHS Office of the Inspector General
   5_ The federal government: Justice Department
   3_ The federal government: FBI
   5_ State government: General response (ASK: Which agency or department?)
   3_ The American Hospital Association
   37_ AARP
   8_ Newspapers/media
   5_ Other; please specify ______________________
   13_ Don't know
   0_ Refused

INTERVIEWER READS: Now I'm going to ask you a few questions about your experiences with Medicare. FOR PROXY RESPONDENTS: For these next questions, you should answer about Mr/Mrs___________'s experiences with the Medicare program.

14. While you have been in the Medicare program, do you think you have ever encountered fraud?
   13_ Yes (GO TO Q14A)
   76_ No (SKIP TO Q15)
   10_ Don't Know (SKIP TO Q15)
   1_ Refused (SKIP TO Q15)

14A. Can you briefly describe the fraud for me?

14B. Did you report the fraud?
   55_ Yes (GO to Q14C)
   43_ No (SKIP TO Q15)
   2_ Don't Know (SKIP TO Q15)
   0_ Refused (SKIP TO Q15)
14C. Whom did you report it to? (DO NOT READ. RECORD ALL MENTIONS)

46. The doctor or hospital that committed the fraud.
4. A doctor who did not commit the fraud
21. The insurance company that processes your Medicare claims
4. OIG Fraud Hotline
33. Medicare/ HCFA
17. Other (Please specify _________________)
8. Don't know
0. Refused

15. While you have been in the Medicare program, (READ FOR EACH QUESTION) do you think you have ever encountered...

15A. A doctor or other health care provider that billed Medicare for the same services or equipment more than once?

6. Yes
83. No
11. Don't Know
1. Refused

15B. A doctor or other health care provider that billed Medicare for services or equipment you did not receive?

9. Yes
83. No
8. Don't Know
1. Refused

15C. Health care providers sending you equipment that was not ordered by your doctor?

1. Yes
95. No
3. Don't Know
1. Refused

16. Has anyone offered you medical equipment and said that Medicare would pay for it, and it would not cost you anything?

6. Yes (CONTINUE WITH Q16A)
92. No (SKIP TO Q17)
2. Don't Know (SKIP TO Q17)
1. Refused (SKIP TO Q17)

16A. What equipment was offered?

A - 5
16B. How were you offered the equipment? (DO NOT READ. RECORD ALL MENTIONS)
   11. By telephone
   11. By mail
   11. In a medical supply store
   42. Doctor or other health care provider/doctor’s office
   26. Other ____________
   5. Don't Know
   0. Refused

17. Has anyone offered you free medical services or tests?
   9. Yes (CONTINUE WITH Q17A-D)
   90. No (SKIP TO Q18)
   0. Don't Know (SKIP TO Q18)
   1. Refused (SKIP TO Q18)

17A. What service or test was offered? (DO NOT READ. RECORD ALL MENTIONS)
   21. Cholesterol
   21. Blood pressure
   7. Foot care
   18. Flu shot
   57. Other ____________________
   11. Don't know
   0. Refused

17B. Where were you offered the service or test? (DO NOT READ. RECORD ALL MENTIONS)
   7. In a shopping mall
   7. At a Health Fair/Expo
   21. At a Senior Center
   14. By telephone
   18. By doctor or other health care provider/Dr’s office
   39. Other; please specify__________________
   4. Don't Know
   0. Refused

17C. Did you take the service?
   57. Yes (CONTINUE WITH Q17D)
   43. No (SKIP TO Q18)
   0. Don't Know (SKIP TO Q18)
   0. Refused (SKIP TO Q18)
17D. Did you have to give your Medicare number to the person providing the free service or test?

- Yes (38)
- No (38)
- Don't Know (19)
- Refused (6)

18. (IF ANSWERED YES TO 15 A-C, 16, OR 17D) Were you suspicious of any of the situations or suspect that they involved Medicare fraud?

- Yes (43) (CONTINUE WITH 18A)
- No (45) (SKIP TO Q19)
- Don't Know (9) (SKIP TO Q19)
- Refused (4) (SKIP TO Q19)

18A. What was the situation?

ACCESS TO INFORMATION ON MEDICARE FRAUD: INTERVIEWER READS: Now I'm going to ask a few question about information on Medicare fraud. FOR PROXY RESPONDENTS: You should answer these questions about your own experiences.

19. Have you ever received information on how to recognize Medicare fraud?

- Yes (11) (CONTINUE WITH Q20)
- No (81) (SKIP TO Q21)
- Don't Know (8) (SKIP TO Q21)
- Refused (1) (SKIP TO Q21)

20. Who provided you with information on how to recognize Medicare fraud? (DO NOT READ, RECORD ALL MENTIONS)

- Medicare/HCFA/Medicare Handbook (22)
- Insurance company that processes your Medicare claims (5)
- Social Security office (5)
- Doctor or other health care provider/Doctor's office (3)
- Local senior center or seniors' group (3)
- TV (8)
- Radio programs (5)
- AARP (22)
- Newspaper (11)
- Other; please specify _____________________________ (19)
21. Have you ever *asked about or looked for* information concerning Medicare fraud?

- 5__ Yes (CONTINUE WITH Q21A AND SKIP Q22)
- 93__ No (SKIP TO Q22)
- 1__ Don't Know (SKIP TO Q22)
- 1__ Refused (SKIP TO Q22)

21A. *Where* did you ask about or look for information about Medicare fraud? *(DO NOT READ LIST. RECORD ALL MENTIONS.)*

- 19__ Medicare /HCFA/ Medicare Handbook
- 13__ Medical claims statements
- 6__ Insurance company that processes your Medicare claims
- 6__ Consumer organizations
- 6__ Doctor or other health care provider/Doctor's office
- 13__ TV
- 6__ Radio programs
- 19__ AARP
- 38__ Newspapers
- 19__ Magazines
- 6__ Other; please specify __________________________
- 6__ Don't Know
- 0__ Refused

22. *Where* would you be *most likely to look* for information about Medicare fraud? *(DO NOT READ. RECORD ALL MENTIONS.)*

- 10__ Medicare/ HCFA/ Medicare Handbook
- 11__ Medical claims statements
- 3__ Insurance company that processes your Medicare claims
- 1__ Insurance company that issues your supplemental (Medigap) policy
- 1__ Consumer organizations
- 2__ Government agencies-general
- 8__ Social Security office
- 7__ Doctor or other health care provider/Doctor's office/Hospital
1. Phone book/Yellow pages
2. Local senior center or seniors' group
5. TV
2. Radio programs
6. AARP
1. Internet or World Wide Web
8. Newspapers
4. Library
4. Magazines
3. Other; please specify ________________
37. Don't Know
3. Refused
2. I would not look for information

23. If you encountered health care fraud in the Medicare program, whom would you contact? (DO NOT READ. RECORD ALL MENTIONS.)

9. The doctor or hospital that committed the fraud.
3. A doctor who did not commit the fraud
10. The insurance company that processes your Medicare claims
3. The insurance company that issues your supplemental (Medigap) policy
1. OIG Fraud Hotline
27. Medicare/HCFA
1. AARP
11. Social Security Office
1. Police
3. Attorney general or district attorney
3. Congressperson or other elected representative
5. Other Government agency (other than those listed above)
1. Phone number on EOMB
2. Other (Please specify ____________________)
29. Don't know/I would not know who to call
2. Refused
24. Would you be reluctant to report suspected Medicare fraud?
   11. Yes (CONTINUE WITH Q24A)
   85. No (SKIP TO Q25)
   3. Don't Know (SKIP TO Q25)
   2. Refused (SKIP TO Q25)

24A. What would make you reluctant to report fraud? (DO NOT READ. RECORD ALL MENTIONS.)
   9. I would lose my benefits
   11. My doctor might get in trouble
   6. I'm not sure what fraud is
   9. I don't know whom to contact
   3. I don't have the time
   6. It's not worth the effort
   20. I would want to be sure it is fraud
   9. I'm concerned about retaliation from doctor
   14. Don't want to get involved
   14. Other
   11. Don't know
   6. Refused

25. Are you aware there is a toll free hotline to report Medicare fraud?
   13. Yes (CONTINUE WITH Q26)
   83. No (SKIP TO Q31)
   2. Don't Know (SKIP TO Q31)
   1. Refused (SKIP TO Q31)

26. How did you hear about the hotline? (RECORD ALL MENTIONS)
   12. Medical claims statements
   9. Insurance company that processes your Medicare claims
   2. Social Security office
   2. Doctor or other health care provider/Doctor's office
   2. Local senior center or seniors' group
   14. TV
27. Did you ever call the hotline?
   12_ Yes (CONTINUE WITH Q28)
   86 No (SKIP TO Q31)
   0_ Don't Know (SKIP TO Q31)
   2_ Refused (SKIP TO Q31)

28. Were the recorded message and instructions on the hotline understandable?
   60_ Yes
   0_ No
   40_ Don't Know/ Don't remember
   0_ Refused

29. Was the operator courteous?
   100 Yes
   0_ No
   0_ Don't Know/ Don't remember
   0_ Refused

30. How satisfied were you with the how your call was handled? Would you say you were very satisfied, somewhat satisfied, somewhat unsatisfied, or very unsatisfied?
   60_ Very satisfied
   20_ Somewhat satisfied
   0_ Somewhat unsatisfied
   0_ Very unsatisfied
   20_ Don't Know/ Don't remember
   0_ Refused
MEDICARE EOMBS:

INTERVIEWER READS: Now I am going to ask questions about your experiences with Medicare claims and your Explanation of Medicare Benefits Statements (EOMB), that is the statements that Medicare sends out after a claim is filed. FOR PROXY RESPONDENTS ONLY: These next questions should be answered about your experiences with Mr/Mrs _________'s Medicare claims and statements.

31. How frequently do you read your Explanation of Medicare Benefits Statement? Would you say always, sometimes, hardly ever, or never?
   - 74 _ Always
   - 13 _ Sometimes
   - 4 _ Hardly ever
   - 4 _ Never
   - 3 _ Don't Know
   - 2 _ Refused

32. Does anyone else, such as a family member, friend, or professional, also read these Explanation Of Medicare Benefits statements?
   - 44 _ Yes (CONTINUE WITH Q32A)
   - 50 _ No (SKIP TO Q33)
   - 4 _ Don't Know (SKIP TO Q33)
   - 2 _ Refused (SKIP TO Q33)

32A. Who is that person? (RECORD ALL MENTIONS)
   - 70 _ spouse
   - 18 _ son/daughter
   - 1 _ parent
   - 1 _ doctor
   - 2 _ friend
   - 7 _ other _____________
   - 0 _ don't know
   - 1 _ refused
33. Do you read anyone else's Explanation Of Medicare Benefits?
   36_ Yes (GO TO 33A)
   62_ No (GO TO 34)
   0_ Don't Know (GO TO 34)
   2_ Refused (GO TO 34)

33A. Whose do you read? (RECORD ALL MENTIONS)
   13_ my own
   69_ spouse
   6_ parent
   5_ friend
   3_ sibling
   9_ other relative
   6_ other
   0_ don't know
   0_ refused

34. If your Explanation of Medicare Benefits Statement showed that Medicare had paid for services
    or products you did not receive, whom would you contact? (DO NOT READ. RECORD ALL
    MENTIONS.)
   26_ The doctor or hospital that billed for the services or products
   2_ A doctor who did NOT bill for the services or products
   12_ The insurance company that processes your Medicare claims
   2_ The insurance company that issues your supplemental (Medigap) policy
   8_ OIG Fraud Hotline
   28_ Medicare/ HCFA
   2_ I would consult a family member or a close friend
   6_ Social Security Office
   1_ Attorney general or district attorney
   2_ Other Government agency (other than those listed above)
   2_ Phone number on EOMB
   2_ Other (Please specify ______________________)
   21_ Don't know/ I would not know who to call/contact
   1_ Refused
DEMOGRAPHIC INFORMATION

INTERVIEWER READS: Finally, I'd like to ask a few questions for statistical purposes only. As I said earlier, your answers will be completely confidential. FOR PROXY RESPONDENTS ONLY: These next questions should be answered about Mr/Mrs. ________________.

35. What is the highest level of education you completed?
   19. completed less than 9th grade
   8. up to and through 11th grade
   34. high school graduate
   17. Some College
   3. Associates Degree
   9. Bachelors Degree
   0. Some Graduate School
   8. Graduate or Professional Degree
   1. Don't Know
   2. Refused

36. How would you describe your racial or ethnic background?
   86. White/Caucasian
   5. Black/African American
   0.3 Asian or Pacific Islander (1 beneficiary)
   3. Hispanic
   0.6 Native American or Alaskan Native (2 beneficiaries)
   1. Other--please specify ____________
   1. Don't Know
   3. Refused

37. What year were you born in? ____________
   ___ don't know
   ___ refused
38. What is your current marital status? (IF NECESSARY, Are you now married, widowed, divorced, separated, single, or living as married?)
   59  Married
   27  Widowed
   5   Divorced
   0   Separated
   6   Single
   0   Living as married
   0   Don't Know
   1   Refused

39. What type of residence do you live in?
   90  Private Home/Private Apartment
   4   Congregate Senior Housing (assisted living, senior apartment building, retirement community)
   4   Nursing Home (IF YES, SKIP TO Q41)
   0   Other ______________
   0   Don't Know
   2   Refused

40. Do you live alone, (just with your spouse/partner), or do you (and your spouse/partner) live with other people?
   29  Alone
   53  Just with Spouse/Partner
   7   With Spouse/Partner and Others
   8   Live with Others (includes living with grown children)
   0   Don't know
   3   Refused
41. How would you rate your health? Would you rate it as excellent, good, fair, or poor?
   21. Excellent
   36. Good
   31. Fair
   11. Poor
   0. Don't Know
   2. Refused

42. And finally, approximately what is your total annual family income before taxes -- just tell me when I get to the right category. (READ)
   18. Less than $10,000
   25. $10,000 to under $20,000
   18. $20,000 to under $30,000
   11. $30,000 to under $40,000
   7. $40,000 to under $60,000
   5. $60,000 to under $100,000
   2. $100,000 or more
   5. Don't know
   10. Refused

(NOTE TO INTERVIEWER: If respondent is a proxy, continue with Q43. If there is no proxy, END THE SURVEY.)

FOR PROXY RESPONDENTS ONLY. INTERVIEWER READS: Finally, I want to ask you just a few questions about yourself.

43. What is your relationship to Mr/Mrs_______ (the Medicare beneficiary)? (i.e., are you his/her ________?)
   48. Spouse
   19. Child
   25. Other Family Member
   4. Friend
   4. Other ________
   0. Don't know
   0. Refused
44. About how often do you see or talk to Mr/Mrs. __________ (the Medicare beneficiary)?
   67. Daily
   19. Several times a week
   6. Once a week
   4. Twice a month
   4. Monthly
   0. Less than monthly
   0. Don't know
   0. Refused

45. What is the highest level of education you completed?
   13. through 8th grade
   6. through 11th grade
   19. high school graduate
   31. Some College
   0. Associates Degree
   21. Bachelors Degree
   2. Some Graduate School
   4. Graduate or Professional Degree
   0. Don't Know
   4. Refused

46. And finally, what year were you born in? _______
   ____ Don't Know
   ____ Refused

47. Proxy's gender
   40. Male
   60. Female
## Appendix B

### Baseline Statistics

The following tables show the point estimates and 95 percent confidence intervals for selected baseline statistics that will be tracked over time.

<table>
<thead>
<tr>
<th>Baseline Statistic</th>
<th>Point Estimate</th>
<th>95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of Medicare beneficiaries who always read their EOMBs</td>
<td>74%</td>
<td>69% - 79%</td>
</tr>
<tr>
<td>Percent of Medicare beneficiaries who are knowledgeable about fraud</td>
<td>23%</td>
<td>19% - 28%</td>
</tr>
<tr>
<td>(&quot;knowledgeable&quot; defined as answering &quot;yes&quot; to survey questions 19, 21, or 25)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of beneficiaries who are not aware of any agencies that work to reduce</td>
<td>88%</td>
<td>84% - 91%</td>
</tr>
<tr>
<td>Medicare fraud</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of beneficiaries who do not know there is a toll-free hotline to report</td>
<td>86%</td>
<td>82% - 89%</td>
</tr>
<tr>
<td>Medicare fraud</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Of Medicare beneficiaries who say they have encountered potential fraud, percent</td>
<td>55%</td>
<td>40% - 69%</td>
</tr>
<tr>
<td>who reported it.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In addition to the baseline statistics shown in appendix B, the following table shows the point estimates and 95 percent confidence intervals for other selected statistics in the order they appear in the report.

<table>
<thead>
<tr>
<th>Statistic</th>
<th>Point estimate</th>
<th>95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of Medicare beneficiaries who agree that Medicare fraud is common</td>
<td>53%</td>
<td>48% - 58%</td>
</tr>
<tr>
<td>Percent of Medicare beneficiaries who agree with the statement “It is my personal responsibility to report suspected cases of Medicare fraud.”</td>
<td>94%</td>
<td>91% - 96%</td>
</tr>
<tr>
<td>Percent of beneficiaries who agree with the statement, “It’s not worth the time and effort for me to report and pursue suspected health care fraud.”</td>
<td>17%</td>
<td>13% - 21%</td>
</tr>
<tr>
<td>Of beneficiaries who always read their EOMBs, percent who are knowledgeable about fraud</td>
<td>28%</td>
<td>23% - 34%</td>
</tr>
<tr>
<td>Of beneficiaries who sometimes read their EOMBs, percent who are knowledgeable about fraud</td>
<td>16%</td>
<td>5% - 27%</td>
</tr>
<tr>
<td>Of beneficiaries who hardly ever or never read their EOMBs, or who did not know how often they read their EOMBs, percent who are knowledgeable about fraud</td>
<td>3%</td>
<td>0% - 8%</td>
</tr>
<tr>
<td>Percent of beneficiaries who disagree with the statement, “Medicare fraud is easy to recognize.”</td>
<td>58%</td>
<td>53% - 64%</td>
</tr>
<tr>
<td>Percent of beneficiaries who “don’t know” whether they agree or disagree with the statement, “Medicare fraud is easy to recognize.”</td>
<td>19%</td>
<td>14% - 23%</td>
</tr>
<tr>
<td>Percent of beneficiaries who have received or looked for information on Medicare fraud (answered &quot;yes&quot; to questions 19 or 21)</td>
<td>15%</td>
<td>11% - 18%</td>
</tr>
<tr>
<td>Percent of beneficiaries who say that they have encountered potential Medicare fraud (answered &quot;yes&quot; to questions 14, 15a, 15b, or 18)</td>
<td>19%</td>
<td>15% - 23%</td>
</tr>
<tr>
<td>Percent of beneficiaries who have encountered a doctor or other health care provider that billed Medicare for services or equipment they did not receive (based on answers to questions 14a and 15b)</td>
<td>10%</td>
<td>7% - 13%</td>
</tr>
<tr>
<td>Statistic</td>
<td>Point estimate</td>
<td>95% confidence interval</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>Percent of beneficiaries who have encountered a doctor or other health care provider that billed Medicare for the same services or equipment more than once (based on answers to questions 14a and 15a)</td>
<td>7%</td>
<td>4% - 9%</td>
</tr>
<tr>
<td>Of beneficiaries with both (1) an education beyond high school and (2) &quot;fair&quot; or &quot;poor&quot; health, percent that encountered potential fraud</td>
<td>36%</td>
<td>24% - 49%</td>
</tr>
<tr>
<td>Of beneficiaries with both (1) an education beyond high school and (2) &quot;excellent&quot; or &quot;good&quot; health, percent that encountered potential fraud</td>
<td>18%</td>
<td>10% - 27%</td>
</tr>
<tr>
<td>Of beneficiaries with both (1) high school education or less and (2) &quot;fair&quot; or &quot;poor&quot; health, percent that encountered potential fraud</td>
<td>13%</td>
<td>5% - 20%</td>
</tr>
<tr>
<td>Of beneficiaries with both (1) high school education or less and (2) &quot;excellent&quot; or &quot;good&quot; health, percent that encountered potential fraud</td>
<td>15%</td>
<td>8% - 21%</td>
</tr>
<tr>
<td>Percent of beneficiaries who say they would not be reluctant to report Medicare fraud</td>
<td>85%</td>
<td>81% - 89%</td>
</tr>
<tr>
<td>Percent of beneficiaries who “don’t know” whom they would contact if they encountered Medicare fraud.</td>
<td>29%</td>
<td>24% - 34%</td>
</tr>
<tr>
<td>Percent of beneficiaries who would contact their health care provider if they suspected errors on their EOMBs</td>
<td>26%</td>
<td>22% - 31%</td>
</tr>
<tr>
<td>Percent of beneficiaries who would contact their health care provider if they encountered fraud</td>
<td>9%</td>
<td>6% - 12%</td>
</tr>
<tr>
<td>Percent of Medicare beneficiaries who agree that if they knew more about Medicare fraud, they would be more likely to report it.</td>
<td>89%</td>
<td>85% - 92%</td>
</tr>
</tbody>
</table>
APPENDIX D

Analysis of Respondents Versus Non-respondents

We compared survey respondents with both survey non-respondents and the population of Medicare fee-for-service beneficiaries using the following four variables: (1) age the beneficiary attained during 1996; (2) gender of the beneficiary; (3) race of the beneficiary; and (4) total amount Medicare paid during 1996 on behalf of the beneficiary. We found that respondents differed from non-respondents by age and race but not by gender or total Medicare payment. Similarly, we found that the respondents were representative of the fee-for-service Medicare population by gender and payment category but were not entirely representative by age and race.

In the tables in this appendix, the "All fee-for-service Medicare beneficiaries" column displays statistics that we calculated from a 1-percent sample of Medicare claims for services provided during calendar year 1996. In calculating these statistics, we excluded beneficiaries who died during 1996. In these tables, the sums of individual percents may not exactly equal 100 percent because of rounding.

ANALYSIS BY AGE

While the difference between respondents and non-respondents in the average (mean) age was not statistically significant, the difference by age group was significant. The under-65 and 85-and-older age groups are under-represented among the respondents, while the age 65 to 75 group is over-represented.

Respondents vs. non-respondents by average age

<table>
<thead>
<tr>
<th></th>
<th>Respondents N = 329</th>
<th>Non-respondents N = 296</th>
<th>All fee-for-service Medicare beneficiaries N = 298,970</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average age</td>
<td>72.7</td>
<td>70.9</td>
<td>72.4</td>
</tr>
<tr>
<td>(standard error)</td>
<td>(0.5)</td>
<td>(0.8)</td>
<td>(0.02)</td>
</tr>
</tbody>
</table>

T-test for respondents vs. non-respondents by average age (not statistically significant at the 95 percent confidence level):

\[
t = 1.907
\]
\[
\text{degrees of freedom} = 504.5
\]
\[
\text{prob}>|t| = 0.0571
\]
Respondents vs. non-respondents by age group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Respondents</th>
<th>Non-respondents</th>
<th>All Medicare beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under age 65</td>
<td>7.3%</td>
<td>19.3%</td>
<td>11.6%</td>
</tr>
<tr>
<td>Ages 65 to 74</td>
<td>52.9%</td>
<td>40.9%</td>
<td>45.0%</td>
</tr>
<tr>
<td>Ages 75 to 84</td>
<td>31.9%</td>
<td>27.0%</td>
<td>32.2%</td>
</tr>
<tr>
<td>Age 85 and older</td>
<td>7.9%</td>
<td>12.8%</td>
<td>11.2%</td>
</tr>
</tbody>
</table>

Chi-square for respondents vs. non-respondents by age group (statistically significant):  
chi-square = 26.928  
degrees of freedom = 3  
prob>chi-square = 0.001

**ANALYSIS BY RACE**

Respondents differed significantly from non-respondents by race. As shown in the table below, respondents who were white were over-represented among respondents.

Respondents vs. non-respondents by race

<table>
<thead>
<tr>
<th>Race</th>
<th>Respondents</th>
<th>Non-respondents</th>
<th>All Medicare beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>92.1%</td>
<td>82.7%</td>
<td>86.9%</td>
</tr>
<tr>
<td>Other</td>
<td>7.9%</td>
<td>17.3%</td>
<td>13.1%</td>
</tr>
</tbody>
</table>

Chi-square for respondents vs. non-respondents by race (statistically significant):  
chi-square = 12.666  
degrees of freedom = 1  
prob>chi-square = 0.001
ANALYSIS BY GENDER
Respondents did not differ significantly from non-respondents by gender, as shown in the table below.

<table>
<thead>
<tr>
<th></th>
<th>Respondents</th>
<th>Non-respondents</th>
<th>All fee-for-service Medicare beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>41.9%</td>
<td>41.2%</td>
<td>40.7%</td>
</tr>
<tr>
<td>Female</td>
<td>58.1%</td>
<td>58.8%</td>
<td>59.3%</td>
</tr>
</tbody>
</table>

Chi-square for respondents vs. non-respondents by gender (not statistically significant):
- chi-square = 0.034
- degrees of freedom = 1
- prob>chi-square = 0.854

ANALYSIS BY 1996 TOTAL MEDICARE PAYMENT
Respondents did not differ significantly from non-respondents by average Medicare payment (1996 total payment per beneficiary), as shown in the tables below. In addition to comparing average payments, we compared respondents with non-respondents by payment categories, and we did not find any significant differences. An example of this comparison by payment category is shown in the second table below.

<table>
<thead>
<tr>
<th></th>
<th>Respondents</th>
<th>Non-respondents</th>
<th>All fee-for-service Medicare beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average (mean) 1996 Medicare payment (standard error)</td>
<td>$4,644 ($724)</td>
<td>$5,788 ($865)</td>
<td>$4,609 ($20)</td>
</tr>
</tbody>
</table>

T-test for respondents vs. non-respondents by average Medicare payment (not statistically significant):
- t = -1.0142
- degrees of freedom = 591.8
- prob>|t| = 0.3109
Respondents vs. non-respondents by Medicare payment category

<table>
<thead>
<tr>
<th>Payment Category</th>
<th>Respondents</th>
<th>Non-respondents</th>
<th>All fee-for-service Medicare beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than $10,000</td>
<td>86.3%</td>
<td>85.1%</td>
<td>87.4%</td>
</tr>
<tr>
<td>$10,000 or more</td>
<td>13.7%</td>
<td>14.9%</td>
<td>12.6%</td>
</tr>
</tbody>
</table>

Chi-square for respondents vs. non-respondents by Medicare payment category (not statistically significant):

chi-square = 0.180  
degrees of freedom = 1  
prob>chi-square = 0.672