There were 67,742 cases reported to the United States Sentencing Commission in fiscal year 2016.

Of these cases, 6,986 involved theft, property destruction, or fraud.¹

7.4% of theft, property destruction, and fraud offenses involved health care fraud.²

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**Quick Facts**

**Health Care Fraud Offenses²**

In fiscal year 2016, there were 517 health care fraud offenders, who accounted for 0.8%³ of all offenders sentenced under the guidelines. The number of health care fraud offenders decreased by 6.5% from fiscal years 2013 to 2016.

**Offender and Offense Characteristics**

- In fiscal year 2016, more than half of health care fraud offenders were male (54.0%).
- Over one-third were White (36.4%) followed by Hispanic (32.6%), Black (23.8%), and Other Races (7.2%).
- The average age of these offenders at sentencing was 48 years.
- The majority of health care fraud offenders were United States citizens (83.8%).
- The majority of health care fraud offenders had little or no prior criminal history (86.5% of these offenders were assigned to Criminal History Category I).
- The median loss for these offenses was $973,516.
  - 20.1% of health care fraud offenses involved loss amounts greater than $3,500,000.⁴
  - 25.4% of health care fraud offenses involved loss amounts of $150,000 or less.⁴
- Sentences for health care fraud offenders were increased for:
  - Conviction of a federal health care offense involving a government health care program and a loss of more than $1 million (33.0%).
  - Use of sophisticated means to execute or conceal the offense (16.4%).
  - Leadership or supervisory role in the offense (19.9%).
  - Abusing a public position of trust or using a special skill (28.1%).
  - Obstructing or impeding the administration of justice (4.8%).
- Sentences for health care fraud offenders were decreased for:
  - Minor or minimal participation in the offense (8.3%).

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¹ Theft, property destruction, and fraud offenses include cases with complete guideline application information in which the offender was sentenced under §2B1.1 (Larceny, Embezzlement, and Other Forms of Theft; Offenses Involving Stolen Property; Property Damage or Destruction; Fraud and Deceit; Forgery; Offenses Involving Altered or Counterfeit Instruments Other than Counterfeit Bearer Obligations of the United States) using a Guidelines Manual in effect on November 1, 2001 or later. See www.ussc.gov/research/quick-facts for the Quick Facts on §2B1.1 offenders.

² Health care fraud includes cases where the offense conduct as described in the Presentence Report involved the defrauding of a government or private health care entity.

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![Graph of Number of Health Care Fraud Offenders](image)

<table>
<thead>
<tr>
<th>Number of Health Care Fraud Offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2013</td>
</tr>
<tr>
<td>553</td>
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</table>

![Graph of Median Loss for Health Care Fraud Offenses](image)

<table>
<thead>
<tr>
<th>Median Loss for Health Care Fraud Offenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2013</td>
</tr>
<tr>
<td>$0</td>
</tr>
</tbody>
</table>
Punishment

- The majority of health care fraud offenders were sentenced to imprisonment (71.4%).
- The average sentence length for health care fraud offenders was 29 months.

Sentences Relative to the Guideline Range

- During the past four years, the rate of within range sentences for health care fraud offenders has decreased from 43.6% in fiscal year 2013 to 36.8% in fiscal year 2016.

- In each of the past four years, approximately one-fifth to one-third of health care fraud offenders received a sentence below the applicable guideline range because the government sponsored the below range sentence.
  - Substantial assistance departures were granted in approximately 15 to 23 percent of health care fraud cases in each of the past four years.
    - These offenders received an average reduction of 63.6% in their sentence during the four year time period.
  - Other government sponsored departures were granted in approximately five to nine percent of health care fraud cases in each of the past four years.
    - These offenders received an average reduction of 65.9% in their sentence during the four year time period.

- In each of the past four years, approximately 33 percent of health care fraud offenders received a non-government sponsored below range sentence.
  - These offenders received an average reduction of 50.6% in their sentence during the four year time period.

- During the past four years, the average sentence for health care fraud offenders and the average guideline minimum for these offenders decreased overall.
  - The average sentence imposed decreased from 34 months to 29 months during that time period.
  - The average guideline minimum decreased from 43 months to 41 months during that time period.

3 Of the 67,742 offenders sentenced in fiscal year 2016, 5,784 were excluded from this analysis due to incomplete guideline application information.
4 The Loss Table was amended effective November 1, 2015.
5 The Sophisticated Means adjustment was amended effective November 1, 2015.