In fiscal year 2017, there were 471 health care fraud offenders, who accounted for 0.8% of all offenders sentenced under the guidelines. The number of health care fraud offenders decreased by 14.8% from fiscal years 2013 to 2017.

### Offender and Offense Characteristics

- In fiscal year 2017, more than half of health care fraud offenders were men (58.6%).
- Over one-third were White (35.0%) followed by Hispanic (31.4%), Black (26.1%), and Other Races (7.4%).
- The average age of these offenders at sentencing was 49 years.
- The majority of health care fraud offenders were United States citizens (86.8%).
- The majority of health care fraud offenders had little or no prior criminal history (87.7% of these offenders were assigned to Criminal History Category I).
- The median loss for these offenses was $1,185,990.4
  - 29.9% of health care fraud offenses involved loss amounts greater than $3,500,000.
  - 17.4% of health care fraud offenses involved loss amounts of $150,000 or less.
- Sentences for health care fraud offenders were increased for:
  - The number of victims or the extent of harm to victims (17.2%);
  - Conviction of a federal health care offense involving a government health care program and a loss of more than $1 million (41.1%);
  - Use of sophisticated means to execute or conceal the offense (20.0%);
  - Leadership or supervisory role in the offense (26.8%);
  - Abusing a public position of trust or using a special skill (31.4%); and
  - Obstructing or impeding the administration of justice (9.1%).
- 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.
Punishment
- The majority of health care fraud offenders were sentenced to imprisonment (80.3%).
- The average sentence length for health care fraud offenders was 37 months.

Sentences Relative to the Guideline Range
- During the past five years, the rate of within range sentences for health care fraud offenders has decreased from 43.6% in fiscal year 2013 to 34.2% in fiscal year 2017.
- In each of the past five 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 26 percent of health care fraud cases in each of the past five years.
    - These offenders received an average reduction of 62.5% in their sentence during the five-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 five years.
    - These offenders received an average reduction of 63.9% in their sentence during the five-year time period.
- In each of the past five years, approximately one-third of health care fraud offenders received a non-government sponsored below range sentence.
  - These offenders received an average reduction of 49.8% in their sentence during the five-year time period.
- During the past five years, the average sentence and the average guideline minimum for health care fraud offenders varied, but increased overall.
  - The average sentence imposed ranged from 29 months to 37 months during that time period.
  - The average guideline minimum ranged from 41 months to 52 months during that time period.

3 Of the 66,873 offenders sentenced in fiscal year 2017, 4,956 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.