



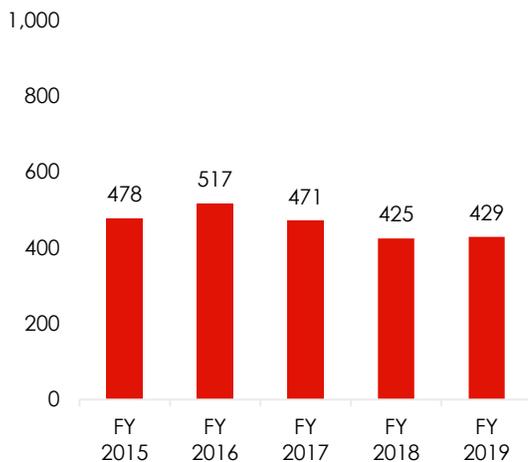
Quick Facts

— Health Care Fraud Offenses —

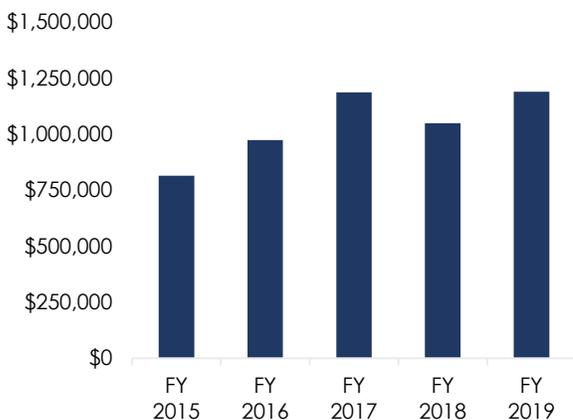
Fiscal Year 2019

- ▶ IN FY 2019, 76,538 CASES WERE REPORTED TO THE U.S. SENTENCING COMMISSION.
- ▶ 5,707 OF THESE INVOLVED THEFT, PROPERTY DESTRUCTION, AND FRAUD.
- ▶ 7.6% OF THEFT, PROPERTY DESTRUCTION, AND FRAUD OFFENSES INVOLVED HEALTH CARE FRAUD.^{1, 2, 3}
- ▶ HEALTH CARE FRAUD HAS DECREASED BY 10.3% SINCE FY 2015.

Number of Health Care Fraud Offenders



Median Loss for Health Care Fraud Offenses



Offender and Offense Characteristics

- 60.6% of health care fraud offenders were men.
- 38.0% were White, 35.4% were Hispanic, 18.2% were Black, and 8.4% were Other races.
- Their average age was 50 years.
- 88.8% were United States citizens.
- 86.7% had little or no prior criminal history (Criminal History Category I).
- The median loss for these offenses was \$1,188,178.⁴
 - ◆ 15.4% involved loss amounts of \$150,000 or less.
 - ◆ 23.9% involved loss amounts greater than \$3,500,000.
- Sentences were increased for:
 - ◆ the number of victims or the extent of harm to victims (13.8%);
 - ◆ conviction of a federal health care offense involving a government health care program and a loss or more than \$1 million (39.7%);
 - ◆ using sophisticated means to execute or conceal the offense (16.1%);⁵
 - ◆ using an unauthorized means of identification (4.9%);
 - ◆ leadership or supervisory role in the offense (23.8%);
 - ◆ abusing a public position of trust or using a special skill (31.5%);
 - ◆ obstructing or impeding the administration of justice (4.4%).
- Sentences were decreased for:
 - ◆ minor or minimal participation in the offense (7.7%).
- The top five districts for health care fraud offenders were:
 - ◆ Southern District of Florida (130);
 - ◆ Southern District of Texas (31);
 - ◆ Northern District of Texas (23);
 - ◆ Eastern District of Michigan (17);
 - ◆ Eastern District of Missouri (14).

Punishment

- The average sentence for health care fraud offenders was 34 months.
- 81.1% were sentenced to prison.
- 4.0% were convicted of an offense carrying a mandatory minimum penalty; of those offenders, 23.5% were relieved of that penalty.

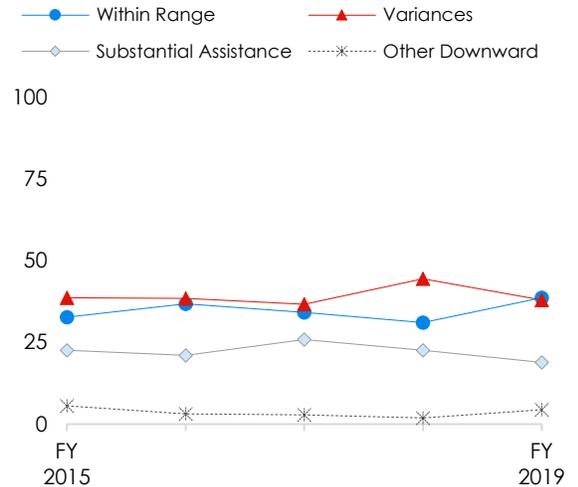


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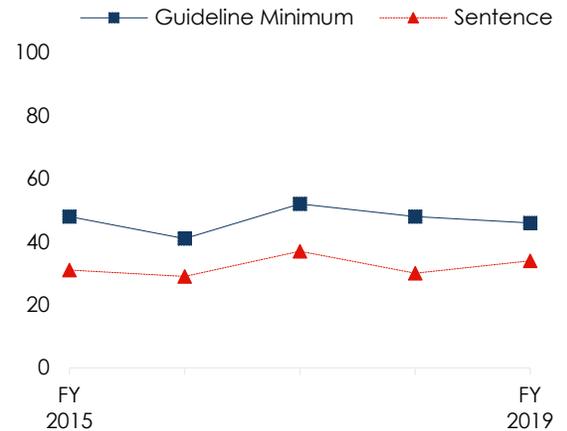
Sentences Relative to the Guideline Range

- Of the 62.0% of health care fraud offenders sentenced under the *Guidelines Manual*:
 - ◆ 62.4% were sentenced within the guideline range.
 - ◆ 30.5% received a substantial assistance departure.
 - ◇ Their average sentence reduction was 55.8%.
 - ◆ 7.1% received some other downward departure.
 - ◇ Their average sentence reduction was 57.5%.
- 38.0% received a variance; of those offenders:
 - ◆ 98.8% received a downward variance.
 - ◇ Their average sentence reduction was 45.8%.
 - ◆ 1.2% received an upward variance.
- The average guideline minimum and average sentence imposed has fluctuated over the past five years.
 - ◆ The average guideline minimum decreased from 48 months in fiscal year 2015 to 46 months in fiscal year 2019.
 - ◆ The average sentence imposed increased from 31 months in fiscal year 2015 to 34 months in fiscal year 2019.

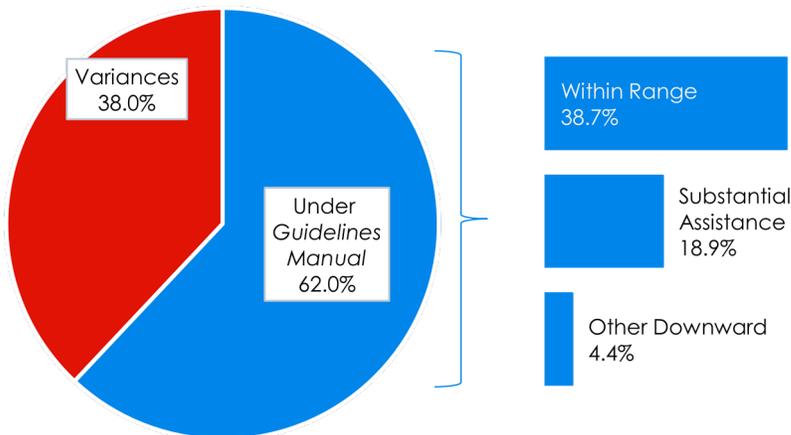
Sentence Relative to the Guideline Range (%)



Average Guideline Minimum and Average Sentence (months)



Sentence Imposed Relative to the Guideline Range FY 2019



¹ Cases with incomplete sentencing information were excluded from the analysis.

² 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.

³ 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.

⁴ The Loss Table and Victims Table were amended effective November 1, 2015.

⁵ The Sophisticated Means adjustment was amended effective November 1, 2015.