



QuickFacts

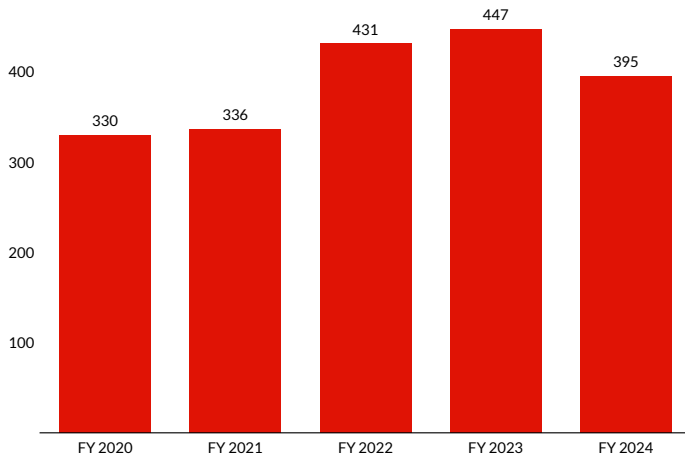
Health Care Fraud

Population Snapshot

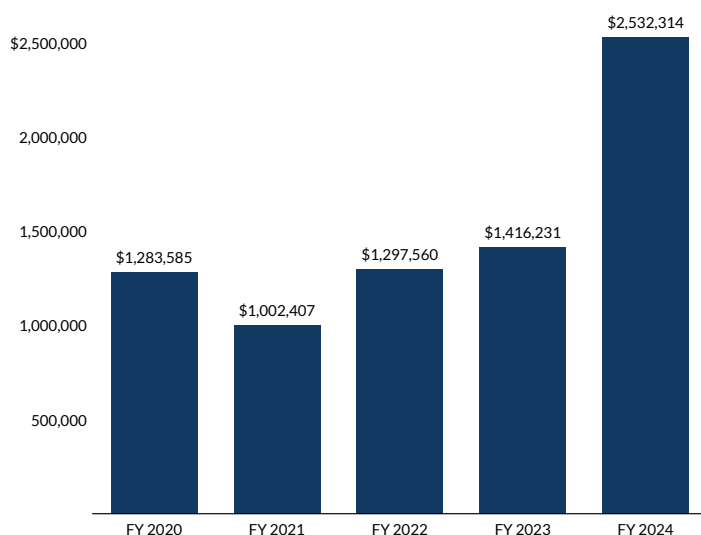
61,678 cases were reported in FY24;
395 involved health care fraud.^{1,2}

Health care fraud offenses
have increased 19.7%
since FY20.

Number of Health Care Fraud Offenses



Median Loss for Health Care Fraud Offenses



Individual and Offense Characteristics

67.8% of individuals sentenced for health care fraud were men.

55.0% were White, 19.2% were Hispanic, 15.4% were Black, and 10.4% were Other races.

Their average age was 50 years.

93.7% were United States citizens.

90.4% had little or no prior criminal history (Criminal History Category I).

The median loss for these offenses was \$2,532,314;³

- 18.2% involved loss amounts of less than \$250,000;
- 19.8% involved loss amounts greater than \$9,500,000.

Sentences were increased for:

- the number of victims or the extent of harm to victims (12.4%);⁴
- conviction of a federal health care offense and a loss of more than \$1 million (42.5%);
- using sophisticated means to execute or conceal the offense (21.3%);
- using an unauthorized means of identification (7.6%);
- a leadership or supervisory role in the offense (24.8%);
- abusing a public position of trust or using a special skill (29.1%);
- obstructing or impeding the administration of justice (4.1%).

Sentences were decreased for:

- minor or minimal participation in the offense (4.3%).

The top five districts for health care fraud offenses were:

- Southern District of Florida (65);
- District of New Jersey (31);
- Southern District of New York (26);
- Eastern District of New York (17);
- Southern District of Texas (17).

Punishment

The average sentence for individuals sentenced for health care fraud was 27 months.

74.7% were sentenced to prison.

2.8% were convicted of an offense carrying a mandatory minimum penalty; 54.5% of those individuals were relieved of that penalty.



QuickFacts

Health Care Fraud

Sentences Relative to the Guideline Range

57.0% of sentences for health care fraud were under the *Guidelines Manual*.

- 18.0% were within the guideline range.
- 35.4% were substantial assistance departures.
 - *The average sentence reduction was 69.6%.*
- 0.5% were Early Disposition Program (EDP) departures.^{5,6}
- 2.8% were some other downward departure.
 - *The average sentence reduction was 74.1%.*
- 0.3% were upward departures.

43.0% of sentences for health care fraud were variances.

- 42.8% were downward variances.
 - *The average sentence reduction was 56.4%.*
- 0.3% were upward variances.

The average guideline minimum has fluctuated and average sentence imposed has remained steady over the past five years.

- The average guideline minimum increased and decreased throughout the fiscal years. The average guideline minimum was 51 months in fiscal year 2020 and 50 months in fiscal year 2024.
- The average sentence was 30 months in fiscal year 2020 and 27 months in fiscal year 2024.

¹ Health care fraud includes cases in which the individual 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 and where the offense conduct as described in the Presentence Report involved the defrauding of a government or private health care entity.

² Cases with incomplete sentencing information were excluded from the analysis.

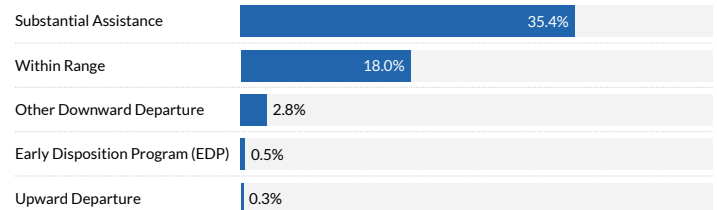
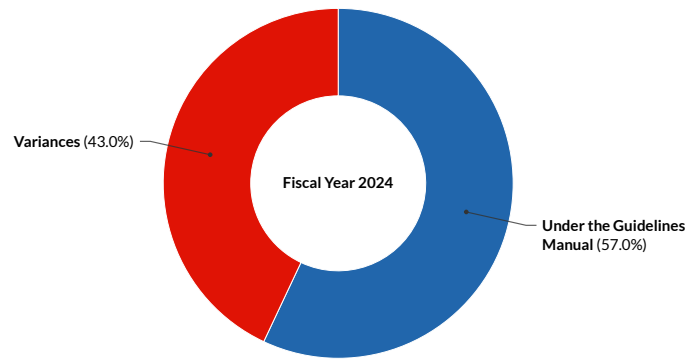
³ The Loss Table was amended effective November 1, 2001 and November 1, 2015.

⁴ The Victims Table and Sophisticated Means adjustment were amended effective November 1, 2015.

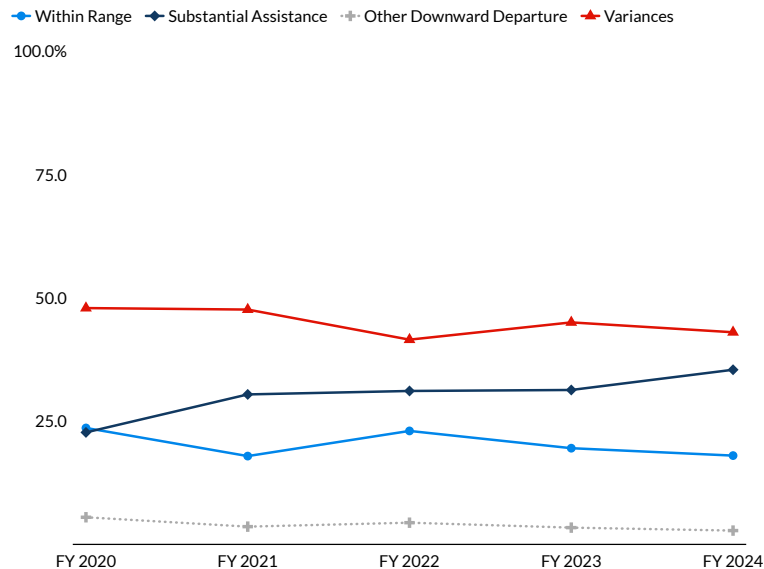
⁵ "Early Disposition Program" (or EDP) departures are departures where the government sought a sentence below the guideline range because the defendant participated in the government's Early Disposition Program, through which cases are resolved in an expedited manner. See USSG §5K3.1.

⁶ The Commission does not report the average for categories with fewer than three cases.

Sentences Relative to the Guideline Range



Sentences Relative to the Guideline Range by Fiscal Year



Average Guideline Minimum and Average Sentence (months)

