



# Report fraud or abuse

Program Integrity investigates activities related to preventing, detecting, and investigating allegations of fraud or abuse by Medicaid providers and beneficiaries. Every dollar lost due to the misuse of Medicaid benefits is one dollar less available to fund programs that provide essential medical services to vulnerable Virgin Islanders. If we do not work together to help stop fraud and abuse, the system may not be available to those the program was created to help.

You can contact the Division of Medicaid Program Integrity Division in several ways as outlined below, including by phone, postal mail, email, and online forms. It is advisable not to send forms by email or submit online forms containing protected health information or personally identifiable information to protect confidentiality in accordance with the Health Insurance Portability and Accountability Act of 1996.

- Phone: 340-715-6973
- Email: [medicaidfraud@dhs.vi.gov](mailto:medicaidfraud@dhs.vi.gov)
- Mailing Address:  
ATTN: Office of Program Integrity  
1303 Hospital Ground  
St. Thomas, V.I. 00802

## Types of fraud and abuse by health care providers

Medicaid Providers (e.g. doctor, dentist, counselor, etc.) should be referred to the Office of Program Integrity for any suspicion of abuse or fraud such as:

- Billing for services not rendered
- Billing for services where medical necessity is not established
- Upcoding or inappropriate billing that results in a loss to the Medicaid program.
- Inadequate or missing documentation to support billed services
- Quality of care issues that do not meet professionally accepted health care standards.
- Falsification of medical necessity certificates, treatment plans and medical records to justify payment.
- Soliciting or receiving bribes
- Violation of Medicaid policies, procedures, rules, regulations and/or statutes

## Types of Fraud and Abuse of Beneficiaries

Medicaid recipients should be referred to the Office of Program Integrity for review if there are suspicions about:

- Excessive or Overuse of Medicaid
- Using Another Person's Medicaid ID Card
- Loaning, Modifying, or Duplicating a Medicaid ID
- Providing incorrect eligibility or false information to a health care provider to obtain treatment
- Receiving benefits simultaneously in USVI and another state
- Knowingly Assisting Service Providers in Providing Services to Defraud the Medicaid Program
- Prescription fraud

Thank you for your support in fulfilling our mission, ensuring that Medicaid funds are used to provide quality medical coverage to those who are eligible to receive services.

## Medicaid Program Integrity

The Center for Program Integrity provides educational resources to educate providers, beneficiaries, and others to promote best practices and awareness of Medicaid fraud, waste, and abuse.

Medicaid Program Integrity Education (MPIE) materials apply to providers, beneficiaries, and state-run care programs. MPIE documents include thematic information in an easy-to-read format that helps strengthen education efforts for Medicaid providers, beneficiaries, and other stakeholders. The information provided is intended to advance the Medicaid Integrity Education Program's education efforts, help providers comply with their billing, and help combat fraud, waste, and abuse.

To access educational brochures, fact sheets, and provider resources and checklist tools that promote efforts to prevent fraud, waste, and irregular Medicaid payments, [visit the Medicaid Program Integrity Education page](#) on Centers for Medicare and Medicaid Services website.