

Allegations of Medicaid Fraud

Fraudulent acts are those acts committed with the knowledge that they are wrong. When you suspect or see Medicaid wrong-doing, we need to know.

What should be reported:

- Billing for medical services not actually performed.
- Providing unnecessary services.
- Billing for services separately that should legitimately be one billing.
- Billing more than once for the same medical service.
- Giving or accepting something of value (cash, gifts, services) in return for medical services (i.e. Kickbacks).

Or when Someone:

- Lies about their eligibility.
- Forges referrals/orders.
- Lies about their medical condition.

The following information will be needed:

- a. The name, position and work location of the alleged perpetrator.
- b. A complete description of the alleged act, with as much detail as possible.
- c. A description of how you discovered the alleged act.
- d. As closely as you can determine, the date and time that the alleged act occurred.
- e. As closely as you can determine, the value of the school system assets that have been compromised.
- f. The names of any supervisory personnel to whom you have previously reported the alleged act. (*If none, so state.*)
- g. Your name, address, telephone and e-mail address. (*Please note this is optional.*)

*****If you think it's wrong; it should be reported.*****

When an allegation is reported, you are not required to identify yourself; however, we encourage that you do so in the event additional questions arise during the course of an evaluation or investigation. If you do choose to identify yourself when filing an allegation, please know that it is our strict policy to protect your identity during the course of an evaluation or investigation, to the extent possible.

After your allegation is received, the Compliance Officer will investigate the allegation and take appropriate action. If you have submitted your name and contact information on the allegation, you will receive an acknowledgment from the Compliance Officer.

Unless you have chosen to file your allegation anonymously, you may be contacted to verify details of the complaint or to provide additional information.

How to Report Medicaid Fraud Allegations:

There are several ways to report an allegation:

- Contact Gail Mathias, Medicaid Compliance Officer for the Ballston Spa Central Schools:
E-mail: gmathias@bscsd.org
Telephone: (518) 884-7195, Ext. 1346
Fax: (518) 490-7410
Mail: 70 Malta Avenue; Ballston Spa, NY 12020
- Medicaid Fraud Hotline: 1-877-873-7283
Or, NYS Department of Health Online Complaint Form: <https://www.omig.ny.gov/bfma-form>

For **anonymous, good faith reporting**, please complete a “Complaint Form” and mail it to Gail Mathias, Medicaid Compliance Officer for the Ballston Spa Central Schools, at Ballston Spa Central School District, 70 Malta Avenue, Ballston Spa, NY 12020. Please **do not include a return address on the envelope**.

For your convenience, a “Complaint Form” is available on the Ballston Spa Central School District’s web page, under the Department’s Tab, in the Medicaid Compliance link.