

ALABAMA LAW

Alabama law makes it a felony criminal offense to falsify a claim or application for payment of Medicaid benefits.

Code of Alabama Section 22-1-11 provides, in pertinent part, that:

(a) Any person who, with intent to defraud or deceive, makes, or causes to be made or assists in the preparation of any false statement, representation, or omission of a material fact in any claim or application for any payment, regardless of amount, from the Medicaid Agency, knowing the same to be false; or with intent to defraud or deceive, makes, or causes to be made, or assists in the preparation of any false statement, representation, or omission of a material fact in any claim or application for medical benefits from the Medicaid Agency, knowing the same to be false; shall be guilty of a felony and upon conviction thereof shall be fined not more than ten thousand dollars (\$10,000) or imprisoned for not less than one nor more than five years, or both.

In addition, the Program Integrity Division of the Alabama Medicaid Agency has established units that are responsible for detecting fraud and/or abuse by providers within the Medicaid Program. Cases of suspected provider fraud are referred to the Medicaid Fraud Control Unit in the Alabama Attorney General's Office for possible prosecution. In addition, providers committing fraud or abuse of the Medicaid Program are subject to possible administrative sanctions including suspension of payments, restriction of the provider's Medicaid participation, suspension of the provider's Medicaid participation and/or termination of the provider's Medicaid participation. Restitution of improper payments made to the provider by the Medicaid program may be pursued in addition to any administrative sanctions imposed.

At the time VistaCare's False Claims Policy was adopted, Alabama had not enacted its own legislation similar to the Federal False Claims Act allowing private citizens or employees to file civil lawsuits to recover monetary damages against individuals and entities that submit false or fraudulent claims to the state Medicaid program.

Recipients, providers and the general public may report suspected fraud, abuse or misuse of the Alabama Medicaid program by calling toll-free 1-866-452-4930 or by writing the Agency's Program Integrity Unit at PO Box 5624, Montgomery, AL 36103-5624. A person reporting suspected fraud and abuse is not required to give his/her name. Any information provided is kept confidential.

Alabama has not enacted legislation prohibiting employers from taking disciplinary or retaliatory action against an employee who makes a lawful report of a violation of state or federal statutes. However, VistaCare's False Claims Policy requires all employees, contractors and agents with knowledge of potential fraud and abuse situations to report them, and prohibits retaliation or retribution for good faith reporting.

Should Alabama enact additional legislation pertaining to the submission of false claims, this summary will be updated to include detailed information about this false claims legislation and any additional penalties, civil or criminal, imposed pursuant to that legislation for false claims and statements.

References:

Medicaid false statements: Code of Ala. § 22-1-11

Medicaid Program Integrity: Ala. Admin. Code r. 560-X-.01 to 560-X-.06