



Healthcare Fraud: Auditing and Detection Guide

Rebecca S. Busch

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An invaluable tool equipping healthcare professionals, auditors, and investigators to detect every kind of healthcare fraud

According to private and public estimates, billions of dollars are lost per hour to healthcare waste, fraud, and abuse. A must-have reference for auditors, fraud investigators, and healthcare managers, *Healthcare Fraud, Second Edition* provides tips and techniques to help you spot—and prevent—the "red flags" of fraudulent activity within your organization. Eminently readable, it is your "go-to" resource, equipping you with the necessary skills to look for and deal with potential fraudulent situations.

- Includes new chapters on primary healthcare, secondary healthcare, information/data management and privacy, damages/risk management, and transparency
- Offers comprehensive guidance on auditing and fraud detection for healthcare providers and company healthcare plans
- Examines the necessary background that internal auditors should have when auditing healthcare activities

Managing the risks in healthcare fraud requires an understanding of how the healthcare system works and where the key risk areas are. With health records now all being converted to electronic form, the key risk areas and audit process are changing. Read *Healthcare Fraud, Second Edition* and get the valuable guidance you need to help combat this critical problem.

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