Frequently Asked Questions

Q: What is elder abuse?
A: Elder abuse is any knowing, intended, or careless act that causes harm or serious risk of harm to an older person—physically, mentally, emotionally, or financially.

Q: What should I do if I suspect abuse and/or neglect in a nursing home?
A: Contact the Illinois State Police Medicaid Fraud Control Unit Abuse/Neglect Hotline at 1-888-557-9503 (Monday-Friday 8:00 AM to 5:00 PM) or the Illinois Department of Public Health Abuse/Neglect Hotline at 1-800-252-4343 (24 hours a day, 7 days a week).

Q: What should I expect when I call for help?
A: You will be asked to give the person’s name, address, contact information, and details about why you are concerned. It is not necessary to provide your name should you wish to remain anonymous.
Did You Know

• In Illinois, there are over 100,000 elderly persons currently living in nearly 1,300 long-term care facilities. Research suggests over 12,000 of such residents will be abused annually.

• The National Center on Elder Abuse estimated that more than a million seniors suffer abuse and neglect in a single year, many of them in nursing homes.

• The National Center on Elder Abuse estimates that because it is a crime often concealed by the perpetrators, who are typically individuals on whom the elderly depend for their very survival, elder abuse and neglect are grossly under reported.

• The National Academies estimate between 1 and 2 million Americans age 65 or older have been injured, exploited or otherwise mistreated by someone on whom they depended for care.

• In 2008, 7.5% of all reported cases of financial abuse in the United States were committed by a caregiver in a nursing or assisted living facility.

• While not all nursing homes are guilty of elderly neglect, reports show that approximately 30% of nursing facilities are cited for instances of abuse. Many additional instances are never reported.

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Examples of Medicaid Fraud

• Billing for medical services or products not actually provided

• Billing for a more expensive service or product than was actually provided

• Billing for several services that should be combined into one billing

• Billing twice for the same medical service using two different service dates

• Dispensing less costly drugs and billing for higher priced equivalents

• Giving or accepting kickbacks for medical services

• Providing unnecessary services

• Billing for ambulance runs when no medical service was provided

• Transporting multiple passengers in an ambulance and billing for each passenger

• Returning products to inventory without crediting Medicaid for returned items

• Forging client signatures for enrollment in HMOs

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Signs of Patient Abuse and/or Neglect

• Frequent unexplained injuries or complaints of pain without obvious injury

• Bruises, black eyes, welts, lacerations, rope marks, imprint injuries

• Sprains, dislocations

• Fear of being alone with caretakers

• Malnutrition or dehydration that is not the result of terminal illness or end-stage disease

• Lack of personal cleanliness

• Left unattended for long periods

• Bedsores and skin lesions

• Fractures

• Open wounds, cuts, punctures

• Sexually transmitted diseases or injury to the genital area

• Difficulty in sitting or walking that is unusual or otherwise unexplained

• Habitually dressed in torn or dirty clothes

• Obvious fatigue and listlessness

• In need of medical or dental care