



# Fast Facts

## Crushing Fraud through the Fraud War Room

CMS is on the offensive and fraudsters are on notice. In March 2025, CMS launched the Fraud Defense Operations Center (FDOC), better known as the **Fraud War Room**. In its first year, the War Room has become one of the most powerful weapons in the fight against fraud, waste, and abuse in Medicare history, **stopping billions of dollars from reaching bad actors**.

The War Room is a cross-functional strike force uniting elite data analysts, investigators, health policy experts, legal advisors, and law enforcement under one roof with a single mission: **stop fraud before taxpayers lose a single dollar**. By harnessing rigorous, data-driven intelligence, the FDOC detects threats in real time, coordinates rapid intervention, and shuts down inappropriate billing before it ever hits Medicare's books.

## Fraud Detected. Payments Blocked. Taxpayers Protected.

In its first year, FDOC efforts resulted in over **\$2.1 billion in payments suspended\***



**Suspended payment to 453 providers** due to suspected fraud



This included over **\$1.9 billion** for suspect **durable medical equipment** billing



This included over **\$106 million** to suspect providers billing for **skin substitutes**



This included over **\$87 million to suspect laboratories**



This included over **\$17 million** to suspect **hospice providers**

## Examples of egregious behavior caught by the FDOC



FDOC identified a **Hospice agency** in Los Angeles County, CA that had withheld claims during an enhanced oversight review. Shortly following the review, the hospice submitted claims for beneficiaries who **did not consent to elect hospice services**. Swift payment suspension immediately stopped **\$1 million** in payments to the suspect provider.



A false front **Durable Medical Equipment supplier** submitted over \$24 million of fraudulent orthotic claims in one day. Just two days later, the FDOC caught the supplier, implementing a payment suspension that has stopped **\$86 million in payments** to date.

The supplier was quickly placed on prepayment review, which will further protect beneficiaries through prevention of supplemental payer liabilities like Medigap.

\*Numbers encompass March 31, 2025 — March 31, 2026, and are therefore subject to change.