Medical Identity Theft: An Emerging Problem for Informatics
William Gillette, Timothy B. Patrick, Ph.D.
Healthcare Administration and Informatics, College of Health Sciences
University of Wisconsin-Milwaukee

Abstract
This poster reports a preliminary review of “medical identity theft.” Financial identity theft has received a great deal of media attention. Medical identity theft is a particular kind of identity theft that has received little attention. There are two main subtypes of medical identity theft. In the first type the stolen medical identity is used to receive medical services, and in the second type the stolen medical identity is used to commit healthcare fraud.

Introduction
Financial identity theft has lately received a great deal of media attention. Medical identity theft is a particular kind of identity theft that is an emerging problem for informatics. Medical identity theft has received relatively little attention, particularly from the academic community. For example, a search on Google Scholar with the quoted string “medical identity theft” retrieved six articles, while a search with “identity theft” retrieved 5000 articles. Similarly, a search of PubMed for “medical identity theft” retrieved eight articles (but none for the quoted string itself) while “identity theft” retrieved 23 articles. Searches of INSPEC retrieved none and 168 articles respectively. In the remainder of this paper we present our preliminary review of medical identity theft.

What is Medical Identity Theft?
According to the United States Federal Trade Commission “Identity theft occurs when someone uses your personally identifying information, like your name, Social Security number, or credit card number, without your permission, to commit fraud or other crimes”(1). In medical identity theft, the victim’s identity is used to “…obtain medical services or goods, or … to obtain money by falsifying claims for medical services and falsifying medical records to support those claims”. (2)

Prevalence of Medical Identity Theft
According to statistics collected by the World Privacy Organization, there has been an increase in the number of people experiencing medical identity theft from 1.6 percent in 2001 to 1.8 percent in 2005. The Federal Trade Commission has recorded a total of 19,578 complaints in regards to medical identity theft since January 1992 via its consumer sentinel databases. (3) However, estimates for 2003 were about 3,868 victims of medical identity theft out of 214,905 (1.8 percent) of actual reported cases for identity theft. (3) In addition, the Federal Trade Commission’s – Identity Theft Survey Report of 2003 estimated a total number of people affected by identity theft at 9.9 million. Considering only the subcategories of this group that relate to a person’s identity being used to obtain medical services or to commit healthcare fraud, the number of actual cases could be as high as 148,500 for 2003.

The costs of medical identity theft
Financial Costs. Since medical identity theft is commonly linked to healthcare fraud, it has a direct impact on the cost of providing healthcare. According to the World Privacy report “healthcare fraud accounts for an estimated 3-10 percent of the total cost of healthcare”, which extrapolates out to a cost of 80 to 120 billion dollars a year.(2)

Human Costs. Medical identity theft may result in damage to a person’s medical record and insurance history, leaving them full of errors. The erroneous medical information may lead to inaccurate diagnosis or to an inappropriate treatment plan, potentially resulting in harm to the patient. The damage resulting from medical identity theft may also lead to the person’s inability to gain access to insurance or employment.

Conclusion
Medical identity theft, like other forms of identity theft, is increasing. Medical identity theft is particularly important in that it can directly affect a victim’s social and health status. Due to the distributed nature of a patient’s healthcare records and the lack of centralized reporting systems for healthcare (like ones for credit reporting in the financial industry), medical identity theft may go unnoticed for long periods of time. Repairing damage to medical records that results from medical identity theft may be very difficult due to bureaucratic regulations, as well as due to the lack of standard treatment of such cases by the healthcare insurance industry.

References

AMIA 2007 Symposium Proceedings Page - 964