

## FED ARRESTS 107 PEOPLE IN \$452 MILLION MEDICARE SCAM – AMERICA'S BIGGEST FRAUD SWEEP EVER



US law enforcement authorities have charged 107 people, which include doctors and nurses, for attempting to defraud and cheat the federal Medicare healthcare program for the elderly and disabled for an astounding sum of \$452 million. Whilst divulging this information, the Obama administration added that it was the biggest fraud sweep to date. At a news conference, Attorney General Eric Holder said they "underscore the Justice Department's determination to move aggressively in bringing to justice those who would violate our laws and defraud the Medicare program for their personal gain." Arrests were made in Miami; Houston; Baton Rouge, Louisiana, and four other cities. 91 people were arrested and charged with submitting false billing for home healthcare, mental health services, HIV infusions and physical therapy to money laundering and receiving kickbacks. Since the last 3 years the government is making serious attempts to catch the fraudsters. Health care fraud is estimated to cost taxpayers between \$80 and \$160 billion per year. A record \$4.1 billion was recovered last year. Officials of the Justice Department and Health and Human Services Department officials were, not sure of how much of the falsely claimed money was actually paid out but ongoing review of complaints and indictments have revealed that the authorities were trying to recover almost \$60 million of allegedly swindled money. Lanny Breuer, assistant attorney general for the Justice Department's criminal division said, "These fraud schemes were committed by people up and down the chain of healthcare providers - from doctors, nurses, and licensed clinical social workers, to office managers and patient recruiters." Breuer admitted that it was the "single largest Medicare billing fraud sweep by the Justice Department's special task force in its five-year history." In keeping with President Obama's attempts to staunch ever-increasing healthcare costs by taking stringent steps to curb fraud from federal Medicare programs, the government had in September, charged 91 people in connection with a variety of schemes aimed at swindling Medicare out of \$295 million. President Obama has always believed that fraud in Medicare is a significant contributor to its soaring costs. More than 2600 healthcare fraud causes are under the scanner of the FBI and the Justice Department says, that since March 2007, it has charged more than 1,300 people for falsely billing Medicare for more than \$4 billion. The major successes were in Baton Rouge where seven people were arrested and charged with eight counts, including conspiracy and healthcare fraud for billing Medicare for around \$225.6 million. In Houston, private ambulance companies were found guilty of billing the system for non-existent or false runs. In Miami, 50 medical professionals were charged with carrying out a fraud of \$137 million. Other cases involved wrong billing for medical equipment, health services and prescription drugs. Kathleen Sebelius, Health and Human Services Secretary argued that the arrests could be made, only because the healthcare law, proposed by Obama and passed in 2010, helped provide the additional resources required to apprehend the guilty and in the process root out fraud. "Today's actions are another example of how the Affordable Care Act is helping the Obama administration fight fraud and strengthen the Medicare program," she said. Sebelius said that the government had discarded the "pay and chase method" and instead was attempting to 'pre-empt fraud.' "Now, we're analyzing patterns and trends and claims data, instead of just going claim by claim," she said. The law has come under considerable debate and conflict, 26 out of 50 states and Republicans have challenged it and want it invalidated, because it would require Americans to have health insurance coverage or pay a penalty. Looking for Healthcare jobs? [Click here](#).