

Feds charge 300 in nationwide health care fraud sweeps

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Health care fraud sweeps across the country have led to charges against 300 people including doctors, nurses, physical therapists and home health care providers accused of bilking Medicare and Medicaid, the government announced Wednesday.

The sweep spread from southern California to southern Florida and Houston to Brooklyn, New York, with arrests being made over three days.

In all, the fraudulent billings allegedly totaled \$900 million, Attorney General Loretta Lynch said, calling it the largest national Medicare fraud dragnet.

The defendants billed for care and prescriptions that were not necessary and services that were not rendered, Lynch said.

Among those charged, for example, was a group that controlled a network of clinics in Brooklyn that received \$38 million from Medicare and Medicaid after providing patients unnecessary treatment. A Detroit clinic billed Medicare for more than \$36 million, even though Lynch said it was actually a front for a narcotics diversion scheme.

Such investigations happen each year, but Lynch said investigators noticed some new trends, including the use of doctors' stolen IDs to prepare fake prescriptions.

Those charged "target real people - many of them in need of significant medical care," Lynch said. "They promise effective cures and therapies, but they provide none."

While the individual cases may be unrelated, law enforcement agencies often coordinate the announcement of health fraud charges and arrests to send a message to fraudsters and the general public alike. Health care fraud costs tens of billions of dollars annually.

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