



DOJ-CRM-FRD-USAO-EDMI
HHS-OIG-OI-FBI-MI-MFCU
DETROIT·MICHIGAN·2009

FACT SHEET: PHASE THREE MEDICARE FRAUD STRIKE FORCE DETROIT METRO AREA

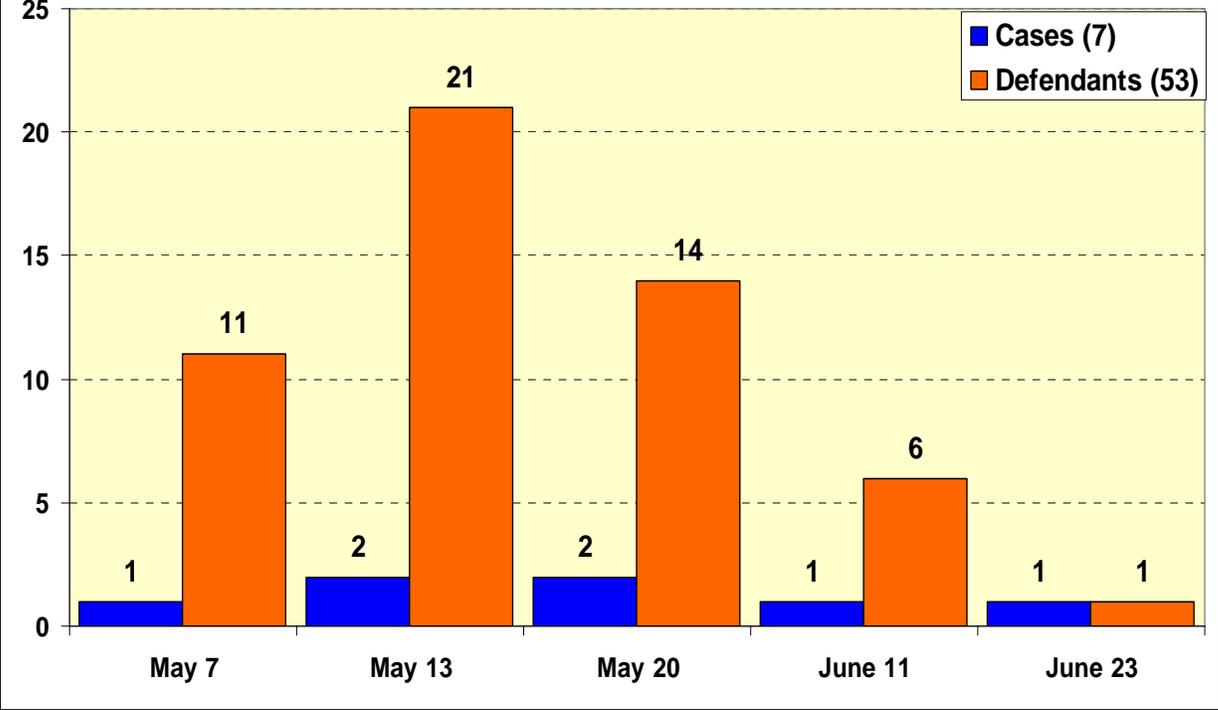
The Medicare Fraud Strike Force's third phase began covertly in Detroit in March 2009. Three teams of criminal prosecutors from the Criminal Division's Fraud Section and the U.S. Attorney's Office for the Eastern District of Michigan worked with agents from the Department of Health and Human Services - Office of Inspector General (HHS-OIG) and the FBI to investigate and prosecute these cases.

- On June 24, 2009, federal agents from the FBI and the HHS-OIG, Office of Investigations began executing arrest warrants in Detroit, Miami and Denver as part of a concentrated effort to address fraud in the metro Detroit area.
- The Strike Force teams in Detroit identified a number of operators of infusion therapy and physical/occupational therapy clinics that defrauded the Medicare program by billing for services that were not provided or were medically unnecessary.
- A grand jury in the Eastern District of Michigan returned indictments against 53 individuals, including physicians, medical assistants, company owners and executives, as well as beneficiaries, all who are accused of a number of Medicare fraud offenses.
- Charges brought against the defendants in these schemes included conspiracy to commit health care fraud, participating in a scheme to defraud a health care benefit program, and money laundering, among others.
- All indictments also seek forfeiture of the criminal proceeds and restitution to the Medicare program.

Key Phase Three Accomplishments: (to date)

- Arrests began June 24, 2009, in three cities involving 53 individuals under indictment in seven cases who are accused of conspiring to submit more than \$50 million in false claims to the Medicare program.
- Two cases involve nearly \$40 million in fraudulent billings for medically unnecessary physical and/or occupational therapy and other services that were never provided.
- Five cases involve more than \$16 million in fraudulent billings for medically unnecessary infusion and injection services that were not provided.

**Phase 3: Medicare Fraud Strike Force (Detroit, MI)
Cases Filed and Defendants Charged, 2009**



Phase 3: Medicare Fraud Strike Force (Detroit, MI)
Fraudulent Billings to Medicare by Type of Service (\$ in Millions)

