

LONG TERM CARE & SENIOR LIVING BLOG

Elder Fraud in Health Care Targeted by the DOJ

AUTHOR: SANDBERG PHOENIX

The U.S. Department of Justice (“DOJ”), in trying to initiate quicker enforcement actions and prosecutions, has created several Elder Justice Task Forces to target health care providers who commit crimes in the service of the elderly. The Task Forces are comprised of representatives from federal, state and local law enforcement, the U.S. Department of Health and Human Services, state adult protective services agencies, long-term care ombudsman programs, U.S. Attorneys’ offices, state Medicaid fraud control units, and state and local prosecutors.

The Task Forces will focus on “coordinat[ing] and enhanc[ing] efforts to pursue nursing homes that provide grossly substandard care to their residents.” In addition to pursuing federal criminal charges for health care fraud, the Task Forces are authorized to pursue, investigate and prosecute False Claims Act violations, HIPAA violations, and state criminal laws. Corporations in violation of these laws can expect hefty fines, especially if they are repeat offenders. One other potential penalty is possible debarment from federal programs like Medicare. There are other risks to individuals of imprisonment and/or fines.

The announcement of these Elder Justice Task Forces reflects the DOJ’s promise, via its Elder Justice Initiative, that all providers of services to the elderly will face increased scrutiny of their practices. None of the initial ten Task Forces are in either Missouri or Illinois, but expansion of the Task Forces to additional areas is expected.

Click on this link to get a full copy of the DOJ’s release.

By Jonathan McCrary

Jonathan McCrary, type unknown