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OIG beefs up legal team to bust more healthcare fraudsters

By [Lisa Schencker](#) | July 1, 2015

HHS' Office of Inspector General is gearing up to take more wayward providers to court in coming months and years, leaders within the OIG confirmed this week.

The OIG revealed new details of its plan Tuesday, as it announced it is hiring lawyers for a new litigation team focused exclusively on cases brought under the civil monetary penalties law, the False Claims Act, the anti-kickback statute and the OIG's authority to exclude providers from federal health programs.

The team will consist of about 10 lawyers, some of whom already work at the OIG, and some of whom are new, said Lisa Re, chief of the OIG's administrative and civil remedies branch.

"You can expect to see enhanced enforcement," said Robert Penezic, a deputy branch chief who will oversee the team.

"As we've gotten new funding over this past year again, we're trying to make sure we're having as much of an impact as we possibly can, so we thought this was the right time to create this team," Re said.

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Re said the new legal team will focus on cases that are "important to us" and will include all types of healthcare providers.

The goal, she said, is to fill gaps in enforcement to ensure accountability.

The team will also bring cases related to guidance issued by the OIG, such as a recent fraud alert released in June. That alert warned doctors entering into compensation arrangements, such as medical directorships, that their pay must reflect fair market value.

It's common for hospitals and other organizations to employ doctors as medical directors, but those arrangements can violate the anti-kickback law when they're intended to draw more referrals from those doctors, the alert said.

The alert followed settlements reached between the OIG and individual physicians in recent years who participated in questionable medical-directorship and office-staff arrangements, according to the OIG.

Re said the hope is that increased enforcement will lead to increased compliance.

Mark Silberman, a partner at law firm Duane Morris, represents providers. A former special assistant U.S. attorney, he said the government doesn't likely want to leave so much potential recovery money on the table.

In recent years, settlement amounts resulting from OIG-initiated actions have continued to grow. Between 2013 and 2014, the number of settlements in such actions jumped from 36 to 60, and the amounts exploded as well, according to a presentation given by Re and Penezic at the recent American Health Lawyers Association annual meeting in Washington D.C.

"It signifies an intention to increase the enforcement efforts against individual providers," Silberman said. "I think it verifies that these increased enforcement efforts that have been seen over the last several years are here to stay."

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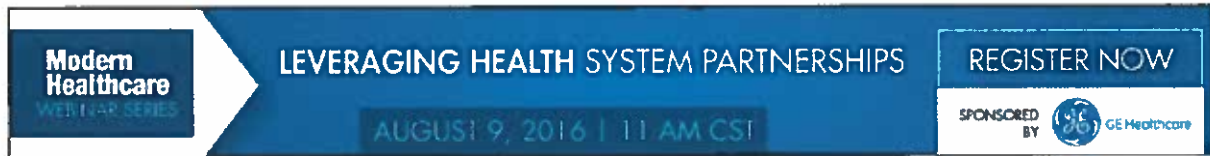
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