

Amedisys, Inc. and its affiliates have agreed to pay \$150 million to the federal government to resolve allegations they violated the False Claims Act by submitting false home healthcare billings to the Medicare program. The U.S. Department of Justice (DOJ) announced the settlement on April 23, 2014. Amedisys is one of the country's largest providers of home health services.

The settlement resolves allegations that between 2008 and 2010 certain Amedisys offices improperly billed Medicare for ineligible patients and services. Amedisys purportedly billed Medicare for nursing and therapy services that were medically unnecessary or provided to patients who were not homebound and otherwise misrepresented patients' conditions to increase its Medicare payments. These billing violations were the result of management pressure on nurses and therapists to provide care based on the financial benefits to Amedisys, rather than the needs and wellbeing of patients.

The settlement resolves seven lawsuits pending against Amedisys in federal court that were filed under the qui tam ("whistleblower") provisions of the False Claims Act, which allows private citizens to bring suit on behalf of the United States and share in any recovery. As part of the \$150 million settlement with Amedisys, the whistleblowers - all former Amedisys employees - will collectively split over \$26 million.

The Amedisys settlement illustrates DOJ's emphasis on combating healthcare fraud and represents another significant win for the Healthcare Fraud Prevention and Enforcement Action Team (HEAT) initiative, which was announced in May 2009 by Attorney General Eric Holder and Secretary Health and Human Services Kathleen Sebelius. The partnership between those two departments has focused efforts to reduce and prevent Medicare and Medicaid financial fraud through enhanced cooperation. The False Claims Act has been a major weapon in the fight against financial fraud. Since January 2009, the Justice Department has recovered a total of more than \$19.2 billion through False Claims Act cases, with more than \$13.6 billion of that amount recovered in cases involving fraud against federal healthcare programs.

Individuals with knowledge of fraud committed against any state or federal government entity or program should consult with an attorney experienced in recognizing and bringing whistleblower claims under the False Claims Act. Individuals with knowledge of fraud committed against the government can help save taxpayers significant money.

Whistleblowers who bring suit on behalf of the government to recover money out of which the government was defrauded stand to receive an award of roughly 15–30% of the total recovery.