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OMIG Staff Participates in Major Federal Anti-Fraud Operation

Medicare Strike Force Acts Against Fraud in Nine Cities

February 28, 2011 – Two staff members from the New York State Office of the Medicaid Inspector General (OMIG) played key roles in the action of the federal Medicare Strike Force, which announced indictments against 111 individuals in nine cities for more than \$225 million in false billings.

The Strike Force singled out providers in Brooklyn for healthcare fraud-related actions. As an active member of the Medicare Fraud Strike Force, OMIG staff was involved in three out of the four Brooklyn cases, which represented \$91.3 million (approximately 40 percent of the \$225 million nationwide total).

OMIG staff participated in the investigation, search and seizure that led to the indictment on federal healthcare charges of **Valentina Kavlienko** and six others in connection with a \$56.9 million scheme to fraudulently bill the Medicare and Medicaid programs for physical therapy and diagnostic tests, while also paying kickbacks to Medicaid and Medicare recipients for their participation in the plot. The seven individuals face charges of conspiracy to commit healthcare fraud, healthcare fraud, and conspiracy to pay healthcare kickbacks. The seven individuals arrested consisted of three ambulance drivers and four clinic owners.

OMIG staff also assisted with the search of the Brooklyn-based practice of **Boris Sachakov, MD**, a proctologist, who was indicted on federal healthcare fraud charges in connection with a \$22.5 million scheme to defraud Medicare and private insurance carriers by submitting fraudulent claims for hemorrhoidectomy services. OMIG staff assisted in the search of this physician's office in September 2010, helping to gather evidence that led to the federal charges.

Additionally, **Aleksandr Kharkover**, a New York State-licensed physical therapist, was charged with federal healthcare fraud for his part in an alleged \$11.9 million scheme to fraudulently bill the Medicare program for physical therapy services that were not provided. In October 2010, Kharkover's office was the subject of an OMIG credential verification review (CVR), in which OMIG staff examined license and business documents related to his practice. These documents may be used as the Department of Justice's case against him unfolds.

"We are proud to be active participants in the efforts of the Strike Force," said Michael Little, Deputy Medicaid Inspector General for Investigations. "Working with law enforcement professionals from the

Department of Justice, the FBI, and the Department of Health and Human Services, as well as local law enforcement officials, is a privilege for OMIG staff. Such collaborative efforts are productive as we work to fight fraud and abuse in both Medicare and Medicaid.”

These two cases represent \$91.3 million in fraudulent funds. The fourth Brooklyn case, which involved an alleged \$250,000 scheme, was not part of OMIG’s work.

An indictment is merely a charge and defendants are presumed innocent until proven guilty.

For the complete Department of Justice press release, click [here].

<http://www.justice.gov/opa/pr/2011/February/11-ag-202.html>.