

FALL RIVER CLINIC ARRAIGNED ON MEDICAID FRAUD, LARCENY CHARGES

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BOSTON -- A Fall River emergency clinic has been arraigned on charges that it allegedly improperly billed the state Medicaid program more than \$80,000 for non-reimbursable physical therapy services - in violation of the Medicaid False Claims Act, Attorney General Tom Reilly announced today.

Fall River Walk-in Emergency Medical Office, P.C., a Massachusetts professional corporation whose principal place of business is 427 Plymouth Avenue in Fall River, was arraigned today in New Bedford Superior Court. The medical office was charged with one count each of violating the Medicaid False Claims Act and larceny over \$250. Justice Gary Nickerson took the corporation's not guilty plea and continued the case to June 30, 2005.

Fall River Walk-in Emergency Medical Office is owned and operated by Tushar Patel, M.D. The clinic was indicted on December 7, 2004 by a Bristol County grand jury on one count each of violation of the Medicaid False Claims Act and larceny over \$250. The indictments allege that from May 2000 through May 2003, the corporation systematically defrauded the Medicaid program of \$85,650 by filing 6,346 claims for physical therapy services performed by chiropractors for hundreds of patients.

Medicaid regulations require physical therapy services to be performed either by a licensed physician or a licensed physical therapist. In this case, the services were allegedly performed by chiropractors employed by the corporation, who were not licensed for physical therapy services.

The Fall River clinic employed several physicians and chiropractors, and included a clinical laboratory and diagnostic imaging services. Most of the patients seen at the clinic were Medicaid recipients, workers compensation claimants, or alleged victims of automobile accidents. In addition to the alleged improper billing practice, a 2003 audit by the Massachusetts Medicaid agency, focused on quality of care issues resulted in Dr. Patel being suspended from participation in the Medicaid program for two years. Information provided to the Attorney General as a result of the audit was instrumental in triggering the probe which led to the criminal indictments.

The investigation is ongoing.

Assistant Attorney General Peter Clark of AG Reilly's Medicaid Fraud Control Unit is handling the case, which was investigated by Investigator Shirley Rokosz.