“Operation Happy Clickers” Emphasizes Need for Telehealth Whistleblowers

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“Bombardment” by overseas call centers, 18 seconds to prescriptions, and “blatant fraud”—telemarketing and telemedicine are not supposed to be cash cows for fraudsters. The United States Department of Justice, HHS-OIG, the FBI, and a slew of U.S. Attorney offices have conducted several takedown operations of massive
Telehealth fraud schemes in the past two years, with losses ranging between $1.2 billion to $6 billion. Most recently in Michigan, a takedown effort dubbed “Operation Happy Clickers” for the speed with which medical practitioners clicked to prescribe medically unnecessary durable medical equipment (DME) and genetic tests, resolved $7.3 million in alleged fraud losses to Medicare.

In Michigan, four medical practitioners rapidly signed off on medically unnecessary DME and genetic testing orders, in a scheme to enrich themselves through fraudulent Medicare claims. Telemarketers with no medical background gathered leads by aggressively pursuing Medicare beneficiaries. The marketers then funneled the leads to medical practitioners, who they paid to sign off on medically unnecessary DME and cancer genetic testing orders “under the guise of telemedicine.” Finally, the marketing companies turned around and “sold those signed orders to the owners the DME supply companies and laboratories in violation of the federal anti-kickback statute.”

Of the four Michigan medical practitioners involved in this scheme, they all showed a lack of care and caution in scrutinizing from where they received their patient referrals and in reviewing patient records to determine whether a device or test was medically necessary. One nurse practitioner pled guilty to one count of “making a false statement relating to health care matters” and admitted he approved a volume of 335 patient files in a week, averaging 18 seconds per patient. In terms of short medical visits, that sets a new low.

Telemedicine enabled these practitioners to rapidly approve a high volume of medically unnecessary devices and tests, for no purpose other than to enrich themselves at the taxpayers’ expense. Imagine if they had “used their powers for good” and used technology to advance public health or to better serve vulnerable and elderly Medicare beneficiaries.

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