

Oz Goes After California Fraud, Announces Sweeping Arrests

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- The Trump administration announced sweeping arrests and criminal charges over health-care fraud in California, with eight defendants arrested for allegedly scheming to defraud the US health-care system of more than \$50 million.
- Nurses, a psychologist, and a chiropractor are among the defendants accused of recruiting beneficiaries who were not terminally ill and paying them to pose as patients receiving hospice care.
- The effort is part of the Trump administration's efforts to combat health fraud, with Administrator for the Centers for Medicare & Medicaid Services Mehmet Oz saying "If you're defrauding Medicare, start running. Because we are coming for you."

The Trump administration Thursday announced sweeping arrests and criminal charges over health-care fraud in California.

Nurses, a psychologist, and a chiropractor are among the eight defendants arrested for allegedly scheming to defraud the US health-care system of more than \$50 million, according to a press release issued by the US Attorney's Office, Central District of California. The announcement follows [reports](#) of federal arrests of Los Angeles area hospice owners, who were accused of stealing millions in taxpayer dollars for end-of-life care.

"If you're defrauding Medicare, start running. Because we are coming for you," Mehmet Oz, administrator for the Centers for Medicare & Medicaid Services, said in a Thursday press conference.

The effort comes as the Trump administration ratchets up efforts to combat health fraud, including an [executive order](#) from President Donald Trump launching a task force led by Vice President JD Vance.

A March [investigation](#) from CBS News found that over 700 of about 1,800 hospices in Los Angeles County raise concerns for fraud under the state definition. The investigation also said California's state auditor had previously noted an increase of 1,500% in hospice companies since 2010.

California, along with Maine, New York and Minnesota, have **been targeted** by the administration with allegations of Medicaid fraud.

In January, the CMS sent **a letter** to California, requesting information on provider oversight and program integrity, noting that In-Home Supportive Services expenditures in the state had ballooned by almost 350% over a decade.

Thursday's action targeted individuals accused of defrauding Medicare via so-called sham hospice care facilities in the Los Angeles County area. First Assistant US Attorney for the Central District of California Bill Essayli said 15 people were charged for engaging in fraud.

"These defendants recruited beneficiaries who were not terminally ill and paid them to pose as patients receiving hospice care," Essayli said. Medicare then paid "hundreds of millions of dollars on false and fraudulent claims submitted by fraudsters. This happens often way too much, particularly here in LA County."

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