

## Compliance Today – October 2020

### A review of recent healthcare enforcement actions

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By Sascha Matuszak

A series of enforcement actions in July resulted in hundreds of millions of dollars in fines for organizations in the healthcare industry. Several cases were brought to court under the qui tam provisions of the False Claims Act, in which private parties can bring suit on behalf of the government and are eligible to share in any recovery.

The fines range from \$16.7 million, paid by Longwood Management Corporation and 27 affiliated skilled nursing facilities for submitting fraudulent claims,<sup>[1]</sup> to more than \$642 million paid by Novartis Pharmaceuticals Corporation for violations of the False Claims Act, including paying kickbacks to doctors.<sup>[2]</sup>

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