



Government Enforcement and the Opioid Crisis

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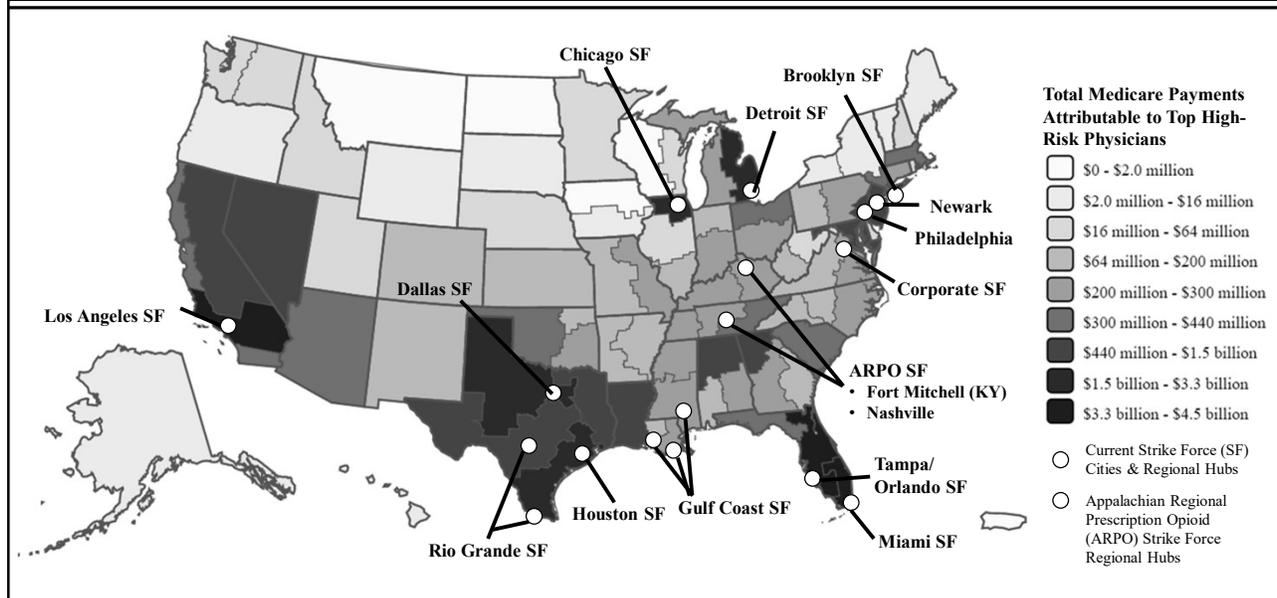
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The Health Care Fraud Strike Force Model

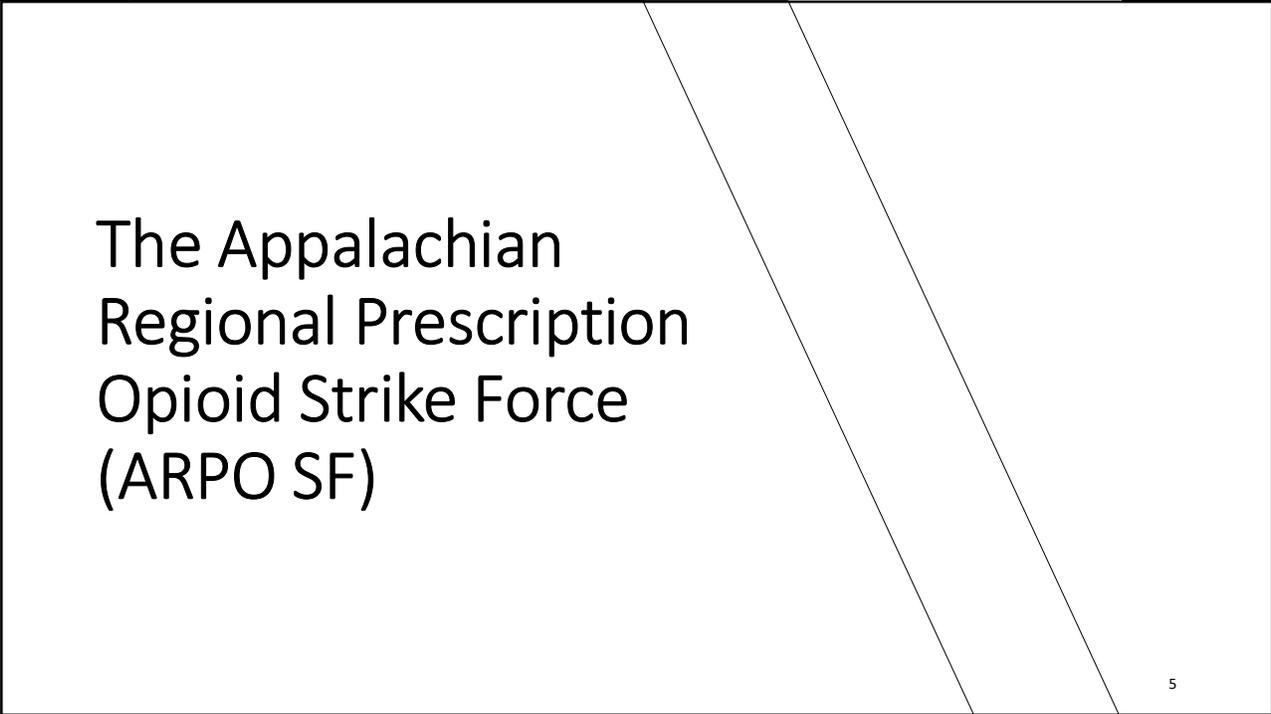
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Current Health Care Fraud Strike Force Locations: HCF Hot Zones Identified Through Data Analytics



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ARPO SF Launch

FOR IMMEDIATE RELEASE
Thursday, October 25, 2018

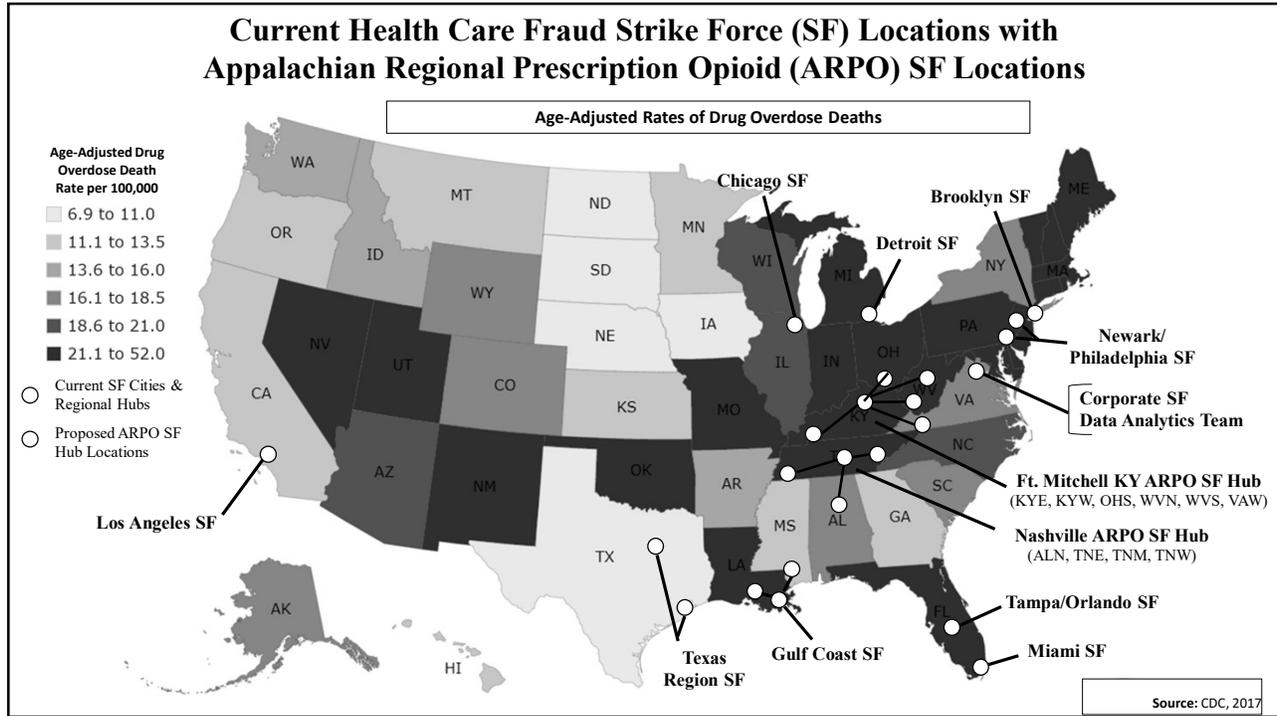
Justice Department's Criminal Division Creates Appalachian Regional Prescription Opioid Strike Force to Focus on Illegal Opioid Prescriptions

Assistant Attorney General Brian A. Benczkowski of the Justice Department's Criminal Division today announced the formation of the Appalachian Regional Prescription Opioid Strike Force (ARPO Strike Force), a joint law enforcement effort that brings together the resources and expertise of the Health Care Fraud Unit in the Criminal Division's Fraud Section (HCF Unit), the U.S. Attorney's Offices for nine federal districts in five states, as well as law enforcement partners at the FBI, U.S. Department of Health and Human Services Office of the Inspector General (HHS-OIG) and U.S. Drug Enforcement Administration (DEA). The mission of the ARPO Strike Force is to identify and investigate health care fraud schemes in the Appalachian region and surrounding areas, and to effectively and efficiently prosecute medical professionals and others involved in the illegal prescription and distribution of opioids.

Assistant Attorney General Benczkowski was joined in the announcement by U.S. Attorney Robert M. Duncan Jr. for the Eastern District of Kentucky; U.S. Attorney Russell M. Coleman for the Western District of Kentucky; U.S. Attorney Benjamin C. Glassman for the Southern District of Ohio; U.S. Attorney William J. Powell for the Northern District of West Virginia; U.S. Attorney Michael B. Stuart for the Southern District of West Virginia; U.S. Attorney J. Douglas Overbey for the Eastern District of Tennessee; U.S. Attorney Donald Q. Cochran for the Middle District of Tennessee; U.S. Attorney D. Michael Dunavant for the Western District of Tennessee; U.S. Attorney Jay E. Town for the Northern District of Alabama; Assistant Director Robert Johnson of the FBI's Criminal Investigative Division; Deputy Inspector General for Investigations Gary L. Cantrell of the Department of Health and Human Services Office of Inspector General (HHS-OIG) and Assistant Administrator John J. Martin of the DEA Diversion Control Division.

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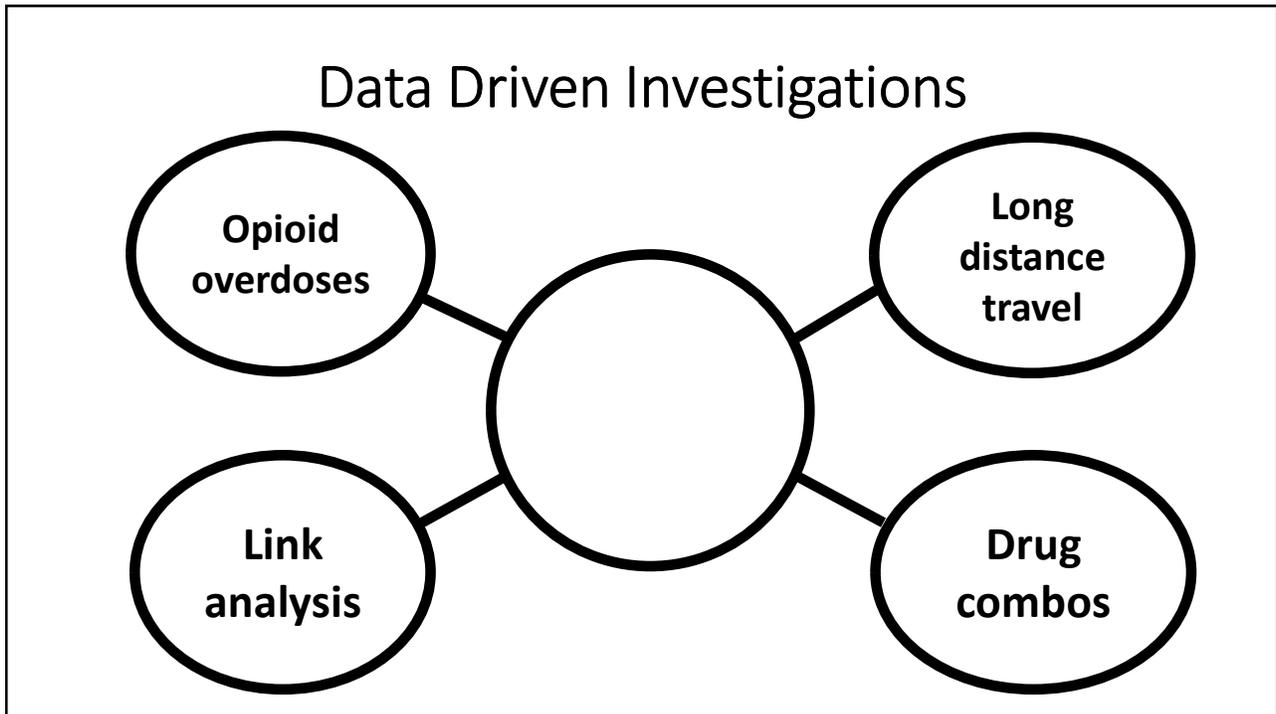
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Chris Covington, Assistant Special Agent in Charge Health and Human Services Office of the Inspector General

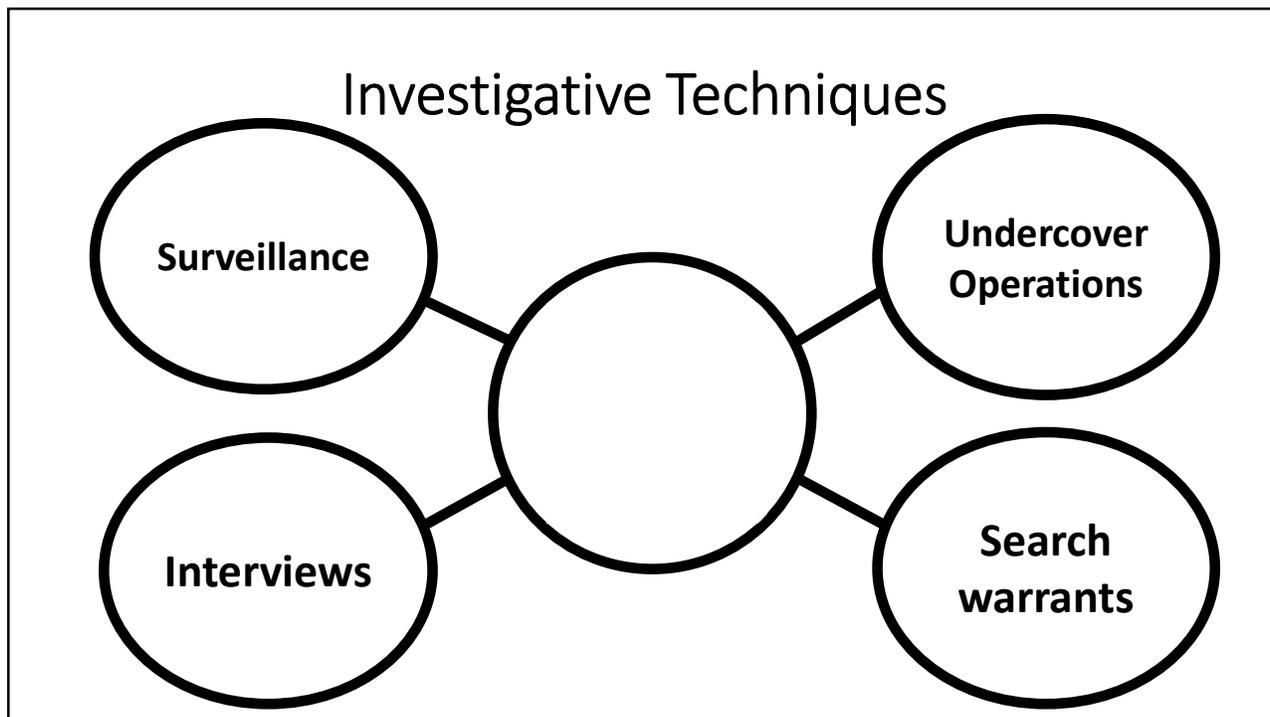
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Undercover Patient Visits



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Impact of Opioids on delivery system and the governments response

Administrative, Civil, and Criminal responses

Matthew Whitmire

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Diversion In Indiana Administrative Actions

- 150,000 nurses in Indiana
- 381,449 nurses in Florida

- 10-15% of the general population has a Substance Use Disorder (SUD) (American Nurse Association)

- Using the low end of 10%, that means 15,000 nurses in Indiana, 38,000 in Florida currently have or will have a problem with SUD

- ISNAP has maybe ~600 in monitoring. Where are the rest?
- Intervention Project for Nurses (IPN) (served 25,000 since 1983)

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Impact on Delivery System: Diversion Isn't Just About Stolen Pills

David Kwiatkowski

In May 2012, patients at the Cath lab where he was working were found to have contracted Hep C - which was traced back to Kwiatkowski.

He had been injecting himself with patient medications (fentanyl) which resulted in him sharing syringes with patients. Employed at 18 hospitals in seven states before being hired at New Hampshire's Exeter Hospital in 2011. Kwiatkowski had moved from job to job despite being fired at least four times over allegations of drug use and theft.

Ultimately, 12,000 patients had to be tested and at least 45 were found to be infected. Sentenced to 39 years.

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Civil Actions

“Acknowledging that the cost to UPMC could be “considerable,” the state Supreme Court will allow a lawsuit to move forward against the health system, saying dozens of patients contracted hepatitis C because of its failure to report an employee who stole fentanyl

The patients and their families filed suit, alleging University of Pittsburgh Medical Center (UPMC) failed to report the drug diversion to the Drug Enforcement Administration within one business day — a requirement under the Controlled Substances Act.

If UPMC had properly reported Mr. Kwiatkowski to the DEA as required under federal law, Justice Wecht wrote, it is possible he would have been prosecuted and would not have been able to put other patients in harm's way, since he would no longer have had access to controlled substances.”

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Does a compliance program have to report?

Law Enforcement/MFCU?

Indiana State Board of Nursing? 848 IAC 2-2-2 (FL XXXII 456-072 (i))

- yes, if you are a nurse also

Drug Enforcement Administration? 21 CFR 1301.76

- yes, if you are a pharmacy (Loss of Medication)

Indiana Board of Pharmacy 856 IAC 2-3-35(b) (FL XXXII 465-022 (11)(b))

Indiana State Nurses Assistance Program?

Consumer Complaint to the Office of the Indiana Attorney General?

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Search Warrants, License Suspension, and Arrests and Convictions

All have possibility to disrupt patient care – how have we dealt with this issue in Indiana...

- Work with Local and State Health Department;
- Doctors identified to help patients;
- Licensing board giving waivers to prescribers for a set period time for specific transfer patients;
- Education