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State Comptroller's Office seeks to bar three New Jersey health care facilities from the Medicaid program

Patient records were falsified and facilities billed Medicaid on days when they were closed, Notice of Claim alleges

The Office of the State Comptroller (OSC) filed a \$2.7 million claim today against a group of health care facilities in Neptune and Lawrenceville that are alleged to have submitted thousands of improper Medicaid reimbursement claims in order to obtain compensation to which they were not entitled.

At one of the facilities, according to the Notice of Claim, fraudulent entries were made on patient medical records during OSC's investigation to create the false appearance that certain health care services had been provided.

"The integrity of the Medicaid program is dependent on health care providers acting in an ethical manner," State Comptroller Matthew Boxer said. "In this case, the overbillings that we allege occurred, along with the effort to cover up those overbillings, were particularly brazen."

The investigation also found that the facilities sought reimbursement from Medicaid for hundreds of patients who were not in attendance on the days billed, as well as for services that actually were provided by a different vendor. One facility billed Medicaid for health care and transportation services on two separate days on which the facility was closed.

The action filed by OSC seeks to have Howard Lundy – the owner of Guiding Light Behavioral Health Inc. (Neptune, NJ), Brighter Day Behavioral Health Inc. (Lawrenceville, NJ) and Guiding Light Drug and Alcohol Treatment Service (Neptune, NJ) – personally debarred from participating in the Medicaid program for a period of five

years. In addition, the license to provide health care services to Medicaid beneficiaries would be terminated for all three of those facilities.

In total, OSC alleges that the three companies submitted more than 2,800 false Medicaid claims between September 2009 and March 2012.

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