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Division of Medical Assistance and Health Services
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Commissioner

GREGORY WOODS
Assistant Commissioner

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES

UNITED MEDICAL ASSOCIATES, LLC, :
SREE PATEL, FARHEEN MASSOOD, :
AND ESTATE OF :
FARHEEN MASSOOD, :

PETITIONERS, :

v. :

MEDICAID FRAUD DIVISION, :

RESPONDENT. :

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 18167-2019

As Assistant Commissioner for the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision and the Office of Administrative Law (OAL) case file. No exceptions were filed in this matter. Procedurally, the time period for the Agency Head to render a Final Agency Decision is September 26, 2024, in accordance with an Order of Extension.

This matter arises from the Medicaid Fraud Division's (MFD) Notice of Claim in the amount of \$585,040.65 for Medicaid payments received by Petitioners in violation of N.J.A.C. 13:35-6.16, which stated that Patel and Massood, the owners of United Medical Associates, LLC, (UMA) were not physicians, and thus operated an unlawfully structured medical practice. (R-8). MFD filed a Certificate of Debt against UMA, Patel and Massood with the Clerk of the Superior Court of New Jersey, pursuant to N.J.S.A. 30:4D-17(h). (R-
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1). Petitioners requested a fair hearing at the OAL.

After discovery exchanges, settlement discussions, and numerous telephonic conferences, MFD indicated that it would be moving for summary decision by April 15, 2024. ID at 3. Petitioners agreed that they would oppose the motion by May 20, 2024. Ibid. MFD filed the motion and Petitioners did not file a response. Ibid.

A summary decision "may be rendered if the papers and discovery which have been filed, together with the affidavits, if any, show that there is no genuine issue as to any material fact challenged and that the moving party is entitled to prevail as a matter of law." N.J.A.C. 1:1-12.5(b). In Brill v. Guardian Life Ins. Co., 142 N.J. 520 (1995), the New Jersey Supreme Court addressed the appropriate test to be employed in determining the motion:

A determination whether there exists a "genuine issue" of material fact that precludes summary judgment requires the motion judge to consider whether the competent evidential materials presented, when viewed in the light most favorable to the non-moving party, are sufficient to permit a rational fact finder to resolve the alleged disputed issue in favor of the nonmoving party. The "judge's function is not ... to weigh the evidence and determine the truth of the matter but to determine whether there is a genuine issue for trial."

Id. at 540 (quoting Anderson v. Liberty Lobby, Inc., 477 U.S. 242, 250 (1986)).

In evaluating the merits of the motion, "all inferences of doubt are drawn against the movant and in favor of the opponent of the motion." Judson v. Peoples Bank & Trust Co. of Westfield, 17 N.J. 67, 75 (1954). However, "when a motion for summary decision is made and supported, an adverse party in order to prevail must by responding affidavit set forth specific facts showing that there is a genuine issue which can only be determined in an evidentiary proceeding." N.J.A.C. 1:1-12.5(b).

The Administrative Law Judge (ALJ) concluded that no genuine issues of material fact existed which required a plenary hearing to determine whether Petitioners are liable

for Medicaid overpayments and therefore the matter was ripe for summary decision. ID at 7.

The New Jersey Medical Assistance and Health Services Act, N.J.S.A. 30:4D-1 to -19.5, gives MFD broad authority to protect the integrity of the Medicaid program. N.J.S.A. 30:4D-7(h) authorizes MFD to determine where an overpayment has been made and the ability to take all necessary actions to recover those overpayments.

The ALJ concluded that Petitioners violated N.J.S.A. 13:35-6.16(f)(2), and must disgorge \$585,040.65 to the State, along with interest to be calculated by MFD, pursuant to the terms of MFD's Second Amended Notice of Claim. ID at 8. I agree. UMA was owned by non-physicians Patel and Massood, in direct violation of N.J.A.C. 13:35-6.16. ID at 4. UMA employed two medical doctors who were enrolled with DMAHS to provide medical services in New Jersey. Ibid. Medicaid claims submitted under the two doctors' names were paid out to UMA in violation of N.J.S.A. 13:35-6.16(f)(2). ID 4-5.

Accordingly, and based on my review of the record, I hereby ADOPT the Initial Decision and FIND that Petitioners are liable for the overpayment identified in MFD's April 14, 2023 Second Amended Notice of Claim, in the amount of \$585,040.65, along with interest to be calculated by MFD.

THEREFORE, it is on this 21st day of September 2024,

ORDERED:

That the Initial Decision is hereby ADOPTED.



Gregory Woods, Assistant Commissioner
Division of Medical Assistance and Health Services