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First Quarter 2012 Update on Industry Trends in Health Care Fraud Enforcement

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In this [first installment](#) of Mintz Levin's [Health Care Fraud Enforcement Defense Group's](#) periodic updates on health care enforcement activities in 2012, [Brian Dunphy](#), [Hope Foster](#), [Samantha Kingsbury](#), [Tracy Miner](#), and [Stephanie Willis](#) focus on significant civil settlements, criminal prosecutions, and regulatory developments that occurred in the first quarter of 2012. This update follows our [Year in Review](#) series focusing on 2011 enforcement activities.

In the past quarter, settlements pursuant to state and federal civil false claims acts accounted for substantial health care fraud recoveries. Additionally, the federal government continued to pursue prosecutions and settlements in its traditional industries of focus, including pharmaceutical and device companies, home health, and hospice care, and analysis of claims data is becoming an increasingly important government tool for health care fraud enforcement.

Health care providers and pharmaceutical and medical device manufacturers should continue to monitor enforcement trends, evaluate their risks, and take appropriate preventive steps.

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