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BRIEFING ROOM**Former Veterans Affairs Psychiatrist Pleads Guilty To Medicare Fraud****FOR IMMEDIATE RELEASE**

October 30, 2013

BROOKLYN, NY – Earlier today, Dr. Mikhail L. Presman, a licensed psychiatrist employed by the Department of Veterans Affairs (VA), pleaded guilty to health care fraud in federal court in Brooklyn. For over seven years, Dr. Presman lied about providing home medical treatment to Medicare beneficiaries and falsely billed Medicare for more than \$1.2 million through the submission of fraudulent claims. As part of the guilty plea, Dr. Presman agreed not to contest the forfeiture of his ill-gotten gains, amounting to over \$1.2 million.

The guilty plea was announced by Loretta E. Lynch, United States Attorney for the Eastern District of New York, and Special Agent-in-Charge Thomas O'Donnell of the U.S. Department of Health and Human Services' Office of Inspector General (HHS-OIG). The plea was accepted by United States District Judge I. Leo Glasser.

"Dr. Presman was hired and paid by the taxpayers to treat those who sacrifice so much for our country – our injured veterans. As alleged, by defrauding the Medicare program, he betrayed the trust placed in him and stole from the very taxpayers who paid his salary. Far from honoring their sacrifice, Dr. Presman used our veterans as a cover for deceit and fraud," stated United States Attorney Lynch. "We will root out Medicare fraud in our community wherever we find it." Ms. Lynch thanked the Department of Justice, Criminal Division, Fraud Section and HHS-OIG for their work on the investigation.

According to court documents, from January 1, 2006 through May 10, 2013, Dr. Presman submitted approximately \$4 million in Medicare claims for home treatment of Medicare beneficiaries, notwithstanding his full-time, salaried position as a psychiatrist at the VA hospital in Brooklyn. Contrary to his false representations, Dr. Presman did not provide any treatment to a substantial number of the beneficiaries he claimed to have treated. For example, on a number of occasions, Dr. Presman submitted claims to Medicare for home medical visits at locations within New York City even though he was physically located in China at the time of these purported home visits. Additionally, Dr. Presman submitted claims to Medicare for 55 home medical visits to beneficiaries who were hospitalized on the date of the purported visits.

Dr. Presman is scheduled to be sentenced on February 13, 2014. At sentencing, he faces a maximum sentence of 10 years' imprisonment, over \$1.2 million in mandatory restitution, and a fine of up to \$2.4 million.

The case was investigated by HHS-OIG, brought as part of the Medicare Fraud Strike Force, and supervised by the U.S. Attorney's Office for the Eastern District of New York and the Criminal Division's Fraud Section. The case is being prosecuted by Assistant United States Attorney Patricia E. Notopoulos and Department of Justice Trial Attorney Bryan D. Fields.

Since its inception in March 2007, the Medicare Fraud Strike Force, now operating in nine cities across the country, has charged more than 1,500 defendants who have collectively billed the Medicare program for more than \$5 billion. In addition, HHS's Centers for Medicare & Medicaid Services, working in conjunction with HHS-OIG, is taking steps to increase accountability and decrease the presence of fraudulent providers.

To learn more about the Health Care Fraud Prevention and Enforcement Action Team (HEAT), go to: www.stopmedicarefraud.gov.

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Giving Back to the Community through a variety of venues & initiatives.

**STOPFRAUD.GOV****Reporting Suspected Fraud**

The Financial Fraud Enforcement Task Force maintains a wide list of resources and information dedicated to helping find and report suspected cases of financial fraud.

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MIKHAIL L. PRESMAN, M.D.

Age: 56

Brooklyn, New York

E.D.N.Y. Docket No. 13-CR-576



EASTERN DISTRICT *of* NEW YORK
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