



Department of Justice

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Middle District of Florida

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OCCUPATIONAL THERAPIST ASSISTANT CHARGED WITH HEALTHCARE FRAUD AND IDENTITY THEFT IN CONNECTION WITH MEDICAID BILLINGS

Tampa, FL - United States Attorney Robert E. O'Neill announces the return by a grand jury of an indictment charging Patrick Crisler (45, Inverness) with six counts of health care fraud and six counts of aggravated identity theft. If convicted on all counts, Crisler faces a maximum penalty of 10 years in federal prison on the healthcare fraud charge, a fine of \$250,000, or twice the gross gain/loss caused by the offense, whichever is greater, and a term of supervised release of not more than three years. He faces a consecutive mandatory minimum of two years in federal prison on the aggravated identity theft counts. The indictment also notifies Crisler that the United States intends to seek a money judgment or forfeit any assets which are alleged to be traceable to proceeds of the offense. Crisler was first arrested on these charges on February 17, 2011.

According to the indictment, Crisler, an occupational therapy assistant and owner of Active Life Rehab, Inc., was charged with health care fraud and aggravated identity theft for submitting fraudulent claims of more than \$1 million to the Medicaid program for occupational therapy services that were either not provided at all, or not provided as billed to Medicaid. Specifically, Crisler is alleged to have falsified patient records and knowingly engaged in "upcoding" by using the unauthorized Medical Provider Numbers of other

licensed occupational therapists to submit claims to Medicaid for payment to Active Life Rehab.

An indictment is merely a formal charge that a defendant has committed a violation of the federal criminal laws, and every defendant is presumed innocent unless, and until, proven guilty.

This case was investigated by the local Medicare Fraud Strike Force, which is comprised of agents from the Tampa Regional Office of HHS Office of the Inspector General (HHS-OIG), the Federal Bureau of Investigations (FBI), the Florida Attorney General's Medicaid Fraud Control Unit (MFCU), Florida Department of Law Enforcement (FDLE), and the Defense Criminal Investigative Service Office of Investigations, and is charged with investigating fraudulent claims to the Medicare, Medicaid, and other health insurance programs. The case will be prosecuted by Assistant United States Attorneys Kelley C. Howard-Allen and Amanda Riedel.