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**CHICAGO PHYSICIAN SENTENCED TO 30 MONTHS IN PRISON FOR  
HEALTH CARE FRAUD INVOLVING UNNECESSARY PATIENT TESTS**

CHICAGO — A physician who operated a south side medical clinic, **Dr. Jaswinder Rai Chhibber**, was sentenced to 2½ years in federal prison for engaging in a health care fraud scheme between 2007 and July 2010, federal law enforcement officials announced today. Chhibber, who operated the former Cottage Grove Community Medical Clinic, located at 642 East 79<sup>th</sup> St., Chicago, was convicted following a trial in March of defrauding Blue Cross Blue Shield of Illinois by submitting false insurance claims for medically unnecessary tests he ordered for patients and using false diagnosis codes to justify those tests.

Chhibber, 50, of Schaumburg, was ordered to begin serving his 30-month prison term on Sept. 5 by U.S. District Judge Suzanne Conlon, who imposed the sentence, along with a \$15,000 fine, late yesterday in Federal Court.

Chhibber was found guilty of five counts of healthcare fraud and four counts of making false statements involving a health care benefits program after a week-long trial. The jury found him not guilty of seven additional counts.

The evidence at trial showed that Chhibber ordered medically unnecessary tests, falsified patients' medical records, and used false diagnosis codes on insurance claim forms in various fashions for at least five patients who testified at trial, including two undercover federal agents who posed as patients. Evidence also showed that Chhibber administered echocardiograms, electrocardiograms, nerve conduction studies, carotid doppler exams, and abdominal ultrasounds for an unusually high percentage of his patients.

The sentence was announced by Gary S. Shapiro, Acting United States Attorney for the Northern District of Illinois, together with Lamont Pugh III, Special Agent-in-Charge of the Chicago Region of the U.S. Department of Health and Human Services Office of Inspector General, and Robert D. Grant, Special Agent-in-Charge of the Chicago Office of Federal Bureau of Investigation. The U.S. Department of Labor Office of Inspector General and the U.S. Railroad Retirement Board Office of Inspector General also participated in the investigation.

The investigation was conducted by the Medicare Fraud Strike Force, which expanded to Chicago in 2011, and is part of the Health Care Fraud Prevention & Enforcement Action Team (HEAT), a joint initiative between the Justice Department and HHS to focus their efforts to prevent and deter fraud and enforce anti-fraud laws around the country.

The government is being represented by Assistant U.S. Attorneys Joel Hammerman and Samuel B. Cole.

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