



## PRESS RELEASE

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### **Cardiac Care Providers Agree to Pay Over \$80,000 for Alleged Medicaid Fraud**

**BALTIMORE, MD (April 23, 2019)** – Maryland Attorney General Brian E. Frosh announced today that the following five cardiac care providers agreed to pay \$81,234.80 to resolve allegations that they submitted false claims for Medicaid services:

- Cardiac Associates, P.C., a practice with offices in Rockville, Olney, Laurel and Germantown, paid \$30,143.20;
- Horizon Vascular Specialists, with locations in Olney, Rockville, Frederick and Germantown, paid \$26,113.50;
- St. Agnes Healthcare, Inc. of Baltimore paid \$19,868.10;
- Riverside Medical Associates of Riverdale paid \$3,152;
- Maryland Specialty Group, a Glenn Dale-based practice, paid \$1,958.

The Attorney General’s Medicaid Fraud Control Unit alleged the providers submitted false claims to Medicaid for two similar procedures on the same date for the same patient when only one procedure was actually performed. Specifically, the providers administered tests to patients to assess the sufficiency of veins in their lower extremities but also billed for an additional outmoded test no longer in use by most cardiac providers. The providers also reached settlements with the federal government.

The settlements arose from a joint effort with the U.S. Attorney’s Office for the District of Maryland. In making today’s announcement, Attorney General Frosh thanked the Medicaid Fraud Control Unit for its work on the case, specifically Assistant Attorney General Raja Mishra.