The allegations in this case are serious and disturbing. In brief, FORBA, the manager of a chain of 68 pediatric dental clinics in 22 States and the District of Columbia, allegedly directed a pervasive practice of causing false and fraudulent claims to be submitted to Medicaid for unnecessary and potentially dangerous services to children in an attempt to maximize profits.

As Tony West mentioned, our investigation found that FORBA-managed clinics billed Medicaid for excessive and unnecessary services, including pulpotomies (often called “baby root canals”), crowns, extractions, fillings and sealants; and, in too many cases, not performed to professionally recognized standards of care.

Our investigation also found that:

- They also administered anesthesia and x-rays, often by unlicensed, non-certified staff, in a manner that did not meet professionally recognized standards of care, and sometimes were not medically necessary.
- They further employed behavioral management techniques, including the use of papoose boards, in a manner that did not meet professionally recognized standards of care. The manner in which they allegedly used papoose boards has the potential to cause children undue pain, suffering, and trauma.
- FORBA-managed clinics also failed to obtain informed consent for certain dental procedures and services.

As these allegations came to light, we launched “Operation Bite Back” with joint investigative and prosecutorial teams from OIG, the Justice Department, and State Medicaid Fraud Control Units across the country. The $24 million settlement with FORBA we announce today is the culmination of work by special agents, attorneys, and auditors across Federal and State agencies, as well as whistleblowers and investigative reporters.
OIG’s mission is to fight Medicaid fraud in all forms. I have made cases involving substandard care or harmful patient treatment a particular focus for our office. Cases like this one – involving alleged harm to vulnerable children in addition to the financial fraud shouldered by taxpayers – are especially egregious. My office and our partners in the Justice Department and the States take these matters very seriously.

In addition to the financial settlement, FORBA is required to enter into a Corporate Integrity Agreement with OIG. We believe the stringent terms of this agreement, coupled with the built-in oversight mechanisms, will help to deter future misconduct and ensure that FORBA's dental clinics provide appropriate and high quality care in the future.

Under the integrity agreement, FORBA must:

- increase accountability, responsibility, and transparency by its Board of Directors and officers, including certifications of compliance and utilization of management tools to assess and monitor quality of care in FORBA clinics;
- increase monitoring by retaining independent, external reviewers to monitor FORBA’s quality of care and reimbursements;
- ensure that its Chief Dental Officer develops and implements policies and procedures to ensure that FORBA’s clinics provide services that meet professionally recognized standards;
- appoint a Patient Advocate responsible for recording, remedying, and responding to comments, concerns, and complaints by patients of FORBA facilities and for ensuring that materials related to quality of care and providing contacts for making complaints are disseminated to patients (in English and Spanish); and
- terminate its relationship with any individual who violates professionally recognized standards of care and notify authorities after finding such a violation.

OIG will continue to monitor cases against individual dentists involved in the misconduct and will exclude those individuals where appropriate.

In closing, I’d like to thank OIG’s special agents, attorneys, and auditors, our law enforcement partners in the Justice Department and in the States, the whistleblowers who came forward with critical information, and the investigative
work by the media. All contributed to the successful resolution of this case. We look forward to continued collaboration to protect our most vulnerable citizens and programs from fraud, waste, and abuse.