

OIG Investigation leads to guilty plea in \$9 million health care fraud case

March 7, 2024

NEWARK, N.J. — A New York acupuncturist pleaded guilty today to participating in a health care fraud scheme that caused Amtrak's health care plan to pay over \$9 million in fraudulent claims, according to a press release from the U.S. Attorney's Office, District of New Jersey

Punson Figueroa, aka "Susie," 57, of Long Island City, New York, pleaded guilty to an information charging her with conspiracy to commit health care fraud in U.S. District Court in Newark. According to court documents, Figueroa and her coconspirators engaged in a scheme from around January 2019 through around June 2022 to bill Amtrak's health care plan for services that weren't provided and were medically unnecessary. Figueroa recruited and conspired with dozens of Amtrak employees, providing them with cash in return for allowing her to use their personal and insurance information to submit false and fraudulent health insurance claims.

"We remain fully committed to bringing justice to those who target Amtrak's health care plans, including Amtrak employees who wrongly accept payments for the use of their insurance information to further such schemes," said Amtrak's Inspector General, Kevin H. Winters. "We hope this case serves as a deterrent for health care providers and Amtrak employees who may choose to engage in such schemes, and we ask anyone who suspects or observes such fraud to report it to our fraud, waste, and abuse hotline."

During the investigation, an undercover law enforcement agent met with Figueroa on June 16, 2021, at her office in New York. Figueroa instructed the agent to sign his name about 30 times for services received and instructed the agent not to date the signatures. Figueroa then submitted false claims indicating that the agent had visited providers at least seven times in May 2021 to receive acupuncture and physical therapy.

On July 29, 2021, the undercover agent visited Figueroa's office a final time. At that meeting, Figueroa handed the agent an envelope containing \$1,000. Thereafter, Figueroa continued to use the agent's personal and insurance information to submit dozens of fraudulent claims to Amtrak's health care plan.

The charge of conspiracy to commit health care fraud carries a maximum potential penalty of 10 years in prison and a \$250,000 fine, or twice the gain or loss from the offense, whichever is greatest.

In addition to Amtrak OIG, the case was investigated by Amtrak's Police Department and the Drug Enforcement Agency. More information is available in the U.S. Attorney's Office press release: <u>https://direc.to/k5yT</u>.

Reports of fraud, waste, or abuse, including suspected pandemic relief fraud; criminal or unethical acts affecting Amtrak's property or operations; or mismanagement in Amtrak programs or operations can be made 24 hours a day via the Amtrak OIG Hotline at 1-800-468-5469 or online at https://direc.to/hPAu.

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