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OIG Launches Most Wanted Health Care Fugitives List

Washington, DC – The Office of Inspector General (OIG) of the Department of Health & Human Services today launched its Most Wanted Fugitives List—the first-ever list of individuals sought by authorities on charges of health care fraud and abuse—to focus public attention on its most-wanted fugitives.

“With our Most Wanted Fugitives List, OIG is asking the public’s help in tracking down fugitives. The public has a stake in the fight against fraud, waste, and abuse,” said Inspector General Daniel R. Levinson.

The Most Wanted Fugitives List, at <http://oig.hhs.gov/fugitives> on the OIG Web site, includes photos and profiles of each featured fugitive. The site also includes an online fugitive tip form and the OIG hotline number (1-888-476-4453) to report fugitive-related information in either English or Spanish, 24 hours a day, 365 days a year. The Web page will also indicate when a fugitive’s status changes, including when he or she is captured.

“Individuals who steal from Federal health care programs and then flee from the consequences of their crimes must be held accountable. We hope our new Web page will encourage the public to help us apprehend these fugitives,” said Gerald T. Roy, OIG Deputy Inspector General for Investigations.

The 10 individuals on the Most Wanted Health Care Fugitives List have allegedly cost taxpayers more than \$124 million in fraud. In all, OIG is seeking more than 170 fugitives on charges related to health care fraud and abuse.

OIG’s Most Wanted Fugitives include:

- **Carlos, Luis, and Jose Benitez**, working through their Miami-area HIV infusion clinics, are accused of submitting fraudulent claims to Medicare totaling about \$110 million. OIG alleges that the services for which the brothers billed were medically unnecessary or never administered.

- **Leonard Nwafor** and his co-conspirators billed Medicare for \$1.1 million and collected \$525,000 in fraudulent claims for such durable medical equipment (DME) as motorized wheelchairs, scooters, and hospital beds for beneficiaries. This investigation was led by the Medicare Fraud Strike Force, including OIG investigators, which was created to identify and prosecute fraudulent DME companies and laboratories in the Greater Los Angeles area.
- **Susan Bendigo** is accused of billing Medi-Cal, California's Medicaid program, for \$17.1 million, \$10 million of which she actually collected. Working as director of nursing for a company providing nurses for home health agencies, Bendigo is said to have sent unlicensed nurses to treat Medi-Cal patients, though she knew Medi-Cal required licensed nurses to perform this work.

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