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Sen. Chris Koster Presides Over Senate Panel Targeting Medicaid Provider Fraud

JEFFERSON CITY— This week, Sen. Chris Koster, R-Cass, convened the Senate Special Committee To Investigate Medicaid Fraud. The Committee was established as a response to investigative articles done by the Kansas City Star, which suggested as much as \$575 million dollars a year is lost to errors, over-billings and fraud by doctors, dentists and other health-care providers.

Koster, who chairs the committee, presided over two hearings held on Wednesday and Thursday. Experts from throughout the country, including Missouri, Texas and Maine, testified about the existence of fraud in the state-funded health-care system and suggested ways in which states have worked to combat this epidemic.

"Our investigation will be aggressive and thorough as we determine the extent to which we can rout out fraud and Medicaid providers who are abusing the system," Koster said. "Stealing from the poor is a disgrace, and we will be pursuing legislation that will punish Medicaid fraud kingpins and prevent this despicable crime from happening again."

The committee will report its findings and make recommendations to the General Assembly so lawmakers can draft legislation helping identify and remove criminal providers from the Medicaid system. The Committee is considering increases to criminal penalties and mandatory minimum sentences for acts which defraud Missouri's Medicaid system.

Other members of the committee are: Sen. Jason Crowell, R-Cape Girardeau; Sen. Rob Mayer, R-Dexter; Sen. Maida Coleman, D-St. Louis; and Sen. Yvonne Wilson, D-Kansas City.

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