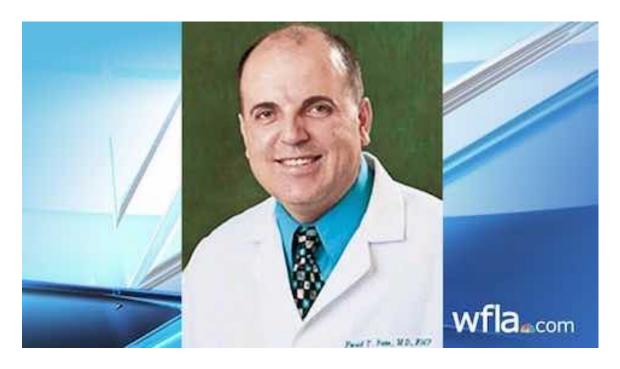


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## Farid Fata Receives 45 Years for Fraudulent Cancer Diagnoses



**Summary:** A doctor who treated hundreds of patients for cancer they did not have will spend the next 45 years behind bars.

According to Newsweek, Dr. Farid Fata has been sentenced to 45 years in prison after pleading guilty or no contest to 23 counts of health fraud, 2 counts of money laundering, and one count of conspiracy to pay and receive kickbacks. However, the description of these

charges hardly addresses the gravity of Fata's crimes.

Federal prosecutors have called him the most egregious fraudster in the history of the United States. Fata, once a prominent hematologist and oncologist, has now had his medical licenses revoked.

Prior to the sentencing hearing on July 6, the government released a memorandum that exceeded 100 pages in length to the public. Prosecutors argued that Fata intentionally prescribed over 9,000 unnecessary injections and infusions to around 553 patients over a 6-year span—which amounted to around \$35 million in insurance billings.

Fata lied to patients about their cancer prognoses by telling them they needed chemotherapy when they really just needed observation. In addition, he told other patients they needed "maintenance" chemo to keep cancer that was in remission away, and he even told those he knew would not survive to stay under his care as he prescribed more and more chemo.

Nicholas G. Evans, a medical ethicist at the University of Pennsylvania, said, "It's one of the most extensive causes of fraud I've heard of. But it involves common problems known about in the field of medical ethics."

Jeffrey Stewart, an attorney who is representing two former clients of Fata's, commented, "Patients develop an almost religious connection to these doctors."

Fata's victims have testified that Fata repeatedly took advantage of the doctor-patient connection to hide the ineffectiveness of the medical treatments. Michele

Mannarino, whose mother was treated by Fata, said, "He stated that [my mother] had a very aggressive cancer that would become untreatable if she stopped chemo and then he wouldn't be able to save her. Several times, when I had researched and questioned his treatment, he asked if I had fellowshipped at Sloan Kettering like he had."

At almost every stage of cancer—including no cancer at all—Fata told his patients that there was a 70 percent chance of remission, but only if they were totally loyal to him. One woman spent her last months angry with her family when they questioned her decision to file bankruptcy to continue treating with Fata. The family's impact statement reads, "She kept putting things off, thinking that she would have time 'when she got better'...[Our mother] was never able to accept she was dying because Fata convinced her she was not." Other patients, according to the Daily Mail, lost their homes as they tried to pay for Fata's treatments.

Fata also tricked patients into taking additional doses of rituximab, an immunosuppressive drug, even after they had treated their lymphoma. Sometimes, they took it for years longer than necessary. At Fata's arrest, these patients' immune systems were permanently damaged. Additionally, some were left with decaying jaws and intense pain caused by Zometa, a bone cancer-fighting drug. One patient lost all but one of his teeth due to unnecessary chemo, according to CNN.

Fata escaped suspicion for a while by claiming the excessive treatments were part of a new "European" or

"French" protocol. He even forged a medical paper after he was arrested that allegedly demonstrated the value of rituximab. In some cases, he denied patients access to their complete medical records, which prevented them from seeking a second opinion.

Angela Swantek is an oncology nurse with 19 years of experience. She went in for an interview with Fata in the spring of 2010, and left concerned over the care she saw patients receiving.

Swantek noticed that patents were hooked up to infusion chairs receiving medications that were meant for quick IV injections. Additionally, she noticed treatments like Neulasta, a human growth factor, being administered right after chemo, instead of after 24 hours, the recommended method of treatment. When Swantek asked a nurse about their procedures, the nurse responded, "That's just the way we do things here."

Swantek reported her concerns to Michigan's Bureau of Health Professions in March. A year later, in May 2011, she was told that an investigation cleared Fata of wrongdoing, although she says the state never reached out to her.

The state Department of Licensing and Regulatory Affairs (LARA) has maintained that it investigated to the best of its ability. However, it has claimed that it cannot release information because of privacy laws.

Brian McKeen, an attorney who represents several of Fata's former patients, has complained about the

obscurity present in the medical field. For example, medical peer review allows professional organizations like the American Medical Association and hospitals to conduct internal reviews of members and staff without the possibility of scrutiny. In Michigan, the reports may be released to the public, but the identity of anyone in the investigation may not be revealed. The information may also not be revealed to attorneys, like McKeen, who are trying to build a case of negligence.



The policy is supposedly meant to safeguard those who want to report doctors, but it also means that the public does not know about a physician's former charges of negligence. None of Fata's patients were able to know about the 2010 charges against him, or if the state was justified in finding that he did nothing wrong. Third party attempts to verify whether an investigation was done properly would also be impossible.

Dr. Soe Maunglay began working for Fata's practice in the middle of 2012. Soon after he arrived at the practice, Maunglay asked that a physician be present when a patient was receiving chemotherapy. In response, Fata assigned Maunglay to a location and hours that kept him away from his patients. Later, Maunglay caught Fata lying about the practice having certification from the Quality Oncology Practice Initiative program when it did not. Faunglay ended up resigning due to his frustration.

Maunglay was checking on patients at the Crittenton Hospital Cancer Center, where Fata operated a private clinic, during the 2013 Fourth of July weekend when he noticed Monica Flagg, who had suffered a broken leg. Just a few hours early, she had received the first of many expensive chemo sessions. As Maunglay studied her chart, he realized that she likely did not even have cancer. Maunglay reached out to George Karadsheh, the practice manager, about his concerns, and later Karadsheh reached out to the FBI with his findings.

Many think that Fata got away with his crimes for so long because he was too profitable to turn in. By the time Fata was investigated, his practice had purchased \$45 million worth of drugs per year for a staff of three physicians.

The median amount spent by a full-time oncologist, according to a 2015 report, is between \$1.5 million and \$1.9 million. Fata branched out with a radiation treatment center, Michigan Radiation Institute; an in-house pharmacy, Vital Pharmacare; a diagnostic testing facility, United Diagnostics; and his own charity, Swan for Life.

Fata lined 50 to 60 patients up per day to see unlicensed doctors before he spent 5 to 10 minutes with them at the end of their visit. He pushed for longer or unnecessary treatments, overdosed patients so he could use the entire containers of medication he billed for, pressured dying patients who refused further treatment into staying at the hospice he received kickbacks from, and pressured other patients to use only the services of businesses that he owned. Fata chose money over his patients' health, the case argues.

According to Evans, many doctors unknowingly suggest treatment decisions that make the most money possible. Evans explained that doctors who own expensive equipment were more likely to prescribe it to patients: "The conclusion here is that ownership of expensive-to-access medical services constitutes an incentive to prescribe those services to patients, regardless of whether those patients would benefit more from that service than some other, cheaper therapy," he says.

Additionally, Medicare Part D subsidizes prescription drugs costs with federal dollars, which encourages doctors to increase their bills. A report found that Part D spending has more than doubled since it began in 2006, and that over 1,400 pharmacies engaged in "questionable billing" practices for Part D drugs in 2014 alone.

When he was sentenced, Fata wept in court. "I misused my talents because of power and greed. My quest for power is self destructive." He added that he was "horribly ashamed of [his] conduct" and that he prays for repentance. Fata will also forfeit \$17.6 million.

Attorneys like McKeen and Stewart note that funds available to his former patients is pretty low, due to Michigan's medical malpractice cap of around \$450,000 for punitive damages for pain and suffering. There is no cap in place for economic damages like future earnings, lost wages, and medical expenses. Fata's personal money has been seized by the government.

When the Affordable Care Act was implemented, the Physician Payments Sunshine Act followed in 2014. The Act requires drug and medical product companies who are reimbursed by federal programs to report financial payments or services they provide to teaching hospitals and physicians. It allows everyone to see if conflicts of interest may be present.

McKeen thinks that removing punitive damages caps would be a better move, and Swantek says that there needs to be more involved in the investigations. She commented, "We shouldn't rely on the FBI to police our doctors."

Of course, it's too late for Fata's patients who suffered miserable deaths. McKeen asked, "Where were the checks and balances here?"

Source: Newsweek