

# **Jennings announces settlement with Universal Health Services regarding allegations of improper admissions, discharges**

Attorney General Kathy Jennings announced Friday that Universal Health Services, Inc. ("UHS, Inc.") and a subsidiary of UHS, Inc., UHS of Delaware, Inc., have agreed to a settlement of which \$34,338.73 will go to the Division of Medicaid and Medicaid Assistance (DMMA) within the Delaware Department of Health and Social Services (DHSS).

"We expect all businesses to behave legally and ethically," said Attorney General Jennings. "That's especially true when those businesses are paid by taxpayers and are relied upon by Medicaid recipients. I'm proud of the work that our Fraud Division does to protect consumers and taxpayers across our state."

Universal Health Services, Inc. ("UHS, Inc."), is a for-profit holding company which directly or indirectly owns the assets or stock of inpatient and residential psychiatric and behavioral health facilities that provide services to individuals, including beneficiaries of various federal health care programs. UHS of Delaware, Inc. ("UHS of Delaware, Inc."), a subsidiary of UHS, Inc. provides management services to UHS, Inc. UHS is based in King of Prussia, Pennsylvania and is one of the nation's largest providers of hospital and healthcare services.

The settlement resolves allegations that during the period from January 1, 2007, through December 31, 2018, UHS and

certain enumerated UHS entities submitted or caused to be submitted false claims for services provided to Medicaid beneficiaries resulting from UHS's:

1. admission of beneficiaries who were not eligible for inpatient or residential treatment
2. failure to properly discharge beneficiaries when they no longer needed inpatient or residential treatment
3. improper and excessive lengths of stay
4. failure to provide adequate staffing, training, and/or supervision of staff
5. billing for services not rendered
6. improper use of physical and chemical restraints and seclusion; and
7. failure to provide inpatient acute or residential care in accordance with federal and state regulations, including, but not limited to, failure to develop or update individualized assessments and treatment plans, failure to provide adequate discharge planning, and failure to provide required individual and group therapy.

The government alleges that UHS's conduct violated the Federal False Claims Act and the Delaware False Claims and Reporting Act, resulting in the submission of false claims to the Division of Medicaid within the Department of Health and Social Services.

The public can report suspected Medicaid Fraud to the DOJ's Medicaid Fraud Control Unit at (302) 577-5000 or online at [de.gov/medicaidfraud](http://de.gov/medicaidfraud).