

JUSTICE NEWS

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Attorney General Sessions Announces Opioid Fraud and Abuse Detection Unit

Attorney General Jeff Sessions today announced the formation of the Opioid Fraud and Abuse Detection Unit, a new Department of Justice pilot program to utilize data to help combat the devastating opioid crisis that is ravaging families and communities across America.

Speaking at the Columbus Police Academy today, Attorney General Sessions said that the new Opioid Fraud and Abuse Detection Unit will focus specifically on opioid-related health care fraud using data to identify and prosecute individuals that are contributing to this prescription opioid epidemic.

Additionally, as part of the program, the Department will fund twelve experienced Assistant United States Attorneys for a three year term to focus solely on investigating and prosecuting health care fraud related to prescription opioids, including pill mill schemes and pharmacies that unlawfully divert or dispense prescription opioids for illegitimate purposes.

The following districts have been selected to participate in the program:

1. Middle District of Florida,
2. Eastern District of Michigan,
3. Northern District of Alabama,
4. Eastern District of Tennessee,
5. District of Nevada,
6. Eastern District of Kentucky,
7. District of Maryland,
8. Western District of Pennsylvania,
9. Southern District of Ohio,
10. Eastern District of California,
11. Middle District of North Carolina, and
12. Southern District of West Virginia.

In his speech, the Attorney General discussed the new program:

“First, I am announcing a new data analytics program – the Opioid Fraud and Abuse Detection Unit. I have created this unit to focus specifically on opioid-related health care fraud using data to identify and prosecute individuals that are contributing to this opioid epidemic. This sort of data analytics team can tell us important information about prescription opioids—like which physicians are writing opioid prescriptions at a rate that far exceeds their peers; how many of a doctor’s patients died within 60 days of an opioid prescription; the average age of the patients receiving these prescriptions; pharmacies that are dispensing disproportionately large amounts of opioids; and regional hot spots for opioid issues.

“With this data in hand, I am also assigning 12 experienced prosecutors to focus solely on investigating and prosecuting opioid-related health care fraud cases in a dozen locations around the country where we know enforcement will make a difference in turning the tide on this epidemic. These prosecutors, working with FBI, DEA, HHS, as well as our state and local partners, will help us target and prosecute these doctors, pharmacies, and medical providers who are furthering this

epidemic to line their pockets. These prosecutors will be based in several states across the country, including Kentucky, West Virginia, Tennessee, and right here in Southern Ohio.

“With these new resources, we will be better positioned to identify, prosecute, and convict some of the individuals contributing to these tens of thousands of deaths a year. The Department is determined to attack this opioid epidemic, and I believe these resources will make a difference.”

Full remarks as prepared for delivery are provided below:

Thank you Benjamin (Glassman) for that introduction, and more importantly, thank you for your 12 years of hard work at the Department to keep this community safe. And, of course, thank you to your Attorney General Mike Dewine. I know they care about these issues deeply. And Senator Portman, who couldn't be with us today, but I know firsthand he has been a passionate and steadfast leader in the Senate about tackling the opioid problem for years.

I wanted to be here with you all today because Ohio is at the center of this drug crisis that is gripping our entire nation. This crisis affects all of us, but it is especially taking its toll on this community.

On average, one person in Columbus dies of a drug overdose every day.

And that pace is only accelerating. According to a survey of Ohio's coroners, more than 4,000 Ohioans died of a drug overdose last year. And in Columbus, the coroner has already seen a 66 percent jump this year from the same time last year.

These aren't just numbers. These are moms and dads. These are sisters, brothers, and grandchildren. These are neighbors and co-workers. These are friends. These are Americans.

Just last week, a two-year-old girl in Dayton was hospitalized for a suspected opioid overdose—two years old.

In 2015, more than 52,000 Americans lost their lives to drug overdoses. And the numbers we have for 2016 show another increase—a big increase. Based on preliminary data, nearly 60,000 Americans lost their lives to drug overdoses last year. That will be the highest drug death toll and the fastest increase in that death toll in American history. This is not a sustainable trend nor an acceptable America.

This crisis is being driven primarily by opioids—prescription drugs, heroin, and synthetic drugs like fentanyl.

According to the New England Journal of Medicine, we're seeing more availability, higher purity, and lower price. They're lacing heroin and cocaine with fentanyl—a drug 30 to 50 times more powerful than heroin. As a result, the drugs on the street are now more powerful, more addictive, and more dangerous than ever. And they're not just dangerous for users: even being accidentally exposed to just a few grains of fentanyl can kill a police officer or paramedic.

Sadly, this was almost the case just a couple months ago in East Liverpool, Ohio when Officer Chris Green brushed off a few grains of white powder from his shirt an hour after a traffic stop and fell to the floor. Luckily, he was in his squad room and they got to him immediately. As his police chief said, “if he would have been alone, he would have been dead.” Or imagine if he'd gone straight home that day to give his kids a hug? These are terrifying thoughts for our law enforcement.

To confront a crisis on this scale, we must take a comprehensive approach to the problem. There are three components: prevention, enforcement, and treatment.

Treatment is important. In some cases, treatment can help break the cycle of addiction and crime and help people get their lives back together.

But treatment alone is not enough. Treatment often comes too late. By the time many people receive treatment, they, their families, and communities have already suffered so much. The struggle to overcome addiction can be a long process – and it can fail. And not only can it fail, it very often fails.

In recent years, some of the government officials in this country have sent mixed messages about the harmfulness of drugs. We must not capitulate intellectually or morally to drug use. We must create a culture that is hostile to drug abuse. We know

this can work. It has worked in the past for drugs, but also for cigarettes and seatbelts. A campaign was mounted, it took time, and it was effective. We need to send such a clear message now.

The Department of Justice has been working diligently to improve our prevention efforts. We are doing that through raising awareness, through drug take-back programs, and through DEA's 360 Strategy program – Dayton was recently announced as a 2017 pilot city.

Prevention is what we at the Department do every day—because enforcement is prevention. Enforcing our laws helps keep drugs out of our country, decrease their availability, drive up their price, and reduce their purity and addictiveness.

DEA tells us that 80 percent of heroin addiction starts with prescription drug addiction. We must stop the abuse of prescription drugs.

Earlier this month, the Department announced the largest health care fraud takedown in American history. DOJ coordinated the efforts of more than 1,000 state and federal law enforcement agents to arrest more than 400 defendants. More than 50 of these defendants were doctors and have been charged with opioid-related crimes, which means this was also the largest opioid-related fraud takedown in American history.

And, just a week after we made that announcement, we announced the seizure and take down of AlphaBay— the largest dark net marketplace takedown in history. This site hosted some 220,000 drug sale listings and was responsible for countless synthetic opioid overdoses, including the tragic death of a 13 year old in Utah.

These efforts build on the good work that U.S. Attorney Glassman and the Department have accomplished here. In late January, a doctor from New Albany, Ohio pled guilty to maintaining a clinic as a front for drug trafficking. He forfeited more than \$29 million in seized assets from illegal drug trafficking.

A few months later, in April, a doctor from Portsmouth, Ohio, pled guilty to conspiring to distribute a controlled substance through a pain clinic. For six years, the clinic saw more than 20 patients a day, who each paid at least \$200 in cash. At one point the defendant even opened her own dispensary at the clinic, so she could fill her own prescriptions for desperate patients.

These cases are beginning to roll in from all over the country.

On behalf of the Department, I want to say thank you to U.S. Attorney Glassman and everyone who worked on these cases. You have made this Department proud—and more importantly, you have made the people of Ohio safer.

And we can and must do more. Which is why today, we are announcing a new effort to target our federal resources against this epidemic. If you are a doctor illegally prescribing opioids for profit or a pharmacist letting these pills walk out the door and onto our streets based on prescriptions you know were obtained under false pretenses, we are coming after you. We will reverse these devastating trends with every tool we have.

First, I am announcing a new data analytics program – the Opioid Fraud and Abuse Detection Unit. I have created this unit to focus specifically on opioid-related health care fraud using data to identify and prosecute individuals that are contributing to this opioid epidemic. This sort of data analytics team can tell us important information about prescription opioids—like which physicians are writing opioid prescriptions at a rate that far exceeds their peers; how many of a doctor's patients died within 60 days of an opioid prescription; the average age of the patients receiving these prescriptions; pharmacies that are dispensing disproportionately large amounts of opioids; and regional hot spots for opioid issues.

With this data in hand, I am also assigning 12 experienced prosecutors to focus solely on investigating and prosecuting opioid-related health care fraud cases in a dozen locations around the country where we know enforcement will make a difference in turning the tide on this epidemic. These prosecutors, working with FBI, DEA, HHS, as well as our state and local partners, will help us target and prosecute these doctors, pharmacies, and medical providers who are furthering this epidemic to line their pockets. These prosecutors will be based in several states across the country, including Kentucky, West Virginia, Tennessee, and right here in Southern Ohio.

With these new resources, we will be better positioned to identify, prosecute, and convict some of the individuals contributing to these tens of thousands of deaths a year. The Department is determined to attack this opioid epidemic, and I believe these resources will make a difference.

And I issue a plea to all physicians, dentists, pharmacists: slow down. First do no harm.

These efforts will make all of us safer—and not just from the threat of drug addiction. They also help us reduce violence in our communities.

Drug trafficking is an inherently violent business. If you want to collect a drug debt, you can't file a lawsuit in court. You collect it by the barrel of a gun.

By putting traffickers behind bars and reducing the supply of dangerous drugs, we will prevent much of the violence that is associated with drug dealing.

We also have to recognize that most of the heroin, cocaine, methamphetamine, and fentanyl in this country got here across our Southern border. Under President Trump's strong leadership, the federal government is finally getting serious about securing our borders. Illegal entries are down 50 percent already and the wall has not even gone up.

We have also seen steep decreases in drug prices on the street. But the price we have paid as a country has only gone up. If you ask the economists, they'll tell you that prescription opioid addiction costs our economy some \$78 billion a year and other illicit drugs cost us another \$193 billion a year. Remember, many of these drugs are paid for by private insurance, Medicaid, Medicare, and the VA. But what is even more devastating is the price we have paid in broken relationships, broken lives, and death rates the likes of which we have never seen before.

In the face of the worst drug crisis in our history, we need to use every lawful tool we have. But I'm convinced this is a winnable war. We will be calling on America's great physicians and health care workers to take special care with addictive drugs. And in order to win, we are committing more Department of Justice resources to combat this epidemic, as well as continue to work to strengthen our partnerships with you—law enforcement on the front lines.

Let me ask you to do a simple thing: after every arrest for illegal possession of an illegal prescription, make every effort to get the arrestee to tell you where he or she got the drugs. We did that in Mobile and it led us to the two biggest sources in town. We need to hammer these illegal suppliers. You are ultimately the most effective resources that we as a country have in this effort. You have a tough job, but it's a job worth doing.

But you can also know this: you have our thanks and this Department of Justice will always have your back. Thank you.

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