

Federal Lawsuit Alleges Abuse of the Medicare Program by the State of California and Seeks to Recover \$20 Million in Damages

Plaintiff claims cost-shifting of workers compensation obligations to Medicare created "work comp reform bubble" that is about to burst

LOS ANGELES (PRWEB) April 17, 2007 -- In a bold move documents were filed in the federal court serving Los Angeles alleging a joint partnership between the Adventist Health System and the State of California Department of Industrial Relations to defraud Medicare out of millions of dollars (see U.S. District Court for the Central District of California, NO. 2:06-CV-08253-GPS-FMO).

"It's sad it has to come to this but enough is enough," said Barbara Clark, a registered nurse practitioner, who is the plaintiff seeking damages under the Medicare Secondary Payment Act to "recover monies defrauded from Medicare", amongst other allegations contained in an amended complaint.

"In simple terms, I allege that the purported savings of the S.B. 899 workers' comp reforms have come by shifting the burden of medical care from workers compensation insurance companies and onto the back of Medicare," Clark cited, referring to the 2005 legislative reforms known as S.B. 899.

"The State of California is protecting private workers compensation insurance companies from their legitimate obligations to pay court ordered medical care. This is the great work comp reform accomplished by Gov. Schwarzenegger, creating an artificial economic bubble about to burst," Clark said.

"This is what we have been saying in the movie all along, all you have to do is spend an hour and watch it," said injured worker Larry Nign, the subject of the film, *Almost Broken*. Nign's film addresses many of the reform claims of S.B. 899 in 2005.

For more information visit:

www.BarbClark.org , www.AlmostBroken.com , www.MyStateFundStory.com

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