

# Putnam Community Medical Center Of North Florida Agrees To Pay One Million Dollars To Settle False Claims Liability Related To Its Former Sleep Center

Thursday, October 26, 2023

For Immediate Release

U.S. Attorney's Office, Middle District of Florida

Jacksonville, FL – United States Attorney Roger B. Handberg announces today that Putnam Community Medical Center of North Florida, who owns and operated Putnam Community Medical Center, LLC, a 99-bed hospital located in Palatka, Florida, has agreed to pay the United States \$1million to resolve allegations that they violated the False Claims Act by submitting claims to Medicare and TRICARE in connection with a now-closed sleep center that were alleged to have operated with inadequate physician supervision.

According to the settlement agreement, Putnam Community Medical Center provided diagnostic sleep testing services at its now-closed sleep center, which the United States and the State of Florida allege were not provided with adequate physician supervision as required under certain Medicare coverage determinations and regulations during the period from December 2013 through February 2019.

“Protecting Medicare and TRICARE patients is paramount,” said U.S. Attorney Roger Handberg. “This civil settlement demonstrates our continuing commitment to hold accountable those who abuse the nation’s healthcare programs at the expense of the taxpayers.”

“Providers who participate in federal health care programs must follow the law governing the integrity of federally funded health care programs such as Medicare and Medicaid,” said Stephen Mahmood, Acting Special Agent in Charge of the U.S. Department of Health and Human Services Office of Inspector General (HHS-OIG). “HHS-OIG is committed to protecting the integrity of the Medicare and Medicaid programs and the people it serves. We will continue to work with the United States Attorney’s Office and other law enforcement partners to address allegations brought under the False Claims Act.”

The settlement concludes a lawsuit originally filed in the United States District Court for the Middle District of Florida by Relator Willard Revels, a former sleep center employee. Mr. Revels sued under the *qui tam*, or whistleblower, provisions of the False Claims Act permitting private citizens to sue on behalf of the United States for false claims and to share in the recovery. The Act also allows the United States to intervene and prosecute the action. The Relator will receive \$300,000 of the proceeds from the settlement with the defendants.

This settlement resulted from effort by the U.S. Attorney’s Office for the Middle District of Florida, working with the HHS Office of Inspector General, and the Defense Criminal Investigative Service. Assistant United States Attorney Kelley C. Howard-Allen led the investigation.

The government’s action in this matter illustrates the emphasis on combating health care fraud, and one of the most powerful tools in this effort is the False Claims Act. Tips from all sources about potential fraud, waste, abuse, and mismanagement can be reported to the Department of Health and Human Services, at 800-HHS-TIPS (800-447-8477).

The case is captioned *United States, State of Florida ex rel. Willard Revels v. Putnam Community Medical Center of North Florida, LLC, et al.*, Case No. 3:19-cv-834-J-32JRK. The settlement agreement was filed in court today . The settlement resolves the United States’ claims in that case. The claims resolved by the settlement are allegations only, and there has been no determination of liability. Putnam Community Center of North Florida denies the allegations.

[Download Settlement Agreement](#)

Updated October 27, 2023