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MAISIE C. SOKOLOVE

KNOX RICKSEN LLP
WALNUT CREEK
LITIGATION

Maisie C. Sokolove joined the plaintiff-side medical fraud boutique Knox Ricksen LLP in 2007 after a couple of years working for the Alameda County Counsel's office. She wanted more litigation work. Today, she represents victims of fraud in the health care arena including insurers, health and welfare plans, whistle-blowers and individuals.

"Knox Ricksen was doing general insurance defense when I started here, but over the years we started handling cases involving suspicious providers and I developed a knack for spotting fraudulent practices," Sokolove said.

Now the firm is largely devoted to large, complex qui tam cases. Since July 2020, Sokolove and her 14 attorney colleagues have filed six qui tam cases — more than twice the number of the two prior years. The cases require intensive pre-suit investigations and often involve dozens of defendants.

"We go after the larger networks of actors who target payors such as insurance

companies and benefit plans," Sokolove said. "Fraudsters constantly try to take advantage, and we sue under the state's Insurance Fraud Prevention Act because it offers significant assessments and penalties that act as deterrence and help our clients recoup their losses."

Fraud is on the rise in part because COVID-19 rules for telemedicine opened new avenues for dishonest players. "It's a little like whack-a-mole. We see a drop-off in one area once we file cases but a rise in a different area. The work never stops. There's no shortage of work because the dollar amounts involved can be so high and there are so many ways to manipulate billing submissions."

Sokolove has seen creative efforts. "We have gone after individuals posing as attorneys who buy the use of bar numbers from legitimate lawyers to submit fraudulent claims. We have sued unlicensed people owning clinics based on the profit motive, not medical necessity. It runs the gamut, and it never stops."

She is currently in court in Orange County with a case on remand from the Court of Appeal that clarified and expanded insurers' ability to file affirmative actions against alleged fraudulent health care providers by deterring the defense use of anti-SLAPP motions. Sokolove wrote the winning appellate brief in the case. *People ex rel. Allstate Ins. Co. v. Sonny Rubin MD et al.*, G059446 (4th DCA, op. filed June 28, 2021).

The defendant, accused of filing fraudulent patient medical reports and billing statements in support of insurance claims, contended his actions were protected by the anti-SLAPP law. The appellate panel rejected that view.

"It's a big ruling that allows and encourages insurance companies to go after bad actors," Sokolove said. "The defense view would have protected fraudulent activity and left my clients without recourse."

— JOHN ROEMER