

DSHS worker pleads not guilty to defrauding Medicaid

Local News

Posted by: David Haviland

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Federal Way woman charged with manipulating billing system to direct funds to family members

OLYMPIA - As a case manager for the Kent Division of Developmental Disabilities, Sarah Matovu was trusted to authorize taxpayer-funded care for patients with cerebral palsy, autism, neurological conditions or mental disabilities. But government prosecutors say Matovu used her position to illegally funnel money to her own family. Last month, the Attorney General's Medicaid Fraud Control Unit (MFCU) charged the Federal Way woman and two members of her family for defrauding the government program that provides health care services funding for low-income citizens. All three members of the Matovu family pleaded not guilty Thursday in King County Superior Court.

Charging documents indicate that during her work for the Department of Social and Health Services (DSHS), Matovu authorized payments to both her husband and son as care providers for Medicaid clients. State law prohibits public employees from directing state funds to relatives. In addition, state prosecutors say eight patients never received services and hadn't heard of Matovu's family members. In at least one instance, a family contacted Sarah Matovu to inquire about additional care hours and was declined. Matovu then billed Medicaid for the hours, directing payment to her husband. An internal investigation by DSHS shows that Sarah Matovu admitted that during one month for which she and her husband had billed the state, her family was overseas on an extended trip. Sarah Matovu is charged with two counts of first-degree theft and 10 counts of making a false statement to Medicaid; Swaibu Matovu is charged with one count of first-degree theft and eight counts of making a false statement to Medicaid; and Umar Matovu is charged with one count of first-degree theft and two counts of making a false statement to Medicaid. A case scheduling hearing is set for April 23. The Attorney General's [Medicaid Fraud Control Unit](#) is responsible for the investigation and prosecution of fraud committed by healthcare providers. In addition, the unit coordinates with local law enforcement authorities through a statewide network to investigate and prosecute cases of abuse and neglect involving vulnerable adults residing in Medicaid funded residential facilities.