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**Sent:** Thu, February 11, 2010 11:56:11 AM  
**Subject:** Patricia Moleski FBI Informant and Whistleblower

Dear Governor Crist,

I need your help regarding a my employer of 6 years. I reported fraud that was happening by my employer (Adventist Health System) to the FBI and have been working with an agent regarding the following information and have no legal representation, as every attorney is bullied by this company and it's attorney.

On February 18, 2009 I found fraud was occurring at my place of employment (Risk Management - Adventist Heath System) and reported this to the Adventist Health System Compliance Hotline AH-09-03-0001 Filed on Tuesday, March 17, 2009 at 11:45 am. After this report was filed, I was retaliated against by the company I worked for 6 years. I am now being sued by this company for reporting their illegal activity to the FBI and other State agencies. I am doing the right thing and continue to be retaliated against and would like to let you know of my situation, as I am a single mom without any criminal record. In addition, according to State and Federal law I am to report anything that violates patients rights, HIPPA violations, patient abuse & fraud and this is exactly what I am doing. I served this company for 6 years with merit and for the past 9 months have been suspended without pay, making it difficult to survive as a single mom. I really need your help and would like for you to hear my of my situation, as I am in fear for my safety.

The Healthcare organization I am up against is a 30 billion dollar company (paperless & fully electronic) and was found committing fraud before; this information is posted on the internet. The fraud that I have found is an attempt to cover up nurses notes that display reason for patients' death, by erasing/deleting the claim that the nurses' submit. The nurses at each of the 41 hospitals are trained to put adverse events into a separate computer application, separating it from the application that holds the patient medical record. Once the claim information is deleted, the patient/family & representing attorney will have no knowledge of what happened to their family member. As the actual reason is deleted and the facility risk manager then replaces it with a new one leaving off the nurses' notes that incriminate the hospital. These were then submitted to me and I was told to delete them that they were duplicates and I believed what I was told.. But in Feb.2009, I found out they were not, as they tried to get me to delete a suicide event.

I wanted to find out why they were doing this, so I started to run reports across the system, and noticed that nurses were complaining about the new computer program that held the patients'

medical records. They stated that there is a glitch within this application (Cerner). They said that patients were getting overdosed and that the medication portion of the application was malfunctioning (not erasing meds that were given, spewing off medication onto the records' that were never ordered, displaying medications that patients were allergic to as okay to give, messing up dosages). I thought that if they were complaining about Cerner, that other facilities that used this system may have written about it and so I looked it up on the internet and found that it cost other hospital systems millions of dollars to replace. It seemed as if I was reading a nightmare, one after another of nurses crying out about these glitches and no one listening.

As I looked further, I noticed other issues of kickbacks between 4 different law firms within the Orlando area. One in particular where a patient died due to a faulty heart catheter that was defective as stated by the nurse, but a new record was created stating that the patient died from surgery, blaming the physician, when a nurse said that the catheter was defective days before the second submission. I then noticed that the same law firm representing the doctor was representing the patient family and the monies for the settlement triple to this law firm, which was odd. The sad thing is that the original submission given by the nurse regarding the defective catheter was never given to the family or the courts'....

After months past, I noticed that the medical record was overcharging patients, as nurse's notes stated loss of revenue. The nurses thought that the medical record application that charged the patient, but it does not. Once the nurse pulls the medication from the pyxis medication cart, the patient is charged through the pyxis. Therefore the hospital can claim lost revenue for one computer application, while still charging the patient within another application. Please read the following information:

**FLORIDA (State Law) 112.3187** - State Code Section Prohibited Activity Public or Private Employees - Can not dismiss, discipline, or other adverse personnel action against employee for disclosing information of any violation or suspected violation of law or regulation or act by independent contractor which creates a substantial and specific danger to the public's health, safety, and welfare or act of gross management malfeasance, gross public waste of funds or gross neglect of duty

## **HIPPA**

164.512(j) includes a broadly worded exception for disclosures "to avert a serious threat to Health or safety." Covered entities may disclose information, consistent with legal and ethical standards, when necessary "to prevent or lessen a serious and imminent threat to the health or safety of a person or the public" when the disclosure is to those who can help prevent or lessen the threat. This is consistent with the "duty to warn" principal stated in *Tarasoff v. Regents of the University of California*, 551 P.2d 334 (1976).

It also establishes a presumption that those who make disclosures under this section are acting in good faith.

## **False Claims Act -31 U.S.C. § 3730(h)**

30 U.S.C. § 3730(h) and states:

Any employee who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of employment by his or her employer because of lawful acts done by the employee on behalf of the employee or others in furtherance of an action under this section, including investigation for, initiation of, testimony for, or assistance in an action filed or to be filed under this section, shall be entitled to all relief necessary to make the employee whole. Such relief shall include reinstatement with the same seniority status such employee would have had but for the discrimination, 2 times the amount of back pay, interest on the back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys' fees. An employee may bring an action in the appropriate district court of the United States for the relief provided in this subsection.

**Howard Davidson, J.D.**

Director, American Bar Association Center on Children and the Law

HIPAA does not inhibit reporting of child abuse and neglect;

HIPAA supports disclosures of health information for public health prevention, surveillance, investigation, and intervention activities;

HIPAA provides protections for child victim health information, but disclosures can still be made with victim consent or where necessary to prevent serious harm to them or other potential child victims;

HIPAA gives courts, law enforcement agencies, and those determining the cause of child deaths the ability to access relevant health information; and

HIPAA protects child victim health information from being disclosed to parents or other adult representatives when disclosure would be contrary to the child's best interests.

## **FHA Florida Hospital Association Laws:**

*456.0575- Duty to Notify Patients Every licensed health care practitioner shall inform each patient, or an individual identified pursuant to s. 765.401 (1), in person about adverse incidents that result in serious harm to the patient.*

*39.201 -Mandatory reporting of child abuse, abandonment, or neglect; mandatory reports of death.*

*415.1034- Mandatory reporting of abuse, neglect, or exploitation of vulnerable adults; mandatory reports of death.*

*397.501 -Rights of Clients – Patient Right to Know*

*395.1012 -Patient Safety- Report of any Patient Safety Issue*

*395.10975 -Grounds for denial, suspension, or revocation of a health care risk manager's license; administrative fine.*

The Following names are those that were notified of the February 18, 2009 occurrence of the Florida Hospital Suicide Adverse Event Deletion:

Robert Henderschedt – Adventist Health System Senior Vice President, Administration

Sandra Johnson –Adventist Health System - Senior Vice President, Business Development, Adventist Health System - Risk Management, and Compliance

Dave Riesen - Adventist Health System - Compliance Director

Bill Morgan - Adventist Health System - Claims Director

Stacy Prince - Adventist Health System - Risk Management Director

Jean Hood - Adventist Health System - Risk Management-Assistant Director

James Pridemore - Florida Hospital Loss Control Manager

Gengie Nail - Florida Hospital Risk Manager

Jonathan Hillock - Adventist Health System - Risk Management -Data Systems Manager

Bonnie Laurencell - Adventist Health System Manager Human Resources

AHCA Outpatient Services

Jack Plagee

Office of Inspector General Hotline

Marcus S. Eder - Complaint Analysis Officer

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Rm. S-5506  
Washington, DC 20210

FBI Headquarters in Washington, D.C.  
Federal Bureau of Investigation  
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Tampa  
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5525 West Gray Street  
Tampa, Florida 33609  
(813) 253-1000  
[tampa.fbi.gov](http://tampa.fbi.gov)

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OSHA – Investigator

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