

## FCA ENFORCEMENT ON FAST FORWARD: DOJ MOVES TO SPEED REVIEWS AND EXPAND FRAUD RECOVERIES

The Department of Justice ("DOJ" or the "Department") is putting the False Claims Act ("FCA") on an accelerated track. In a [May 27 memorandum](#), the Department announced a shift toward faster *qui tam* review, earlier enforcement decisions and more aggressive identification of fraud involving federal benefits programs—signaling a sharper, more streamlined enforcement posture.

The memorandum follows the [March 16 Executive Order Establishing the White House Task Force to Eliminate Fraud](#) and reflects a broader effort to tighten the pipeline from complaint to enforcement action.

### ACCELERATED REVIEW AND EARLY CASE TRIAGE

The DOJ's goal is straightforward: move faster. The Department seeks to identify viable FCA cases earlier, intervene sooner where warranted and dispose of legally deficient allegations without prolonged sealing periods.

*Qui tam* actions remain the primary FCA enforcement mechanism. Although the FCA already contemplates a 60-day seal period for government evaluation, the DOJ now says it will aim to complete review of benefits fraud matters within 60 days "to the maximum extent practicable," with a general outer limit of 120 days. At the end of that period, the government will decide whether to intervene, continue investigating or seek dismissal.

That aspiration collides with familiar practice. Seal extensions under the "good cause" standard have long stretched review periods well beyond 60 days. The memorandum does not resolve that tension, but it clearly signals pressure to compress timelines and reduce routine extensions.

### WHAT GETS PRIORITY—AND WHY

The DOJ also sketches a prioritization framework for triaging *qui tam* filings. It will focus on whether the alleged conduct, if true, states an FCA violation and whether it is supported by available evidence or data analytics.

Priority will also be given to matters that are easier to evaluate and prosecute: cases that are non-novel, non-complex or involve alleged damages under \$10 million. The Department will also move more quickly where aggravating factors are present, including harm to beneficiaries, ongoing misuse of federal funds or evidence of concealment or deception.

The throughline is speed and scalability. The framework posed by the memorandum indicates DOJ's intention to execute a higher-throughput enforcement model that is less about a handful of sprawling, technical fraud theories than a steady volume of clearer, faster-moving cases.

### HEALTH CARE REMAINS THE EPICENTER

The Department reported \$6.8 billion in FCA recoveries in fiscal year 2025, with more than 80% of that amount stemming from health care fraud. The memorandum suggests that DOJ's health care fraud focus will not abate. Managed care arrangements, prescription drug billing and medically unnecessary services remain core enforcement targets, particularly where patient harm or safety concerns are implicated.

### PRACTICAL TAKEAWAYS

- FCA enforcement is likely to accelerate, with increased incentives for relators to file and pursue *qui tam* actions.
- The DOJ's framework signals faster screening, but also greater selectivity based on provability, simplicity and data support.
- Health care entities—especially those in reimbursement-heavy or high-volume billing environments—should expect intensified scrutiny of coding, billing and compliance systems.

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