

2025 DOJ Criminal Division Fraud Section year in review

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JANUARY 30, 2026

On January 22, 2026, the U.S. Department of Justice (DOJ) Criminal Division's Fraud Section released its annual Year in Review for 2025 (2025 Report). The Fraud Section prosecutes white collar crime through its four litigating units: Health Care Fraud (HCF), Market, Government, and Consumer Fraud (MGC), Foreign Corrupt Practices Act (FCPA), and Health and Safety (HSU).

The Report reflects a year of enforcement activity largely in line with levels seen in 2024, with many individual charging, conviction, and corporate-resolution figures remaining at or near historically elevated levels.

The enforcement actions featured in the 2025 Report also underscore the critical role of corporate compliance programs and remediation when wrongdoing is identified, aligning with the Department's 2025 modifications to the Corporate Enforcement Program (CEP), which seek to encourage voluntary self-disclosure, cooperation, and remediation by providing greater certainty as to outcomes.

In addition to several CEP declinations, the past year saw the Health Care Fraud Unit enter into Deferred Prosecution and Non-Prosecution Agreements with corporate entities for the first time in over a decade. On the other side of the equation, the FCPA Unit also criminally indicted a corporate entity for the first time in 15 years.

For practitioners familiar with the Fraud Section's realignment of FCPA enforcement priorities, the level of enforcement activity in the 2025 Report underscores that the Section continues to maintain a robust and active docket. In particular, the Fraud Section's 2025 results reflect its continued focus on combating fraud against the federal government in all its forms — including customs and tariff fraud, health care fraud, and procurement fraud — while also pursuing actions to protect American consumers from fraud in the consumer and investment marketplaces.

By the numbers: the Fraud Section in 2025

In 2025, the Fraud Section charged 265 individuals and convicted 235, figures that closely mirror 2024's totals and confirm sustained enforcement intensity following the lull caused by the pandemic.

The Section conducted 25 trials, slightly fewer than in 2024 but consistent with the downward trend observed since 2022 as pandemic-era backlogs cleared. The Fraud Section brought 15 corporate enforcement actions — 12 resolutions and three indictments — an increase over 2024's 13 corporate resolutions.

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Total global monetary recoveries exceeded \$1 billion, down from \$2.3 billion in 2024 but well above 2023 levels, reflecting fewer blockbuster resolutions rather than reduced enforcement activity.

Fraud Section resources and leadership

The Fraud Section will continue to feature prominently in the Department's activities. In November 2025, the Section added a fourth litigating section, HSU (described below).

Beyond that addition, increased staffing in the HCF and MGC Units (from 70 to 75 and 35 to 55, respectively) and reduced FCPA staffing (from 32 to 22), reflects DOJ's recalibration of enforcement priorities rather than a contraction of resources. Continuity in senior leadership suggests a stable enforcement strategy heading into 2026.

Equally important, much of the Section's Senior Management has remained in place or been sourced from internal promotions, which suggests that operations will not skip a beat as the Section enters 2026.

Health Care Fraud Unit

The HCF Unit remained the Fraud Section's most active component in 2025, charging 194 individuals and alleging more than \$15 billion in intended losses — a dramatic increase from the \$3.3 billion charged in 2024. The Unit convicted 150 individuals through trials and pleas and brought four corporate enforcement actions.

The 2025 Report underscores the breadth of the HCF Unit's enforcement activity, spanning traditional schemes such as telemedicine fraud and kickbacks as well as emerging fraud typologies. The Unit's banner year was headlined by its largest-ever National Health Care Fraud Takedown, a nationwide effort charging 324 individuals and alleging more than \$14.5 billion in intended losses.

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The Takedown also reflects DOJ's increasing focus on transnational fraud, including Operation Gold Rush, which targeted a foreign-linked criminal organization responsible for more than \$10 billion in alleged losses. The cases highlighted in the 2025 Report showcase enforcement in some of the Fraud Section's core priorities — with an emphasis on transnational organized crime, digital health and telemedicine fraud, substance abuse treatment schemes, and patient harm.

Beyond highlighting the National Health Care Fraud Takedown and enforcement actions, the 2025 Report reveals some of the HCF Unit's forward-looking strategy. The expansion of the New England Strike Force and the launch of the Health Care Fraud Data Fusion Center signal increased reliance on specialized prosecutors, data sharing, and advanced analytics to identify emerging schemes.

Taken together, the Unit's record-setting enforcement metrics and continued operational innovation underscore the Fraud Section's sustained commitment to protecting patients, safeguarding federal health care programs, and recovering improperly paid funds for the U.S. Treasury.

Market, Government, and Consumer Fraud Unit

This core enforcement unit's rebranding from the Market Integrity and Major Frauds (MIMF) Unit to the Market, Government, and Consumer Fraud (MGC) Unit reflects a deliberate expansion of its enforcement portfolio beyond

market integrity matters to include government program fraud, tariff evasion, procurement fraud, and complex consumer schemes.

In its maiden year, the MGC Unit charged fewer individuals in 2025 than in 2024 but obtained more total resolutions when plea agreements are included. It remains an open question whether fewer charges in 2025 will result in fewer resolutions in 2026. Corporate resolutions increased modestly, including multiple matters resolved under the CEP.

Trade and customs fraud emerged as clear enforcement priorities in 2025, while the absence of significant cryptocurrency prosecutions suggests a deprioritization relative to earlier years. Consistent with the focus of the other litigating units, the MGC's reported cases include multiple charged cases against foreign actors in international fraud schemes.

Foreign Corrupt Practices Act Unit

In 2025, the FCPA Unit recalibrated its enforcement priorities after a temporary pause following the February 2025 Executive Order that directed DOJ to reassess the scope of FCPA enforcement.

Enforcement resumed in June 2025 under new DOJ Guidelines, pursuant to which the Unit prioritized foreign bribery that (1) facilitates cartels or transnational criminal organizations; (2) deprives U.S. companies of fair competitive opportunities; (3) undermines U.S. national security interests; or (4) involves substantial bribe payments and efforts to conceal criminal schemes.

Despite the pause, the FCPA Unit charged five individuals, obtained six convictions, and brought three corporate enforcement actions — including the first corporate indictment in more than a decade. The range of outcomes in the three cases involving corporations again underscores the tangible benefits of voluntary self-disclosure, cooperation, and remediation — one company earned a declination under Part I of the CEP; one resolved with a DPA after earning substantial credit for the company's voluntary disclosure, cooperation, and remediation of related misconduct; and one company was criminally indicted.

Despite a marked drop off from 2024's record-breaking numbers and much rhetoric predicting the FCPA's demise, the 2025 Report suggests the possibility of a genuine recalibration with targeted enforcement actions against actors that disadvantage U.S. businesses and individuals, as well as schemes where the underlying facts involve proceeds linked to cartels and transnational criminal organizations, or threats to U.S. national security.

Looking ahead at 2026, one certainty in FCPA enforcement is that it will remain a closely watched space.

Health and Safety Unit

The Health and Safety Unit (HSU), established in November 2025 following DOJ's reorganization of prosecutors from

the Civil Division's Consumer Protection Branch, is the Fraud Section's newest litigating unit.

Staffed by subject-matter experts, the HSU continues its predecessor's mission by pursuing criminal violations of the Food, Drug, and Cosmetic Act (FDCA), Consumer Product Safety Act (CPSA), and related statutes addressing dangerous products, highway safety, and elder fraud. Although now housed within the Fraud Section and under the supervision of a Fraud Section veteran, the Unit's mandate and enforcement focus appear largely unchanged.

In 2025, the HSU charged and convicted four individuals and brought four corporate enforcement actions. Three corporate matters involved FDCA violations, including a \$40 million resolution arising from falsified testing that led to the sale of adulterated surgical gowns, while the fourth involved alleged failures to report consumer safety risks to the Consumer Product Safety Commission (CPSC).

Individual resolutions addressed misconduct, including falsified clinical trial data, failure to report defective products, and obstruction of a federal safety investigation.

While the HSU's focus on the healthcare industry suggests a potential overlap with the HCF Unit, the two litigating units are

more likely to complement than compete with one another. In particular, the HSU appears poised to remain DOJ's primary criminal enforcer of the FDCA, CPSC, and related statutes, and the Unit will likely continue its close working relationships with the FDA (Food and Drug Administration), CPSC, FMCSA (Federal Motor Carrier Safety Administration), and other partner agencies.

What to expect in 2026

Despite a temporary pause in new FCPA investigations, the Fraud Section sustained elevated enforcement levels across its litigating units in 2025 and resumed FCPA prosecutions under revised priorities. With its organizational realignment complete, resources aligned to core risk areas, and investigative capabilities strengthened through whistleblower incentives, self-reporting, and advanced analytics, the Fraud Section enters 2026 positioned to maintain a consistent pace of enforcement.

The range of outcomes observed under the CEP in 2025 confirms that effective compliance programs and timely remediation will remain central to resolution decisions, while ineffective responses to wrongdoing may well draw harsher outcomes.

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This article was first published on Reuters Legal News and Westlaw Today on January 30, 2026.