



# Department of Justice

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Western District of Louisiana**

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## **LAFAYETTE CHIROPRACTOR SENTENCED FOR HEALTHCARE FRAUD**

*Defendant submitted claims for treatments that were never performed*

**LAFAYETTE, La.** - A licensed chiropractor and former owner of Scott Oaks Chiropractic Clinic located in Scott, La., was sentenced today to three years in prison, for submitting fraudulent claims to health insurers for services that were never performed, United States Attorney Stephanie A. Finley announced. Richard Montalbano, 64, of Lafayette, La., was also sentenced to three years supervised release, and was ordered to pay a fine of \$115,228.24. The sentence was imposed by United States District Judge Rebecca F. Doherty.

Evidence revealed that Dr. Montalbano submitted fraudulent claims to Blue Cross Blue Shield of Louisiana (BCBSLA) for healthcare services that patients never received. The defendant was required to use certain billing codes provided by the American Medical Association on the health insurance claim forms, and the defendant was aware of which code was associated with a specific type of treatment. Dr. Montalbano was also aware of the different rates of pay for different codes. Dr. Montalbano was the sole chiropractor and owner of Scott Oaks Chiropractic Clinic at the time of the charged conduct. The investigation revealed that over a two-year period, Montalbano submitted false claims causing thousands of dollars in overpayment by BCBSLA. The defendant has agreed to forfeit his license and agreed to pay restitution to BCBSLA in the amount of \$22,051.24. Additionally, Dr. Montalbano was ordered to pay a fine of \$115,228.24, which includes the cost of his incarceration and supervised release.

United States Attorney Finley stated: "Dr. Montalbano was a healthcare provider who cheated Blue Cross Blue Shield out of thousands of dollars. He sought to enrich himself at the expense of patients who pay Blue Cross premiums. The U. S. Attorney's office will continue to investigate and prosecute this kind of fraud which contributes to the escalating healthcare costs of all citizens."

Vice President of Communications, Blue Cross and Blue Shield of Louisiana, John Maginnis stated: “This is another great example of how private payers like Blue Cross and Blue Shield of Louisiana and the government can work together to fight healthcare fraud. Blue Cross works hard every day to detect and deter healthcare fraud, and this case typifies the results that can be achieved when private and public agencies work together. Fraud like this hurts the healthcare system for all of us, this is why Blue Cross works hard to fight back for its customers. We appreciate all the efforts of the United States Attorney’s office, federal court system and the FBI.

This case was investigated by the Federal Bureau of Investigation, Blue Cross Blue Shield of Louisiana and was prosecuted by Assistant United States Attorney Myers P. Namie.

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