



Department of Justice

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FOR IMMEDIATE RELEASE

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**COMPLAINT FILED AGAINST ROBERT M. RITCHEA, M.D.
FOR SUBMITTING OVER \$2.2 MILLION IN FALSE CLAIMS TO MEDICARE**

Defendant Billed For Pain Injections Administered by Unlicensed Medical Assistant

ATLANTA, GA - ROBERT M. RITCHEA, M.D., 51, of Phenix City, Alabama has been sued in a federal complaint on charges of submitting false or fraudulent claims to Medicare.

Sally Quillian Yates, United States Attorney for the Northern District of Georgia, said, "This lawsuit shows what happens when a doctor puts money before the health and safety of his patients. The complaint alleges not only that Dr. Ritchie allowed an unlicensed medical assistant to inject patients with pain medications, but also that he improperly billed Medicare for the treatments. We are committed to ending this kind of Medicare fraud."

According to United States Attorney Yates and the complaint: RITCHEA violated the False Claims Act by improperly billing Medicare for pain injections administered by an unlicensed medical assistant. The complaint alleges that an unlicensed medical assistant, acting at the direction of RITCHEA, performed unnecessary pain injection procedures that were billed to Medicare as nerve blocks. The Alabama State Board of Medical Examiners does not permit medical assistants to perform the pain injection procedures for which RITCHEA billed. RITCHEA admitted to both the Alabama State Board of Medical Examiners and the Georgia Composite State Board of Medical Examiners that the procedures were not medically necessary and that they were over-prescribed and over-utilized. The complaint also alleges that RITCHEA billed Medicare for more expensive procedures than were actually performed and that he billed Medicare for other services that are not reimbursable.

The complaint alleges RITCHEA over-billed Medicare by more than \$2.2 million in over 4300 separate claims. Pursuant to the False Claims Act, if RITCHEA is found liable, the government is entitled to treble damages and civil monetary penalties ranging from \$5,500-\$11,000 per claim.

The United States' complaint is part of the government's emphasis on combating health care fraud. One of the most powerful tools in that effort is the False Claims Act, which the Justice Department has used to recover approximately \$3 billion nationwide since January 2009 in cases involving fraud against federal health care programs. The Justice Department's total recoveries in other types of False Claims Act cases have topped \$4 billion since January 2009.

This case is being investigated by Special Agents of the Federal Bureau of Investigation. Assistant United States Attorneys Christopher J. Huber and Lena Amanti are litigating the case.

Members of the public are reminded that the complaint contains only allegations. It will be the government's burden to prove a defendant's liability by the preponderance of the evidence at trial.

For further information please contact Sally Q. Yates, United States Attorney, or John Horn, First Assistant United States Attorney, through Yvette Comer at (404) 581-6335. The Internet address for the HomePage for the U.S. Attorney's Office for the Northern District of Georgia is www.justice.gov/usao/gan.