



# Department of Justice

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## **Rural Metro of Southern Ohio, Inc. Agrees to Pay \$275,116 to Resolve Allegations of False Claims to Medicare**

**LEXINGTON, Ky.** – Rural Metro of Southern Ohio, Inc. (“Rural Metro”) has agreed to resolve civil allegations that it violated the False Claims Act, a federal law that prohibits the submission of false or fraudulent claims to the federal government, agreeing to pay \$275,116.22.

The United States alleged that Rural Metro violated the False Claims Act by submitting, or causing the submission of, false claims to Medicare, for overnight hospital discharge ambulance transports that were not medically necessary, between January 1, 2013 and September 1, 2017. To be medically necessary, ambulance transportation requires that a patient’s medical condition prohibit other methods of transportation, but Rural Metro submitted claims for patients who could have been appropriately transported by other means.

“Those who participate in Medicare must play by the rules,” said Robert M. Duncan, Jr., United States Attorney for the Eastern District of Kentucky. “Paying for unnecessary services deprives the Medicare Program of invaluable resources and weakens its ability to actually provide appropriate services to its beneficiaries. Our Office is committed to taking the steps necessary to protect Medicare from fraud and abuse and to recovering taxpayer money that was obtained inappropriately.”

“When companies try to boost their profits by billing federal health care programs for medically unnecessary services, the Office of Inspector General will

ensure they are held accountable for their actions,” said Special Agent in Charge Derrick L. Jackson, HHS-OIG.

Nicholas Ratterman, a former Rural Metro employee, originally filed this lawsuit under the *qui tam*, or whistleblower, provisions of the False Claims Act, which permits private individuals with knowledge of fraud to sue on behalf of the government for false claims and to share in any recovery. Mr. Ratterman will received approximately \$44,000 from the settlement with Rural Metro.

The government’s action in this matter illustrates its commitment to combat health care fraud using the False Claims Act. Tips from all sources about potential fraud, waste, abuse, and mismanagement can be reported to the Department of Health and Human Services, at 800-HHS-TIPS (800-447-8477).

The case was investigated by the U.S. Department of Health and Human Services, Office of Inspector General. Assistant United States Attorneys Jennifer Williams and Mary Melton handled the matter for the United States.

The case is captioned *United States ex rel. Ratterman v. Mercury Ambulance Services, Inc., et al.*, Case No. 17-cv-148-JMH. The claims resolved by the settlement are allegations only, and there has been no determination of liability.

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