UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

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UNITED STATES OF AMERICA

SEALED INDICTMENT

- v. -

19 Cr.

RUVIM KRUPKIN,

19 CRIM

:

659

Defendant.

COUNT ONE (Conspiracy to Distribute Narcotics)

The Grand Jury charges:

Introduction

- 1. From at least in or about 2006, up to and including in or about July 2017, in the Southern District of New York and elsewhere, RUVIM KRUPKIN, the defendant, a state licensed physician, and others known and unknown, conspired to unlawfully distribute millions of pills of the Schedule II controlled substance oxycodone to individuals KRUPKIN knew had no legitimate medical need for them.
- 2. At all times relevant to this Indictment, RUVIM KRUPKIN, the defendant, was an internal medicine doctor with specialties in oncology and hematology. KRUPKIN practiced out of a medical office located in Coney Island, New York (the "Office"). As a hematologist, KRUPKIN treated patients who had, or claimed to have, sickle cell anemia a medical condition that can cause pain

for which oxycodone, in conjunction with other treatments — may be legitimately prescribed. However, KRUPKIN wrote thousands of prescriptions for large quantities of oxycodone to individuals with sickle cell anemia, or those who claimed to have sickle cell anemia, even though KRUPKIN knew the patients and purported patients had no legitimate medical need for the prescriptions. Those individuals filled those medically unnecessary prescriptions at pharmacies and, in certain cases, sold the oxycodone pills they received to drug dealers, who in turn re-sold the pills on the street to drug-addicted individuals.

In total, from in or around 2006 up to and including 3. in or around July 2017 - when RUVIM KRUPKIN, the defendant, closed his Office following the execution at the Office of a judiciallyauthorized search warrant, resulting in the seizure of, among other KRUPKIN wrote medically things, patient files and cash the unlawful in unnecessary prescriptions that resulted distribution of more than 4 million oxycodone pills. for writing those medically unnecessary oxycodone prescriptions, KRUPKIN received over approximately \$3.8 million in cash payments.

Background on Oxycodone and the Regulations Governing its Distribution

4. Oxycodone is a highly addictive, narcotic-strength opioid used to treat severe and chronic pain conditions, such as

post-operative pain, serious back and orthopedic injuries, as well as pain associated with certain forms of cancer and other terminal illnesses. Oxycodone can be legitimately obtained from most pharmacies with a prescription written by a treating physician, and is typically dispensed to patients in five- to thirty-milligram pills.

Because of its addictive qualities and potential for abuse, the distribution of oxycodone is heavily regulated. Physicians and other healthcare professionals must register and be approved by the Drug Enforcement Administration and New York State licensing authorities in order to lawfully prescribe oxycodone. Furthermore, federal and state regulations require that, before the that physicians must prescribing oxycodone, prescription is issued for a legitimate medical purpose and in the usual course of generally accepted medical practice. The Centers for Disease Control and Prevention C.F.R. § 1306.04. and state regulations recommend that physicians do so by, among other things, testing patients' urine to ensure that they are taking their prescriptions and not abusing other controlled physical histories and conducting medical substances, examinations, assessing addiction risk factors for every patient, and developing a treatment plan to reduce a patient's dependence See, e.g., Centers for Disease Control and on the oxycodone.

Prevention, Guideline for Prescribing Opioids for Chronic Pain, 2016; N.Y. Comp. Codes R. & Regs. tit. 10 § 80.63. Pursuant to federal regulations, prescriptions for oxycodone cannot be refilled until a patient who has exhausted his or her initial prescription has visited his or her doctor again. See 21 C.F.R. § 1306.12.

- 6. Because oxycodone is highly addictive and available pursuant only to a prescription written by a licensed healthcare professional, oxycodone prescriptions have enormous cash value to drug dealers who sell oxycodone pills on the street for thousands of dollars.
- 7. From in or around 2006, up to and including in or around 2010, eighty-milligram oxycodone pills were popular among street-level drug dealers. In or around May 2010, however, a formula change made eighty-milligram oxycodone pills more difficult to crush up and abuse. As a result, thirty-milligram oxycodone pills became more in demand, having a street value of approximately \$30 per pill in New York City, with prices ranging even higher in other parts of the country. Thus, a single thirty-day prescription for 180 thirty-milligram pills of oxycodone could net a street-level dealer in New York City \$5,400 in cash or more.

The Scheme to Distribute Oxycodone

- 8. Over at least eleven years, between approximately 2006 and July 2017, RUVIM KRUPKIN, the defendant, received millions of dollars in cash, in return for writing thousands of medically unnecessary prescriptions for oxycodone for patients, including his co-conspirators, some of whom obtained the pills and sold them at high prices to individuals addicted to oxycodone, among others.
- the scheme, RUVIM KRUPKIN, of part 9. defendant, routinely issued prescriptions for oxycodone patients who did not have a legitimate need for the pills, including individuals who did not exhibit a medical need for oxycodone, exhibited signs of being personally addicted to oxycodone, and/or intended to resell the pills. KRUPKIN generally performed little to no physical examination on those purported co-conspirators, and typically issued patients and prescriptions for a large dose of oxycodone - typically 180 eightymilligram pills, until approximately 2010, when the formula for oxycodone changed, reducing the street value of the eightymilligram pills, around which time KRUPKIN began typically prescribing 180 or 240 thirty-milligram pills. KRUPKIN routinely issued these prescriptions without taking steps to determine whether such patients had a legitimate medical need for oxycodone,

such as testing the patients' urine, adjusting dosages, or terminating prescriptions for problematic patients.

- 10. As part of this scheme, for example, RUVIM KRUPKIN, the defendant, caused the distribution of approximately 13,000 oxycodone pills to a co-conspirator ("CC-1"), by writing medically unnecessary prescriptions for CC-1. Between in or around December 2012 and in or around June 2017, CC-1 visited KRUPKIN's Office approximately once per month. During each visit, CC-1 generally paid KRUPKIN \$200 in cash, and in exchange, received a prescription for oxycodone, frequently without a physical examination or urine testing. KRUPKIN's medical notes for CC-1 were largely the same across visits. CC-1 would fill the prescription at a pharmacy, and then sell half of the pills to another individual ("CC-2"), who in turn sold the pills to individuals addicted to oxycodone, among others.
- 11. RUVIM KRUPKIN, the defendant, knew that certain of his purported patients, including CC-1 and others, were diverting the oxycodone pills he was prescribing, but he nonetheless kept writing prescriptions for maximum quantities of oxycodone for such individuals.

Statutory Allegations

12. From in or about 2006, up to and including in or about July 2017, in the Southern District of New York and

elsewhere, RUVIM KRUPKIN, the defendant, and others known and unknown, intentionally and knowingly did combine, conspire, confederate and agree, together and with each other, to violate the narcotics laws of the United States.

- 13. It was a part and an object of the conspiracy that RUVIM KRUPKIN, the defendant, and others known and unknown, would and distribute, dispense, possess with intent to distribute and dispense, and cause to be distributed and dispensed, a controlled substance outside the scope of professional practice and not for a legitimate medical purpose, in violation of Title 21, United States Code, Section 841(a)(1).
- 14. The controlled substance that RUVIM KRUPKIN, the defendant, conspired to distribute and dispense, possess with intent to distribute and dispense, and caused to be distributed and dispensed, outside the scope of professional practice and not for a legitimate medical purpose, was mixtures and substances containing a detectable amount of oxycodone, in violation of Title 21, United States Code, Section 841(b)(1)(C).

(Title 21, United States Code, Section 846.)

FORFEITURE ALLEGATION

15. As a result of committing the offense alleged in Count One of this Indictment, RUVIM KRUPKIN, the defendant, shall

forfeit to the United States, pursuant to Title 21, United States Code, Section 853, any and all property constituting, or derived from, any proceeds obtained, directly or indirectly, as a result of said offense and any and all property used, or intended to be used, in any manner or part, to commit, or to facilitate the commission of, said offense, including but not limited to a sum of money in United States currency representing the amount of proceeds traceable to the commission of said offense.

Substitute Assets Provision

as a result of any act or omission of the defendant: (a) cannot be located upon the exercise of due diligence; (b) has been transferred or sold to, or deposited with, a third person; (c) has been placed beyond the jurisdiction of the Court; (d) has been substantially diminished in value; or (e) has been commingled with other property which cannot be subdivided without difficulty; it is the intent of the United States, pursuant to Title 21, United States Code, Section 853(p), to seek forfeiture of any other property of the defendant up to the value of the above forfeitable property.

United States Code, Section 853.)

Geoffy S. Burnn

GEOFFREY S. BERMAN

United States Attorney

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

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Defendant.

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(21 U.S.C. § 846.)

Geoffrey S. Berman United States Attorney

A TRUE BILL

Foreperson.