COMMONWEALTH OF KENTUCKY **BREATHITT CIRCUIT COURT** CIVIL ACTION NO. 18-CI-

COMMONWEALTH OF KENTUCKY ex rel. ANDY BESHEAR, Attorney General

18-CI-00029

PLAINTIFF

v.

THE RECOVERY CENTER, LLC 1550 Hwy 15 South, Suite 200 Jackson, KY 41339

Serve:

Robert Jack Duncan

1550 Hwy 15 South, Suite 200

Jackson, KY 41339

and

GEORGE BURNETTE, M.D. 1550 Hwy 15 South, Suite 200 Jackson, KY 41339

and

JERRY CAMPBELL 1550 Hwy 15 South, Suite 200 Jackson, KY 41339

and

JUSTIN NEACE 1550 Hwy 15 South, Suite 200 Jackson, KY 41339

and

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ROBERT JACK DUNCAN 1550 Hwy 15 South, Suite 200 Jackson, KY 41339

DEFENDANTS

COMPLAINT

The Plaintiff, the Commonwealth of Kentucky (the Commonwealth), by and through its duly elected Attorney General, Andy Beshear, for its Complaint against the Defendants, states as follows:

INTRODUCTION

This is a public interest lawsuit brought by the Kentucky Attorney General under Kentucky state constitutional, statutory, regulatory and common law authority on behalf of the Kentucky Medicaid program to recover damages, statutory civil penalties, and other relief deemed appropriate by the Court from the Defendants as a result of the Defendant's intentional, willful, wanton, reckless, and/or negligent operation and oversight of Medication Assisted Treatment programs and procedures from January 2015 through February 2018. The Defendants advertised and marketed their Suboxone based Medication Assisted Treatment program as safe and effective complying with all federal and state regulations governing Medication Assisted Treatment. Instead they were improperly operating their Medication Assisted Treatment program to systematically defraud the Commonwealth of Kentucky and Kentucky Medicaid by submitting claims and receiving reimbursements for medical services that failed to meet the professionally recognized standards for health care and violated Kentucky law to the detriment of the Kentucky Medicaid program, Medicaid recipients, and other patients of the clinic. Furthermore, through their intentional, negligent and illegal acts the Defendants also caused thousands of unnecessary prescriptions for Suboxone to be written and presented to the Kentucky Medicaid program for payment in violation of Kentucky law.

PARTIES

- 1. At all times relevant hereto, Andy Beshear, is and was the duly elected Attorney General of the Commonwealth of Kentucky (the Commonwealth), an independent constitutional officer of the Commonwealth and its chief law enforcement officer, with full authority to initiate and prosecute all cases in which the Commonwealth has an interest. The Attorney General is vested with specific constitutional, statutory and common law authority to commence proceedings to enforce KRS 194A.505 and KRS 205.8451 through KRS 205.8483, regarding public assistance program fraud, and pursuant to the Attorney General's *parens patriae* authority, to bring an action for damages on behalf of the Commonwealth, its departments agencies, and citizens. The Attorney General has determined that these proceedings are in the public interest.
- 2. At all times relevant hereto, the Defendant, The Recovery Center, LLC (hereinafter "Recovery Center), is and was a corporation organized pursuant to the laws of the Commonwealth of Kentucky, with its principal place of business located at 1550 Hwy 15 South, Suite 200, Jackson, KY 41339. Service of process on The Recovery Center may be effected by serving its registered agent for service of process, Robert Jack Duncan at 1550 Hwy 15 South, Suite 200, Jackson, KY 41339.
- 3. At all times relevant hereto, the Defendants, Dr. George Burnette, Jerry Campbell, Justin Neace and Robert Jack Duncan, are and were residents of the Commonwealth of Kentucky, and the owners of the Recovery Center. Service of process on these individuals can be effected at 1550 Hwy 15 South, Suite 200 Jackson, KY 42339.
- 4. The Recovery Center provides Medication Assisted Treatment (hereinafter MAT) to both Medicaid recipients and patients with other types of insurance at clinics in 7 locations:

Jackson, Hazard, Paintsville, Richmond, Mt. Sterling, London and Frankfort.

- 5. The Recovery Center advertised its services on its website and throughout the region on billboards and in other advertising media.
- 6. The Defendants represent to the public that they provide MAT for drug addiction by the prescription of Buprenorphine better known as Suboxone, Subutex or Zubslov. (hereinafter Suboxone)
- 7. The Recovery Center represented, and continues to represent, that it assists people in recovering from addiction. It's mission as stated on its website, is:

To address the drug epidemic that is sweeping the country and, more acutely, our region by providing medication which has been used effectively in the treatment of opioid dependence....We are dedicated to easing this pain, one individual at a time, as we offer the tools that will pave the way to a new and more productive life opioid-free.

JURISDICTION AND VENUE

- 8. This Court has jurisdiction over the Commonwealth's claims pursuant to KRS 23A.010, KRS 194A.505(8), KRS 205.8469, as the claims enumerated herein arise exclusively under Kentucky statutory and common law and from the *parens patriae* authority of the Attorney General to act on behalf of the Commonwealth of Kentucky and its citizens. The Commonwealth's claims are in excess of any minimum dollar amount necessary to establish the jurisdiction of the Court.
- 9. Pursuant to KRS 452.450 and KRS 452.460 venue is proper in Breathitt County, Kentucky, because the Defendant Recovery Center LLC is a Kentucky Corporation organized under the laws of the Commonwealth of Kentucky with a principal place of business in Breathitt County, Kentucky and a business address of 1550 Hwy 15 South, Suite 200, Jackson, KY 41339.

The Defendants Robert Jack Duncan, Dr. George Burnette, Jerry Campbell and Justin Neace are the owners of the Recovery Center LLC. The contract entered into in this matter was for services to be performed in Breathitt County as well as the Commonwealth of Kentucky, and injuries to the Commonwealth and the Kentucky Medicaid Program occurred in Breathitt County. Venue is also proper pursuant to KRS 367.190(1) because acts and/or practices of the Defendants that violated the Kentucky Consumer Protection Act were committed in Breathitt County.

THE MEDICAID PROGRAM

- The Medicaid Program (Medicaid) was created in 1965 and operates under Title XIX of the Social Security Act. Medicaid is a cooperative venture between the Federal and State governments to assist States in the provision of more adequate medical care to its poorest and most vulnerable citizens, including the poor, the disabled, the elderly, the blind, pregnant women, infants and dependent children. Medicaid is the largest program providing medical and health-related services to America's poorest people.
- 11. Within broad federal statutory and regulatory guidelines a State (a) establishes its own eligibility standards; (b) determines the type, amount, duration, and scope of services; (c) sets the rate of payment for services; and (d) administers its own program. Thus, Medicaid programs vary considerably from State to State, and within each State over time. These statutes and regulations are set forth generally in the Grants to States for Medical Assistance Programs sections of the United States Code (42 U.S.C.1396 et seq.) and the Code of Federal Regulations (42 C.F.R. 430 et seq.). The Medicaid program is administered at the federal level by the United States Department for Health and Human Services, Centers for Medicare and Medicaid Services (CMS).

- 12. The Kentucky Cabinet for Health and Family Services, Department for Medicaid Services (Kentucky Medicaid) is and was the single state agency charged with the supervision and administration of the Kentucky Medicaid program pursuant to 42 U.S.C. 1396a(5), 42 C.F.R. 431.10, KRS 194A.030(2), KRS Chapter 205 and other applicable law.
- 13. The number of Kentuckians covered by Medicaid and the costs associated with providing care for them continue to increase annually, while the Kentucky Medicaid Program's ability to keep pace with these increases has been diminished due to state budget shortfalls. Medicaid currently covers over 825,648 men, women and children in the Commonwealth, or approximately one (1) out of every five (5) Kentuckians.

FACTUAL BACKGROUND

- 14. At all times relevant hereto, The Recovery Center is and was enrolled in the Kentucky Medicaid Program as a credentialed provider, having entered into a written Provider Agreement with Kentucky Medicaid and having been issued provider billing number 7100338530. (A true and accurate copy of The Recovery Center LLC's Kentucky Medicaid Provider Agreement Application and is attached hereto as Exhibit A).
- 15. From on or about April, 2015 to the present date, the Defendants billed Medicaid for services and procedures that were not provided or that were not medically necessary, and causing unnecessary prescriptions of Suboxone to be billed to Medicaid that were issued in violation of Federal and State law regarding the provision of Medicaidn Assisted Treatment.

 As a result the Defendants received reimbursements from Medicaid that they were not entitled to receive.

- 16. The Defendants advertise and market themselves to the public as offering safe and effective Medication Assisted Treatment (MAT) through the prescribing of Suboxone in their multiple clinic locations.
- 17. Suboxone treatment is regulated by the United States Substance Abuse and Mental Health Services Administration. To administer Suboxone in a MAT program a prescribing physician/provider must be licensed and be in good standing with the United States Drug Enforcement Agency, and comply with specific federal and state statutes and regulations that address Suboxone treatment including the number of patients that can be treated in one day.
- 18. There are specific laws and regulations that mandate that Suboxone treatment be individualized to the needs of the patient and that each patient have an individualized treatment plan. This individualized treatment plan includes the gradual tapering of the dose of Suboxone prescribed to the patient, regular drug testing to ensure that the patient maintains the appropriate level of Suboxone and a psychosocial component of the treatment including both group and individual counseling.
- 19. The Defendants failed to individually treat their patients according to a treatment plan and required them to come for treatment every week no matter what stage of treatment that they were in. At these unnecessary weekly appointments each patient received the same prescription amount of Suboxone no matter how long they had been coming to The Recovery Center. Patients of the Recovery Center were seen with no individual therapeutic plan for tapering off of Suboxone. Therefore, the Defendants knowingly caused fraudulent, erroneous and/or illegal claims to be billed to Kentucky Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed to Kentucky Medicaid. As an

example of the fraudulent acts of the Defendants on one business day in 2017 at the Jackson,

Kentucky Recovery Center clinic location alone approximately 136 Medicaid recipients received prescriptions for Suboxone. All of these prescriptions were for the exact same dosage.

- 20. The thousands of fraudulent and unnecessary prescriptions written by the Defendants led to the Commonwealth being flooded with thousands of dangerous and addictive doses of Suboxone that were subject to abuse and diversion.
- 21. The Defendants were seeing hundreds of patients per day at each clinic, and were billing these office visits to Kentucky Medicaid under CPT code 99213. CPT cone 99213 is a time code that requires a physician to spend 15 minutes with a patient. It was impossible for the Defendants to spend 15 minutes per appointment with these patients based upon the number of patients they were seeing in a day. Therefore, the Defendants knowingly caused fraudulent, erroneous and/or illegal claims to be billed to Kentucky Medicaid.
- 22. At each unnecessary and fraudulent office visit the Defendants were also having each patient submit a unnecessary drug test which was then billed to Kentucky Medicaid.

 Therefore, the Defendants knowingly caused fraudulent, erroneous and/or illegal claims to be billed to Kentucky Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed to Kentucky Medicaid

COUNT I

Violations of KRS 194A.505(6) (Assistance Program Fraud)

23. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein, as if pleaded anew.

- 24. At all times relevant hereto, there was in full force and effect within the Commonwealth of Kentucky a statute denominated as KRS 194A.505(6) which provides:"No person shall, with intent to defraud or deceive, devise a scheme or plan a scheme or artifice to obtain benefits from any assistance program by means of false or fraudulent representations or intentionally engage in conduct that advances the scheme or artifice."
- 25. Defendants, with intent to defraud or deceive, devised a scheme or planned a scheme or artifice to obtain benefits from the Kentucky Medicaid program that they were not entitled to by billing Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed to Kentucky Medicaid, and/or intentionally engaged in conduct that advanced the scheme or artifice, as alleged herein, all in violation of KRS 194A.505.
- 26. KRS 194A.505(8) provides: "The Attorney General on behalf of the Commonwealth of Kentucky may commence proceedings to enforce this section, and the Attorney General shall in undertaking these proceedings exercise all powers and perform all duties that a prosecuting attorney would otherwise perform or exercise."
- 27. KRS 194A.990(5) provides: "Any person who violates KRS 194A.505(1) to (6) shall, in addition to any other penalties provided by law, forfeit and pay a civil penalty of payment to the cabinet in the amount of all benefits and payments to which the person was not entitled."
- 28. KRS 194A.990(6) provides: "Any provider who violates KRS 194A.505(1) to (6) shall, in addition to any other penalties provided by law, including the penalty set forth in subsection (5) of this section, forfeit and pay civil penalties of:

- (a) Payment to the State Treasury's general revenue fund in an amount equal to three (3) times the amount of the benefits and payments to which the person was not entitled; and
- (b) Payment to the State Treasury's general revenue fund of all reasonable expenses that the court determines have been necessarily incurred by the state in the enforcement of this section.
- 29. By reason of the Defendants' actions and/or omissions and violations of KRS 194A.505(6), as set forth herein, the Commonwealth is entitled to recover damages from Defendants in an amount to be proven at trial.
- 30. By reason of the Defendants' actions and/or omissions and violations of KRS 194A.505(6), as set forth herein, the Commonwealth is entitled to recover civil penalties in the amount of all benefits and payments to which the Defendants were not entitled in accordance with the provisions of KRS 194A.990(5).
- 31. By reason of the Defendants' actions and/or omissions and violations of KRS 194A.505(6), as set forth herein, the Commonwealth is entitled to recover civil penalties in an amount equal to three (3) times the amount of the benefits and payments to which the Defendants were not entitled in accordance with the provisions of KRS 194A.990(6)(a).
- 32. By reason of the Defendants' actions and/or omissions and violations of KRS 194A.505(6), as set forth herein, the Commonwealth is entitled to recover from the Defendants all reasonable expenses that the court determines have been necessarily incurred by the Commonwealth state in the prosecution of this action in accordance with the provisions of KRS 194A.990(6)(b).

COUNT II

Violations of KRS 205.8463(1) (Medicaid Fraud Statute)

- 33. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein as if pleaded anew.
- 34. At all times relevant hereto, there was in full force and effect within the Commonwealth of Kentucky a statute denominated as KRS 205.8463 (4) which provides: "No person shall knowingly or wantonly devise a scheme or plan a scheme or artifice, or enter into an agreement, combination, or conspiracy to obtain or aid another in obtaining payments from any medical assistance program under this chapter by means of any fictitious, false, or fraudulent application, claim, report, or document submitted to the Cabinet for Health and Family Services, or intentionally engage in conduct which advances the scheme or artifice."
- 35. Defendants, knowingly or wantonly devised a scheme or planned a scheme or artifice, or entered into an agreement, combination, or conspiracy to obtain payments from Kentucky Medicaid by means of any fictitious, false, or fraudulent applications, claim, reports, or documents submitted to the Cabinet for Health and Family Services to obtain reimbursement for billing Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed as alleged herein, or intentionally engaged in conduct which advanced the scheme or artifice, KRS 205.8463(4).
- 36. KRS 446.070 provides: "A person injured by the violation of any statute may recover from the offender such damages as he sustained by reason of the violation, although a penalty or forfeiture is imposed for such violation."
 - 37. By reason of Defendants actions and/or omissions and violations of KRS

205.8463 (1), as set forth above, the Commonwealth is entitled to recover damages from Defendants in an amount to be proven at trial.

COUNT III

Violations of KRS 205.8463(2) (Medicaid Fraud Statute)

- 38. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein, as if pleaded anew.
- 39. At all times relevant hereto, there was in full force and effect within the Commonwealth of Kentucky a statute denominated as KRS 205.8463 (2) which provides: "No person shall intentionally, knowingly, or wantonly make, present, or cause to be made or presented to an employee or officer of the Cabinet for Health and Family Services any false, fictitious, or fraudulent statement, representation, or entry in any application, claim, report, or document used in determining rights to any benefit or payment."
- 40. Defendants intentionally, knowingly, or wantonly made, presented, or caused to be made or presented to an employee or officer of the Cabinet for Health and Family Services false, fictitious, or fraudulent statements, representations, or entries in applications, claims, reports, or documents used in determining rights to any payment by, or on behalf of the Kentucky Medicaid program for the billing Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed, as alleged herein, all in violation of KRS 205.8463(2).
- 41. KRS 446.070 provides: "A person injured by the violation of any statute may recover from the offender such damages as he sustained by reason of the violation, although a penalty or forfeiture is imposed for such violation."

42. By reason of Defendants actions and/or omissions and violations of KRS 205.8463(2), as set forth herein, the Commonwealth is entitled to recover damages from Defendants in an amount to be proven at trial.

COUNT IV

Violations of KRS 205.8463(4) (Medicaid Fraud Statute)

- 43. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein as if pleaded anew.
- 44. At all times relevant hereto, there was in full force and effect within the Commonwealth of Kentucky a statute denominated as KRS 205.8463 (4) which provides: "No person shall, in any matter within the jurisdiction of the Cabinet for Health Services under this chapter, knowingly falsify, conceal, or cover-up by any trick, scheme, or device a material fact, or make any false, fictitious, or fraudulent statement or representation, or make or use any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry."
- 45. Defendants, knowingly falsified, concealed, or covered-up material facts by trick, scheme, or device and/or made false, fictitious, or fraudulent statements or representations, and/or made or used false writings or documents knowing them to contain false, fictitious, or fraudulent statements or entries, billing Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed as alleged herein, all in violation of KRS 205.8463(4).
- 46. KRS 446.070 provides: "A person injured by the violation of any statute may recover from the offender such damages as he sustained by reason of the violation, although a

penalty or forfeiture is imposed for such violation."

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47. By reason of Defendants actions and/or omissions and violations of KRS 205.8463 (4), as set forth above, the Commonwealth is entitled to recover damages from Defendants in an amount to be proven at trial.

COUNT V

Violations of KRS 367.110 et seq. (Consumer Protection Act)

- 48. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein, as if pleaded anew.
- 49. At all times relevant hereto, there was in full force and effect within the Commonwealth of Kentucky a statute denominated as KRS 367.170 (1) which provides:

 "Unfair, false, misleading, or deceptive acts or practices in the conduct of any trade or commerce are hereby declared unlawful."
- 50. KRS 367.190(1) provides in relevant part: "Whenever the Attorney General has reason to believe that any person is using, has used, or is about to use any method, act or practice declared by KRS 367.170 to be unlawful, and that proceedings would be in the public interest, he may immediately move in the name of the Commonwealth in a circuit court for a restraining order or a temporary or permanent injunction to prohibit the use of such method, act or practice."
- 51. The Defendants advertised and held themselves out to the citizens of the Commonwealth of Kentucky as offering safe and legal Medication Assisted Treatment in accordance with all applicable state and federal laws and regulations.
- 52. Defendants engaged in unfair, false, misleading or deceptive acts or practices in the conduct of a trade or commerce to obtain incentive payments from the Kentucky Medicaid

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Program that they were not entitled to by billing Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed to Kentucky pharmacies, as alleged herein, all in violation of KRS 367.170

- 53. By reason of Defendants actions and/or omissions and violations of KRS 367.170, as alleged herein, the Commonwealth is entitled to the entry of an injunction permanently enjoining Defendant and its employees, officers, directors, agents, successors, assigns, affiliates, merged or acquired predecessors, parent or controlling entities, subsidiaries and any and all persons acting in concert or participation with Defendant, from continuing their unlawful conduct, acts and practices.
- 54. Defendants actions and/or omissions and violations of KRS 367.170 as alleged herein, were willful.
- Court finds that a person is willfully using or has willfully used a method, act, or practice declared unlawful by KRS 367.170, the Attorney General, upon petition to the court, may recover, on behalf of the Commonwealth, a civil penalty of not more than two thousand dollars (\$2,000) per violation, or where the defendant's conduct is direct at a person aged sixty (60) or older, a civil penalty of not more than ten thousand dollars (\$10,000) per violation, if the trier of fact determines that the defendant knew or should have known that the person aged sixty (60) or older is substantially more vulnerable than other member of the public.
- 56. By reason of Defendants willful actions and/or omissions and violations of KRS 367.170, as alleged herein, the Commonwealth is entitled to recover at least \$2,000 per violation..

COUNT VI

Breach of Contract (Kentucky Medicaid Provider Agreement)

- 57. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein as if pleaded anew.
- 58. At all times relevant hereto, there was in full force and effect a written Provider Agreement between Kentucky Medicaid and The Recovery Center, LLC (the Kentucky Medicaid Provider Agreement).
- 59. The Kentucky Medicaid Provider Agreement includes the following relevant provisions:
 - a. "The provider agrees to provide covered services to Medicaid recipients in accordance with all applicable federal and state laws, regulations, policies, and procedures relating to the provision of medical services according to Title XIX." Kentucky Medicaid Provider Agreement.
 - b. "Assures awareness of the provisions of 42 U.S.C. 1320a-7b reproduced on the reverse side of this agreement and of the provisions of KRS 205.8451 to KRS 205.8483 relating to Medicaid Program Fraud and Abuse, and applicable Kentucky Administrative Regulations"
 - c. "Agrees payment and satisfaction of claims will be from federal and state funds and that any false claims, statements, or documents or concealment of falsification of a material fact, may be prosecuted under applicable federal and state law."
- 60. Defendants breached the terms of the Kentucky Medicaid Provider Agreement by billing Medicaid for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed.
- 61. By reason of Defendant's breach of the Kentucky Medicaid Provider Agreement, as alleged herein, the Commonwealth is entitled to recover damages from Defendants in an

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amount to be proven at trial.

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COUNT VII

Common Law Fraud

- 62. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein as if pleaded anew.
- 63. At all times relevant hereto, Defendants had statutory, regulatory and common law duties to the Commonwealth to only submit claims for Medicaid reimbursement for medically necessary legal and proper procedures.
- 64. Defendants made material false representations to the Commonwealth by submitting claims for Medicaid reimbursement for unnecessary and fraudulent medical procedures and causing improper prescriptions to be billed to Kentucky pharmacies.
- Defendants have committed common law fraud, actual and constructive.

 Defendants intentionally breached a legal duty to the Commonwealth and/or their acts and/or omissions and statutory violations, as alleged herein, tended to deceive others, violate confidences, and cause injury to public interests.
- 66. Defendants acts and/or omissions and statutory violations as alleged herein were designed to injure the Commonwealth to obtain an undue and unconscientious advantage and to secure Medicaid reimbursements to which they were not entitled to
- 67. Defendants made material false representations that are proximate causes of injury and damages to the Commonwealth.
- 68. Defendants knew that these representations were false, or made them recklessly without any regard for the truth and as a positive assertion.

- 69. Defendants acted with special knowledge in making the representations.
- 70. Defendants made the above-described false representations willfully.
- 71. Defendants intended that these representations should be acted upon.
- 72. The Commonwealth had a right to rely upon the Defendants' representations.
- 73. The Commonwealth relied upon Defendants' representations and suffered damages as a proximate result.
- 74. By reason of Defendants' fraudulent actions and/or omissions, as set forth herein, the Commonwealth is entitled to recover damages from Defendants in an amount to be proven at trial.

COUNT VIII

KRS 411.184 (Punitive Damages)

- 75. The Commonwealth repeats, reiterates and incorporates by reference each and every allegation of the Complaint herein as if pleaded anew.
- 76. Defendants, by their actions and/or omissions, as set forth herein, acted towards the Commonwealth with oppression, fraud, malice, gross negligence, and/or reckless disregard for the lives and safety of others to a degree sufficient to warrant the imposition of punitive damages to deter such further conduct on behalf of the Defendants, or similarly situated parties.

PRAYER FOR RELIEF

WHEREFORE, the Plaintiff, the Commonwealth of Kentucky Demands as follows:

- A. For a judgment against Defendants in an amount to be proven at trial.
- B. In addition to any other penalties provided by law, for a judgment awarding civil

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penalties against Defendants in the amount of all Medicaid benefits and payments to which Defendants were not entitled, in accordance with the provisions of KRS 194A.990(5).

- C. In addition to any other penalties provided by law, including the penalty provided by KRS 194A.990(5), for a judgment awarding civil penalties against Defendants in amount equal to three (3) times the amount of the Medicaid benefits and payments to which Defendants were not entitled in accordance with the provisions of KRS 194A.990(6)(a).
- D. For a judgment awarding treble damages pursuant to KRS 205.8467 and KRS 446.070 on account of the damages caused to the Commonwealth of Kentucky as a result of Defendants unlawful conduct.
- E. For a judgment awarding against Defendants awarding civil penalties of \$2,000 for each willful violation of the Kentucky Consumer Protection Act pursuant to KRS 367.990(2).
- F. For a judgment permanently enjoining Defendants and their employees, officers, directors, agents, successors, assigns, affiliates, merged or acquired predecessors, parent or controlling entities, subsidiaries, and any and all persons acting in concert or participation with Defendants, from continuing its unlawful conduct, acts and practices.
- G. For a judgment against Defendants awarding punitive damages pursuant to KRS 411.184;
- H. For a judgment against Defendants for all reasonable expenses that the court determines have been necessarily incurred by the Commonwealth in the prosecution of this action in accordance with the provisions of KRS 194A.990(6)(b).
 - I. For any and all other relief to which the Commonwealth may appear entitled.
 - J. For a trial by jury on all issues so triable.

Respectfully Submitted,

ANDY BESHEAR Attorney General of Kentucky

By: \s\ Wesley W. Duke

Wesley W. Duke, Assistant Director Medicaid Fraud and Abuse Control Division

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Counsel for Plaintiff, Commonwealth of Kentucky