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CLERK U.S. DISTRICT COURT
CENTRAL DIST. OF CALIF.
LOS ANGELES

UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA

October 2012 Grand Jury

12 UNITED STATES OF AMERICA,

13 Plaintiff,

14 v.

15 GODWIN ONYEABOR,
16 DR. SRI J. WIJEGUNARATNE,
aka "Dr. J," and
17 HEIDI MORISHITA,

18 Defendants.

) CR No. 12-905(A) -R

) F I R S T
) S U P E R S E D I N G
) I N D I C T M E N T

) [18 U.S.C. § 1349: Conspiracy
) to Commit Health Care Fraud;
) 18 U.S.C. § 1347: Health Care
) Fraud; 18 U.S.C. § 2: Causing
) an Act to be Done; 18 U.S.C.
) § 371: Conspiracy to Pay and
) Receive Health Care Kickbacks
) in Violation of 42 U.S.C.
) §§ 1320a-7b(b) (1) (A) and
) (2) (A)]

21 The Grand Jury charges:

22 COUNT ONE

23 [18 U.S.C. § 1349]

24 A. INTRODUCTORY ALLEGATIONS

25 At all times relevant to this First Superseding Indictment:

26 The Conspirators

27 1. Victoria N. Onyeabor ("V. Onyeabor") was the President,
28

1 Chief Executive Officer, and Registered Agent for Fendih Medical
2 Supply Inc. ("Fendih"), a supplier of durable medical equipment
3 ("DME"), primarily power wheelchairs ("PWCs"); located in San
4 Bernadino, California.

5 2. Defendant GODWIN ONYEABOR ("G. ONYEABOR") was the
6 Secretary of Fendih. Among his duties, defendant G. ONYEABOR
7 delivered PWCs for Fendih.

8 3. Defendant DR. SRI J. WIJEGUNARATNE, also known as
9 ("aka") "Dr. J," was a physician licensed to practice medicine in
10 the State of California. Defendant WIJEGUNARATNE wrote medically
11 unnecessary PWC prescriptions and sold them to Fendih.

12 4. Defendant HEIDI MORISHITA ("MORISHITA") obtained
13 medically unnecessary PWC prescriptions and sold them to Fendih.

14 5. On or about September 20, 2005, V. Onyeabor registered
15 as the sole Incorporator and Registered Agent of Fendih in State
16 of California records.

17 6. In or around October 2005, V. Onyeabor opened a
18 corporate bank account for Fendih at Wells Fargo Bank, account
19 number xxxxxx8370. V. Onyeabor maintained sole signature
20 authority on this account.

21 7. On or about May 22, 2006, V. Onyeabor executed and
22 submitted an application to Medicare to obtain and maintain a
23 Medicare provider number for Fendih.

24 8. On or about March 15, 2007, V. Onyeabor executed and
25 submitted an electronic funds transfer agreement ("EFT") to
26 Medicare, requesting that all future reimbursements from Medicare
27 be directly deposited into Fendih's Wells Fargo corporate
28 account.

1 9. On or about January 23, 2009, V. Onyeabor opened a
2 second corporate bank account for Fendih at Citibank, account
3 number xxxxx4256. V. Onyeabor maintained sole signature
4 authority on this account.

5 10. On or about February 3, 2009, V. Onyeabor executed and
6 submitted an amended EFT agreement to Medicare, requesting that
7 all future reimbursements from Medicare be directly deposited
8 into Fendih's Citibank corporate account.

9 11. Between on or about January 9, 2007, and on or about
10 February 18, 2012, Fendih submitted to Medicare claims totaling
11 approximately \$1,498,155 for purported PWCs and related services,
12 and Medicare paid Fendih approximately \$978,818 on those claims.

13 The Medicare Program

14 12. Medicare was a federal health care benefit program,
15 affecting commerce, that provided benefits to individuals who
16 were over the age of 65 or disabled. Medicare was administered
17 by the Centers for Medicare and Medicaid Services ("CMS"), a
18 federal agency under the United States Department of Health and
19 Human Services ("HHS").

20 13. CMS contracted with private insurance companies to (a)
21 certify DME providers for participation in the Medicare program
22 and monitor their compliance with Medicare standards; (b) process
23 and pay claims; and (c) perform program safeguard functions, such
24 as identifying and reviewing suspect claims.

25 14. Individuals who qualified for Medicare benefits were
26 referred to as Medicare "beneficiaries." Each Medicare
27 beneficiary was given a Health Identification Card containing a
28 unique identification number ("HICN").

1 15. DME companies, physicians, and other health care
2 providers that provided medical services that were reimbursed by
3 Medicare were referred to as Medicare "providers."

4 16. To obtain payment from Medicare, a DME company first
5 had to apply for and obtain a provider number. By signing the
6 provider application, the DME company agreed to abide by Medicare
7 rules and regulations.

8 17. If Medicare approved a provider's application, Medicare
9 would assign the provider a Medicare provider number, enabling
10 the provider (such as a DME company) to submit claims to Medicare
11 for services and supplies provided to Medicare beneficiaries.

12 18. To obtain and maintain their Medicare provider number
13 billing privileges, DME suppliers had to meet Medicare standards
14 for participation. The Medicare contractor responsible for
15 evaluating and certifying DME providers' compliance with these
16 standards was Palmetto GBA ("Palmetto").

17 19. From in or about October 2006 through the date of this
18 Indictment, Noridian Administrative Services ("Noridian")
19 processed and paid Medicare DME claims in Southern California.

20 20. Most DME providers, including Fendih, submitted their
21 claims electronically pursuant to an agreement with Medicare that
22 they would submit claims that were accurate, complete, and
23 truthful.

24 21. Medicare paid DME providers only for DME that was
25 medically necessary to the treatment of a beneficiary's illness
26 or injury, was prescribed by a beneficiary's physician, and was
27 provided in accordance with Medicare regulations and guidelines
28

1 that governed whether a particular item or service would be paid
2 by Medicare.

3 22. To bill Medicare for DME it provided to a beneficiary,
4 a DME provider was required to submit a claim (Form 1500).
5 Medicare required claims to be truthful, complete, and not
6 misleading. In addition, when a claim was submitted, the
7 provider was required to certify that the services or supplies
8 covered by the claim were medically necessary.

9 23. Medicare required a claim for payment to set forth,
10 among other things, the beneficiary's name and HICN, the type of
11 DME provided to the beneficiary, the date the DME was provided,
12 and the name and unique physician identification number ("UPIN")
13 or national provider identifier ("NPI") of the physician who
14 prescribed or ordered the DME.

15 24. Medicare had a co-payment requirement for DME.
16 Medicare reimbursed providers 80% of the allowed amount of a DME
17 claim and the beneficiary was ordinarily obligated to pay the
18 remaining 20%.

19 B. THE OBJECT OF THE CONSPIRACY

20 25. Beginning on or about January 9, 2007, and continuing
21 through on or about February 18, 2012, in San Bernardino County,
22 within the Central District of California, and elsewhere,
23 defendants G. ONYEABOR and WIJEGUNARATNE, together with others
24 known and unknown to the Grand Jury, including but not limited to
25 V. Onyeabor, knowingly combined, conspired, and agreed to commit
26 health care fraud, in violation of Title 18, United States Code,
27 Section 1347.

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1 C. THE MANNER AND MEANS OF THE CONSPIRACY

2 26. The object of the conspiracy was carried out, and to be
3 carried out, in substance, as follows:

4 a. Defendant G. ONYEABOR and V. Onyeabor would pay
5 individuals, including defendants WIJEGUNARATNE and Heidi
6 Morishita, for medically unnecessary PWC prescriptions for the
7 purpose of using those prescriptions to submit, and cause the
8 submission of, false and fraudulent claims to Medicare on behalf
9 of Fendih.

10 b. After acquiring the false and fraudulent PWC
11 prescriptions, V. Onyeabor and her co-conspirators would submit,
12 and cause the submission of, false and fraudulent claims to
13 Medicare for PWCs and related accessories that were purportedly
14 provided by Fendih to Medicare beneficiaries.

15 c. As a result of the submission of false and
16 fraudulent claims, Medicare would make payments to Fendih's
17 corporate bank accounts at Wells Fargo and Citibank.

18 d. Defendant G. ONYEABOR and V. Onyeabor would then.
19 transfer and disburse, and caused the transfer and disbursement
20 of, monies from Fendih's corporate bank accounts to themselves
21 and defendant MORISHITA. Defendant G. ONYEABOR and V. Onyeabor
22 would also transfer and disburse, and caused the transfer and
23 disbursement of, cash payments to defendants WIJEGUNARATNE and
24 Heidi Morishita from Medicare proceeds.

COUNTS TWO THROUGH TWELVE

[18 U.S.C. §§ 1347 and 2(b)]

A. INTRODUCTORY ALLEGATIONS

27. The Grand Jury incorporates by reference and re-alleges paragraphs 1 through 24 above of this First Superseding Indictment as though set forth in their entirety herein.

B. THE SCHEME TO DEFRAUD

28. Beginning on or about January 9, 2007, and continuing through on or about February 18, 2012, in San Bernardino County, within the Central District of California, and elsewhere, defendants G. ONYEABOR and WIJEGUNARATNE, together with others known and unknown to the Grand Jury, including but not limited to V. Onyeabor, knowingly, willfully, and with intent to defraud, executed, and attempted to execute, a scheme and artifice: (a) to defraud a health care benefit program, namely, Medicare, as to material matters in connection with the delivery of and payment for health care benefits, items, and services; and (b) to obtain money from Medicare by means of material false and fraudulent pretenses and representations and the concealment of material facts in connection with the delivery of and payment for health care benefits, items, and services.

C. MEANS TO ACCOMPLISH THE SCHEME TO DEFRAUD

29. The fraudulent scheme operated, in substance, as described in paragraph 26 above of this First Superseding Indictment, which is hereby incorporated by reference as though set forth in its entirety herein.

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D. THE EXECUTION OF THE FRAUDULENT SCHEME

30. On or about the dates set forth below, within the Central District of California and elsewhere, the defendants referenced below, together with others known and unknown to the Grand Jury, including but not limited to V. Onyeabor, for the purpose of executing and attempting to execute the fraudulent scheme described above, knowingly and willfully caused to be submitted to Medicare for payment the following false and fraudulent claims purportedly for power wheelchairs and related accessories:

<u>COUNT</u>	<u>DEF- ENDANT (S)</u>	<u>BENE- FICIARY</u>	<u>CLAIM NUMBER</u>	<u>DATE BILLED TO MEDICARE</u>	<u>AMOUNT BILLED TO MEDICARE</u>
TWO	G. ONYEABOR	M.S.	108031816780 000	01/30/08	\$4,500
THREE	G. ONYEABOR	J.V.T.	108032848386 000	01/30/08	\$4,500
FOUR	G. ONYEABOR	V.B.	109127804663 000	05/05/09	\$4,500
FIVE	G. ONYEABOR	C.U.	109177805972 000	06/25/09	\$4,500
SIX	G. ONYEABOR	C.T.	109229812863 000	08/15/09	\$4,500
SEVEN	G. ONYEABOR, and WIJEGUN- ARATNE	T.S.	11084806604 000	03/21/11	\$2,800
EIGHT	G. ONYEABOR, and WIJEGUN- ARATNE	E.S.	11088807306 000	03/28/11	\$2,800

<u>COUNT</u>	<u>DEF- ENDANT (S)</u>	<u>BENE- FICIARY</u>	<u>CLAIM NUMBER</u>	<u>DATE BILLED TO MEDICARE</u>	<u>AMOUNT BILLED TO MEDICARE</u>
NINE	G. ONYEABOR, and WIJEGUN- ARATNE	M.B.	11105808986 000	03/28/11	\$2,800
TEN	G. ONYEABOR, and WIJEGUN- ARATNE	M.P.	111088476380 00	04/20/11	\$2,800
ELEVEN	G. ONYEABOR, and WIJEGUN- ARATNE	W.W.	111158413470 00	04/23/11	\$2,800
TWELVE	G. ONYEABOR, and WIJEGUN- ARATNE	R.L.V.	111368330650 00	05/14/11	\$2,800

COUNT THIRTEEN

[18 U.S.C. §§ 371 and 2(b)]

A. INTRODUCTORY ALLEGATIONS

31. The Grand Jury incorporates by reference and re-alleges paragraphs 1 through 24 above of this First Superseding Indictment as though set forth in their entirety herein.

B. OBJECT OF THE CONSPIRACY

32. Beginning at least as early as on or about March 12, 2009, and continuing through at least on or about February 18, 2012, in San Bernardino County, within the Central District of California, and elsewhere, defendants G. ONYEABOR, WIJEGUNARATNE, and MORISHITA, together with others known and unknown to the Grand Jury, including but not limited to V. Onyeabor, knowingly combined, conspired, and agreed to pay and receive kickbacks for patient referrals, in violation of Title 42, United States Code, Sections 1320a-7b(b)(1)(A) and (2)(A).

C. THE MANNER AND MEANS OF THE CONSPIRACY

33. The object of the conspiracy was carried out, and to be carried out, in substance, as follows:

a. V. Onyeabor would maintain a valid Medicare provider number for Fendih in order to submit claims to Medicare for DME.

b. Defendant WIJEGUNARATNE would provide DME prescriptions to Fendih.

c. Defendant MORISHITA would provide DME prescriptions to Fendih.

1 d. Defendant G. ONYEABOR and V. Onyeabor would pay,
2 and cause to be paid, kickbacks to defendants WIJEGUNARATNE and
3 MORISHITA in return for DME prescriptions that Fendih would use
4 to submit claims to Medicare.

5 C. OVERT ACTS

6 34. In furtherance of the conspiracy and to accomplish its
7 object, defendants G. ONYEABOR, WIJEGUNARATNE, and MORISHITA,
8 together with others known and unknown to the Grand Jury,
9 including but not limited to V. Onyeabor, committed and willfully
10 caused others to commit the following overt acts, among others,
11 within the Central District of California and elsewhere:

12 Overt Act No. 1: On or about May 16, 2009, defendant G.
13 ONYEABOR and V. Onyeabor paid and caused to be paid \$3,000 to
14 defendant MORISHITA. This check, which was drawn upon Fendih's
15 Citibank account number xxxxx4256 (check number #576),
16 represented kickbacks for DME prescriptions provided by defendant
17 MORISHITA to Fendih.

18 Overt Act No. 2: On or about June 19, 2009, defendant G.
19 ONYEABOR and V. Onyeabor paid and caused to be paid \$2,000 to
20 defendant MORISHITA. This check, which was drawn upon Fendih's
21 Citibank account number xxxxx4256 (check number #604),
22 represented kickbacks for DME prescriptions provided by defendant
23 MORISHITA to Fendih.

24 Overt Act No. 3: On or about July 24, 2009, defendant G.
25 ONYEABOR and V. Onyeabor paid and caused to be paid \$3,000 to
26 defendant MORISHITA. This check, which was drawn upon Fendih's
27 Citibank account number xxxxx4256 (check number #508),
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1 represented kickbacks for DME prescriptions provided by defendant
2 MORISHITA to Fendih.

3 Overt Act No. 4: In or around March 2011, defendant
4 WIJEGUNARATNE paid and caused to be paid cash kickbacks to "CC-
5 1," the administrator at a residential health care facility
6 ("RHF") located in the Central District of California. In
7 exchange for these kickbacks, CC-1 gave defendant WIJEGUNARATNE
8 access to the patients at the RHF, and helped defendant
9 WIJEGUNARATNE to identify patients for whom defendant
10 WIJEGUNARATNE could prescribe PWCs.

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1 Overt Act No. 5: In or around March 2011, defendant G.
2 ONYEABOR and V. Onyeabor paid and caused to be paid cash
3 kickbacks to defendant WIJEGUNARATNE for DME prescriptions
4 provided by defendant WIJEGUNARATNE to Fendih, including but not
5 limited to those prescriptions generated pursuant to defendant
6 WIJEGUNARATNE's arrangement with CC-1 at the RHF.

7
8
9 A TRUE BILL

10
11 Foreperson

12
13
14
15 ANDRÉ BIROTTE JR.
United States Attorney

16
17 Assistant United States Attorney
18 Chief, Criminal Division

19 RICHARD E. ROBINSON
Assistant United States Attorney
20 Chief, Major Frauds Section

21 SAM SHELDON
Deputy Chief, Fraud Section
22 United States Department of Justice

23 CHARLES LA BELLA
Deputy Chief, Fraud Section
24 United States Department of Justice

25 O. BENTON CURTIS, III
Assistant Chief, Fraud Section
26 United States Department of Justice

27 FRED MEDICK
Trial Attorney, Fraud Section
28 United States Department of Justice

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

FILED
CLERK, U.S. DISTRICT COURT
APR 24 2013
CENTRAL DISTRICT OF CALIFORNIA
BY *W* DEPUTY

UNITED STATES OF AMERICA,)
)
Plaintiff,)
)
V.)
)
DR. SRI J. WIJEGUNARATNE,)
)
Defendant.)
_____)

CASE NO. CR-12-905(A) -R

V E R D I C T

We the jury in the above-entitled cause, find the defendant

DR. SRI J. WIJEGUNARATNE

Guilty as charged in count one of the 1st
(Guilty/Not Guilty) superseding indictment.

Guilty as charged in count seven of the 1st
(Guilty/Not Guilty) superseding indictment.

Guilty as charged in count eight of the 1st
(Guilty/Not Guilty) superseding indictment.

Guilty as charged in count nine of the 1st
(Guilty/Not Guilty) superseding indictment.

VERDICT - WIJEGUNARATNE - continued on PAGE TWO

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VERDICT - DR. SRI J. WIJEGUNARATNE - PAGE TWO
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Guilty as charged in count ten of the 1st
(Guilty/Not Guilty) superseding indictment.

Guilty as charged in count eleven of the 1st
(Guilty/Not Guilty) superseding indictment.

Guilty as charged in count twelve of the 1st
(Guilty/Not Guilty) superseding indictment.

Guilty as charged in count thirteen of the 1st
(Guilty/Not Guilty) superseding indictment.

Dated: 4/24/2013
at Los Angeles, California


FOREPERSON OF THE JURY

United States District Court
Central District of California

UNITED STATES OF AMERICA vs.

CR 12-905(A)-R

Defendant DR. SRI J. WIJEGUNARATNE

S.S.#-----

Residence: 820 S Cottontail Lane
Anaheim, CA 92808

Mailing: SAME

JUDGMENT AND PROBATION/COMMITMENT ORDER

In the presence of the attorney for the government, the defendant appeared in person, on: SEPTEMBER 9, 2013
Month / Day / Year

COUNSEL:

 WITHOUT COUNSEL

However, the court advised defendant of right to counsel and asked if defendant desired to have counsel appointed by the Court and the defendant thereupon waived assistance of counsel.

XX WITH COUNSEL Victor Sherman and Michael Khouri, retained

 PLEA:

 GUILTY, and the Court being satisfied that there is a factual basis for the plea.

 NOLO CONTENDERE

XX NOT GUILTY

FINDING:

There being a jury verdict of XX GUILTY, defendant has been convicted as charged of the offense(s) of: Conspiracy to commit health care fraud in violation of Title 18 USC 1349 as charged in count 1 of the first superseding indictment. Health care fraud, causing an act to be done in violation of Title 18 USC 1347, 2(b) as charged in counts 7 through 12 of the first superseding indictment. Conspiracy to pay and receive health care kickbacks, and causing an act to be done in violation of Title 18 USC 371, 2(b) as charged in count 13 of the first superseding indictment.

JUDGMENT AND PROBATION/COMMITMENT ORDER:

The Court asked whether defendant had anything to say why judgment should not be pronounced. Because no sufficient cause to the contrary was shown, or appeared to the Court, the Court adjudged the defendant guilty as charged and convicted and ordered that: Pursuant to the Sentencing Reform Act of 1984, it is the judgement of the court the defendant is hereby committed to the Bureau of Prisons to be imprisoned for a term of:

Twenty-seven (27) months.

The term consists of 27 months on each of counts 1 and 13, and 21 months on each of counts 7 through 12 of the first superseding indictment, all such terms to be served concurrently.

IT IS FURTHER ADJUDGED that upon release from imprisonment defendant shall be placed on supervised release for three (3) years. The term consists of 3 years on each of counts 1, 7 through 12, and 13 of the first superseding indictment, all such terms to run concurrently under the following terms and conditions: the defendant 1) shall comply with the rules and regulations of the U.S. Probation Office and General Order 05-02, and General Order 01-05, including the three special conditions delineated in General Order 01-05; 2) shall cooperate in the collection of a DNA sample from the defendant; 3) shall apply all monies received from income tax refunds, lottery winnings, inheritance, judgements and any anticipated or unexpected financial gains to the

-- GO TO PAGE TWO --

 KTI
Deputy Clerk

U.S.A. V. DR. SRI J. WIJEGUNARATNE

CR 012-905(A)-R

-- CONTINUED FROM PAGE ONE --

PAGE TWO

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JUDGMENT AND PROBATION/COMMITMENT ORDER
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outstanding court-ordered financial obligation; and 4) shall not be employed in any position that requires licensing and/or certification by any local, state or federal agency without prior approval of the Probation Officer.

IT IS FURTHER ORDERED that defendant pay a special assessment of \$800.00, which is due immediately.

IT IS FURTHER ORDERED that the drug testing condition mandated by statute is suspended based on the Court's determination that the defendant poses a low risk of future substance abuse.

IT IS FURTHER ORDERED that defendant shall pay restitution in the total amount of \$87,846.32 to victims as set forth in a separate victim list prepared by the probation office which this Court adopts and which reflects the Court's determination of the amount of restitution due to each victim. The victim list, which shall be forwarded to the fiscal section of the clerk's office, shall remain confidential to protect the privacy interests of the victims.

IT IS FURTHER ORDERED that defendant shall be held jointly and severally liable with co-participants, Victoria N. Onyeabor, Godwin Onyeabor, and Heidi Morishita (Docket No. CR 12-00905-R) for the amount of restitution ordered in this judgment, to the extent and for the amount that each is determined liable for the same victim losses. The victims' recovery is limited to the amount of their loss and the defendant's liability for restitution ceases if and when the victims receive full restitution.

IT IS FURTHER ORDERED that the underlying indictment and any remaining counts are dismissed as to this defendant.

IT IS FURTHER ORDERED that execution of sentence is stayed until October 7, 2013 at 12 noon, by which date and time the defendant shall self-surrender to his designated institution or to the U.S. Marshal located at the Roybal Federal Building and Courthouse, 255 East Temple Street, Los Angeles, CA 90012.

IT IS FURTHER ORDERED that defendant's bond is exonerated upon surrender.

-- GO TO PAGE THREE --

KTI

Deputy Clerk

JUDGMENT AND PROBATION/COMMITMENT ORDER

In addition to the special conditions of supervision imposed above, it is hereby ordered that the Standard Conditions of Probation and Supervised Release set out on the reverse side of this judgment be imposed. the Court may change the conditions of supervision, reduce or extend the period of supervision, and at any time during the supervision period or within the maximum period permitted by law, may issue a warrant and revoke supervision for a violation occurring during the supervision period.

Signed by: District Judge


MANUEL L. REAL

It is ordered that the Clerk deliver a copy of this Judgment and Probation/Commitment Order to the U.S. Marshal or other qualified officer.

Terry Nafisi, Clerk of Court

Dated/Filed September 9, 2013
Month / Day / Year

By _____ /S/
Kane Tien, Deputy Clerk

In addition to the special conditions of supervision imposed above, it is hereby ordered that the Standard Conditions of Probation and Supervised Release within this judgment be imposed. The Court may change the conditions of supervision, reduce or extend the period of supervision, and at any time during the supervision period or within the maximum period permitted by law, may issue a warrant and revoke supervision for a violation occurring during the supervision period.

The defendant shall comply with the standard conditions that have been adopted by this court (set forth below).

STANDARD CONDITIONS OF PROBATION AND SUPERVISED RELEASE

While the defendant is on probation or supervised release pursuant to this judgment:

1. The defendant shall not commit another Federal, state or local crime;
2. the defendant shall not leave the judicial district without the written permission of the court or probation officer;
3. the defendant shall report to the probation officer as directed by the court or probation officer and shall submit a truthful and complete written report within the first five days of each month;
4. the defendant shall answer truthfully all inquiries by the probation officer and follow the instructions of the probation officer;
5. the defendant shall support his or her dependents and meet other family responsibilities;
6. the defendant shall work regularly at a lawful occupation unless excused by the probation officer for schooling, training, or other acceptable reasons;
7. the defendant shall notify the probation officer at least 10 days prior to any change in residence or employment;
8. the defendant shall refrain from excessive use of alcohol and shall not purchase, possess, use, distribute, or administer any narcotic or other controlled substance, or any paraphernalia related to such substances, except as prescribed by a physician;
9. the defendant shall not frequent places where controlled substances are illegally sold, used, distributed or administered;
10. the defendant shall not associate with any persons engaged in criminal activity, and shall not associate with any person convicted of a felony unless granted permission to do so by the probation officer;
11. the defendant shall permit a probation officer to visit him or her at any time at home or elsewhere and shall permit confiscation of any contraband observed in plain view by the probation officer;
12. the defendant shall notify the probation officer within 72 hours of being arrested or questioned by a law enforcement officer;
13. the defendant shall not enter into any agreement to act as an informer or a special agent of a law enforcement agency without the permission of the court;
14. as directed by the probation officer, the defendant shall notify third parties of risks that may be occasioned by the defendant's criminal record or personal history or characteristics, and shall permit the probation officer to make such notifications and to conform the defendant's compliance with such notification requirement;
15. the defendant shall, upon release from any period of custody, report to the probation officer within 72 hours;
16. and, for felony cases only: not possess a firearm, destructive device, or any other dangerous weapon.

The defendant will also comply with the following special conditions pursuant to General Order 01-05 (set forth below).

STATUTORY PROVISIONS PERTAINING TO PAYMENT AND COLLECTION OF FINANCIAL SANCTIONS

The defendant shall pay interest on a fine or restitution of more than \$2,500, unless the court waives interest or unless the fine or restitution is paid in full before the fifteenth (15th) day after the date of the judgment pursuant to 18 U.S.C. §3612(f)(1). Payments may be subject to penalties for default and delinquency pursuant to 18 U.S.C. §3612(g). Interest and penalties pertaining to restitution, however, are not applicable for offenses completed prior to April 24, 1996.

If all or any portion of a fine or restitution ordered remains unpaid after the termination of supervision, the defendant shall pay the balance as directed by the United States Attorney's Office. 18 U.S.C. §3613.

The defendant shall notify the United States Attorney within thirty (30) days of any change in the defendant's mailing address or residence until all fines, restitution, costs, and special assessments are paid in full. 18 U.S.C. §3612(b)(1)(F).

The defendant shall notify the Court through the Probation Office, and notify the United States Attorney of any material change in the defendant's economic circumstances that might affect the defendant's ability to pay a fine or restitution, as required by 18 U.S.C. §3664(k). The Court may also accept such notification from the government or the victim, and may, on its own motion or that of a party or the victim, adjust the manner of payment of a fine or restitution-pursuant to 18 U.S.C. §3664(k). See also 18 U.S.C. §3572(d)(3) and for probation 18 U.S.C. §3563(a)(7).

Payments shall be applied in the following order:

1. Special assessments pursuant to 18 U.S.C. §3013;
2. Restitution, in this sequence:
 - Private victims (individual and corporate),
 - Providers of compensation to private victims,
 - The United States as victim;
3. Fine;
4. Community restitution, pursuant to 18 U.S.C. §3663(c); and
5. Other penalties and costs.

SPECIAL CONDITIONS FOR PROBATION AND SUPERVISED RELEASE

As directed by the Probation Officer, the defendant shall provide to the Probation Officer: (1) a signed release authorizing credit report inquiries; (2) federal and state income tax returns or a signed release authorizing their disclosure and (3) an accurate financial statement, with supporting documentation as to all assets, income and expenses of the defendant. In addition, the defendant shall not apply for any loan or open any line of credit without prior approval of the Probation Officer.

The defendant shall maintain one personal checking account. All of defendant's income, "monetary gains," or other pecuniary proceeds shall be deposited into this account, which shall be used for payment of all personal expenses. Records of all other bank accounts, including any business accounts, shall be disclosed to the Probation Officer upon request.

The defendant shall not transfer, sell, give away, or otherwise convey any asset with a fair market value in excess of \$500 without approval of the Probation Officer until all financial obligations imposed by the Court have been satisfied in full.

These conditions are in addition to any other conditions imposed by this judgment.

RETURN

I have executed the within Judgment and Commitment as follows:

Defendant delivered on	_____	to	_____
Defendant noted on appeal on	_____		
Defendant released on	_____		
Mandate issued on	_____		
Defendant's appeal determined on	_____		
Defendant delivered on	_____	to	_____

at _____

the institution designated by the Bureau of Prisons, with a certified copy of the within Judgment and Commitment.

United States Marshal

B
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Date

Deputy Marshal

CERTIFICATE

I hereby attest and certify this date that the foregoing document is a full, true and correct copy of the original on file in my office, and in my legal custody.

B
y

Filed
Date

Deputy Clerk

FOR U.S. PROBATION OFFICE USE ONLY

Upon a finding of violation of probation or supervised release, I understand that the court may (1) revoke supervision, (2) extend the term of supervision, and/or (3) modify the conditions of supervision.

These conditions have been read to me. I fully understand the conditions and have been provided a copy of them.

(Signed) _____

Defendant

Date

U. S. Probation Officer/Designated Witness

Date

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation)
Against:)
)
Sri Jayantha Wijegoonaratna, M.D.)
Physician's and Surgeon's)
Certificate No. A100580)
)
Petitioner)
)
_____)

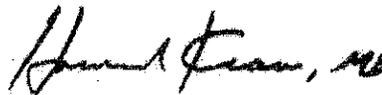
Case No. 11-2012-227140

ORDER DENYING PETITION FOR RECONSIDERATION

The Petition filed by Victor Sherman, attorney for Sri Jayantha Wijegoonaratna, for the reconsideration of the decision in the above-entitled matter having been read and considered by the Medical Board of California, is hereby denied.

This Decision remains effective at 5:00 p.m. on January 14, 2016.

IT IS SO ORDERED: January 13, 2016.



Howard Krauss, Chair
Panel B

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation)
Against:)
)
)
SRI JAYANTHA WIJEGONARATNA, M.D.)
)
Physician's and Surgeon's)
Certificate No. A100580)
)
Respondent)
_____)

Case No. 11-2012-227140

DECISION

The attached Proposed Decision is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on January 14, 2016.

IT IS SO ORDERED December 15, 2015.

MEDICAL BOARD OF CALIFORNIA

By: 

Howard Krauss, M.D.
Chair, Panel B

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

SRI JAYANTHA WIJEGONARATNA,
M.D.

Physician's and Surgeon's Certificate
No. A 100580

Respondent.

Case No. 11-2012-227140

OAH No. 2015030913

PROPOSED DECISION

This matter was heard before Marcie Larson, Administrative Law Judge, Office of Administrative Hearings, State of California, on November 2, 2015, in Sacramento, California.

Kimberly Kirchmeyer (complainant), Executive Director of the Medical Board of California (Board), Department of Consumer Affairs, was represented by Demond Philson, Deputy Attorney General.

Sri Jayantha Wijegoonaratna, M.D. (respondent) appeared at the hearing by telephone and was represented by Victor Sherman, Attorney at Law.

Senarath Pitigala, an interpreter, provided Sinhalese interpretation services at the hearing.

Evidence was received, the record was closed, and the matter was submitted for decision on November 2, 2015.

FACTUAL FINDINGS

1. On or about June 27, 2007, the Board issued to respondent Physician's and Surgeon's Certificate number A 100580 (license). The license was in full force and effect at all times relevant to this proceeding, and will expire on November 30, 2016, unless renewed or revoked.

2. On October 6, 2014, complainant filed an Accusation against respondent in her official capacity. Complainant alleged that respondent's license is subject to discipline based upon his criminal conviction for crimes substantially related to the practice of medicine. Specifically, respondent was convicted of conspiracy to commit health care fraud, health care fraud, and conspiracy to pay and receive health care kickbacks, all violations of federal law. Complainant further alleged that the crimes respondent committed constituted dishonest or corrupt acts and unprofessional conduct.

3. Respondent timely filed a Notice of Defense to the Accusation. The matter was set for an evidentiary hearing before an Administrative Law Judge of the Office of Administrative Hearings, an independent adjudicative agency of the State of California, pursuant to Government Code section 11500 et seq.

Criminal Conviction

4. On or about April 24, 2013, in the United States District Court, Central District of California, respondent was found guilty by a jury of eight counts of conspiracy to commit health care fraud, a violation 18 United States Code section 1349; health care fraud, a violation of 18 United States Code section 1347 and 2 (b); and conspiracy to pay and receive health care kickbacks in violation of 42 United States Code sections 1320a-7b(b)(1)(A) and (2)(A), a violation of 18 United States Code sections 371 and 2 (b). The criminal offenses are felonies.

5. Respondent was sentenced to 27 months in federal prison. Upon release from prison, respondent was placed on supervised release for three years. Respondent was held jointly and severally liable with co-defendants for \$87,846.32 in restitution to be paid to specified victims. Respondent was also prohibited from being employed in any position that requires licensing and/or certification by any local, state or federal agency without prior approval from his probation officer. Respondent served his prison sentence and is currently on supervised released.

6. The First Superseding Indictment (Indictment) filed against respondent and two co-defendants alleged that between January 9, 2007, and February 18, 2012, respondent wrote medically unnecessary prescriptions primarily for power wheelchairs. Respondent was involved in a "kickback" scheme whereby an administrator of a residential health care facility gave respondent access to patients whom he could prescribe wheelchairs. The administrator was paid money for giving respondent access to the patients. Respondent then sold the prescriptions to the individuals who owed Fendih Medical Supply, Inc. (Fendih). Fendih then submitted fraudulent claims to Medicare for reimbursement for the wheelchairs. Fendih paid respondent part of the proceeds from the Medicare payments.

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Respondent's Evidence

7. Respondent did not testify at hearing. Rather, he offered the transcripts from his criminal trial and the briefs he filed in support of his appeal of the conviction to the United States Court of Appeals for the Ninth Circuit. Respondent contended at his criminal trial, in his appellate court briefs, and at the hearing in this matter, that the prescriptions he wrote for the wheelchairs were medically necessary and that he was prevented from presenting evidence of this defense at his criminal trial. Respondent argued at hearing that any decision from the Board concerning discipline of his license should be delayed until the outcome of his appeal. Respondent failed to cite any legal authority for this contention. He further argued that as a condition of his criminal probation, he is not allowed to practice medicine. As a result, there is no reason for the Board to take action against his license at this time.

8. Respondent also argued that his conduct was not substantially related to his qualifications, functions or duties as a physician. He contended that the allegations of the criminal complaint did not involve patient care, nor did the allegations relate to his qualifications as a physician.

Discussion

9. Respondent was convicted of eight federal felonies for conspiring to commit and committing health care fraud, and engaging in a kickback scheme. At the hearing, respondent attempted to impeach his convictions. (*Arneson v. Fox* (1980) 28 Cal.3d 440, 449 [a conviction stands as conclusive evidence of guilt for the offense charged].) By being found guilty after a jury trial on eight felony counts, respondent stands convicted of every element of the crimes for which he was convicted. Respondent's felony convictions are substantially related to the qualifications, functions or duties of a physician. Contrary to respondent's argument, his convictions demonstrate to a substantial degree that he is unfit to practice medicine in a manner consistent with the public health, safety or welfare. His convictions establish that he engaged in dishonest and unprofessional conduct when he used his position as a physician to gain access to patients for the purpose of engaging in an illegal kickback scheme and defrauding the government.

10. Respondent did not testify at hearing. The transcripts of the criminal trial and briefs set forth respondent's arguments that the prescriptions he wrote for wheelchairs were medically necessary. However, a jury rejected these arguments and convicted respondent on all charges. Furthermore, the Board is not required to wait until respondent has exhausted all his appeal options to discipline his license. The law allows the Board to discipline a licensee based upon a criminal conviction.

11. California Code of Regulations, title 16, section 1360.1 sets forth the Board's rehabilitation criteria when considering suspension or revocation of a license. Respondent offered no evidence of rehabilitation in this case. It has been judicially recognized that rehabilitation requires an acknowledgment of wrongdoing. (See, *Seide v. Committee of Bar*

Examiners of the State Bar of California (1989) 49 Cal.3d 933, 940 ["Fully acknowledging the wrongfulness of his actions is an essential step towards rehabilitation."] Thus, respondent has not taken even the first step towards rehabilitation. He failed to acknowledge any wrongdoing regarding his serious and egregious conduct.

12. Considering all of the evidence, it would be contrary to the public interest to allow respondent to retain his license, even on a probationary basis. The public health, safety, welfare and interest cannot be adequately protected if respondent is permitted to retain his licensure.

LEGAL CONCLUSIONS

1. Business and Professions Code section 2220.5 authorizes the Board to commence disciplinary actions against the holder of a license for violations of the Medical Practices Act. Furthermore, pursuant to Business and Professions Code section 2227, a licensee who has been "found guilty" of violation of the Medical Practices Act, may have his certificate disciplined by the Board.

2. In this action to discipline respondent's license, complainant bears the burden of proof on the charges alleged in the Accusation; the standard of proof is clear and convincing evidence to a reasonable certainty. (*Eitinger v. Board of Medical Quality Assurance* (1982) 135 Cal.App.3d 853, 855-856.) If complainant meets its burden, rehabilitation is akin to an affirmative defense; consequently, the burden of proof of establishing rehabilitation is on respondent. (*Whetstone v. Board of Dental Examiners* (1927) 87 Cal.App. 156, 164.)

3. Business and Professions Code sections 490 and 2236, allows the Board to take discipline against a licensee who has been convicted of a crime. Business and Professions Code section 2236 provides in pertinent part:

(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this chapter. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.

[§] ... [§]

(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to be a conviction within the meaning of this section and Section 2236.1. The record of conviction shall be conclusive evidence of the fact that the conviction occurred.

4. California Code of Regulations, title 16, section 1360 provides:

For the purposes of denial, suspension or revocation of a license, certificate or permit pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be considered to be substantially related to the qualifications, functions or duties of a person holding a license, certificate or permit under the Medical Practice Act if to a substantial degree it evidences present or potential unfitness of a person holding a license, certificate or permit to perform the functions authorized by the license, certificate or permit in a manner consistent with the public health, safety or welfare. Such crimes or acts shall include but not be limited to the following: Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate any provision of the Medical Practice Act.

5. Cause exists for disciplinary action under Business and Professions Code sections 490 and 2236, by reason of the matters set forth in Findings 4 through 6. Respondent was convicted of eight federal felonies for conspiring to commit and committing health care fraud, and engaging in a kickback scheme. He committed crimes substantially related to the practice of medicine and his role as a physician. (See *Windham v. Board of Medical Quality Assurance* (1980) 104 Cal.App.3d 461, 470.) In doing so, he violated the Medical Practice Act.

6. Business and Professions Code section 2234, provides in pertinent part:

The Division of Medical Quality shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to the following:

[¶] ... [¶]

(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.

7. Cause exists for disciplinary action under Business and Professions Code sections 2234, and 2234, subdivision (e) by reason of the matters set forth in Findings 4 through 6. Respondent engaged in a scheme to defraud Medicare. His felony convictions establish that he engaged in dishonest and unprofessional conduct substantially related to the qualifications, functions, and duties of a physician and surgeon.

Conclusion

8. The matters set forth in Findings 7 and 11 were considered in making the following Order. It would be contrary to the public health, safety or welfare to allow respondent to continue to practice as a physician, even on a probationary basis. His physician's and surgeon's certificate must be revoked.

ORDER

Physician's and Surgeon's Certificate No. A 100580 issued to respondent Sri Jayantha Wijegoonaratna, M.D., is REVOKED.

Dated: November 6, 2015

DocuSigned by:
Marcie Larson
F72F48B5838541C...

MARCIE LARSON
Administrative Law Judge
Office of Administrative Hearings

1 KAMALA D. HARRIS
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Supervising Deputy Attorney General
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Deputy Attorney General
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6 Sacramento, CA 94244-2550
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7 Facsimile: (916) 327-2247
Attorneys for Complainant

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO ~~OCTOBER 26, 2014~~
BY: J. FELICIA ANALYST

9 BEFORE THE
10 MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
11 STATE OF CALIFORNIA

12 In the Matter of the Accusation Against:

13 **SRI WIJEGOONARATNA, M.D.**
820 S. Cottontail Lane
14 Anaheim Hills, CA 92808

15 Physician's and Surgeon's Certificate No.
A 100580

16 Respondent.

Case No. 11-2012-227140

ACCUSATION

17 Complainant alleges:

18 **PARTIES**

19 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
20 capacity as the Executive Director of the Medical Board of California, Department of Consumer
21 Affairs.

22 2. On or about June 27, 2007, the Medical Board of California issued Physician's and
23 Surgeon's Certificate Number A 100580 to Sri Jayantha Wijegoonaratna, M.D. (Respondent).
24 The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
25 charges brought herein and will expire on November 30, 2016, unless renewed.

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1 JURISDICTION

2 3. This Accusation is brought before the Medical Board of California (Board),¹
3 Department of Consumer Affairs, under the authority of the following laws. All section
4 references are to the Business and Professions Code unless otherwise indicated.

5 4. Section 2227 of the Code provides that a licensee who is found guilty under the
6 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
7 one year, placed on probation and required to pay the costs of probation monitoring, or such other
8 action taken in relation to discipline as the Board deems proper.

9 5. Section 2234 of the Code, states:

10 "The board shall take action against any licensee who is charged with unprofessional
11 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not
12 limited to, the following:

13 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
14 violation of, or conspiring to violate any provision of this chapter.

15 "(b) Gross negligence.

16 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
17 omissions. An initial negligent act or omission followed by a separate and distinct departure from
18 the applicable standard of care shall constitute repeated negligent acts.

19 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate
20 for that negligent diagnosis of the patient shall constitute a single negligent act.

21 "(2) When the standard of care requires a change in the diagnosis, act, or omission that
22 constitutes the negligent act described in paragraph (1), including, but not limited to, a
23 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the
24 applicable standard of care, each departure constitutes a separate and distinct breach of the
25 standard of care.

26 ¹ California Business and Professions Code section 2002, as amended and effective January 1, 2008,
27 provides that, unless otherwise expressly provided, the term "[B]oard" as used in the Medical Practice Act refers to
28 the Medical Board of California. References to the "Division of Medical Quality" and "Division of Licensing" set
forth in the Medical Practice Act are also referable to the Medical Board of California.

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"(d) Incompetence.

"(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.

"(f) Any action or conduct which would have warranted the denial of a certificate.

"(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.

"(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview scheduled by the mutual agreement of the certificate holder and the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board."

6. Section 2236 of the Code states:

"(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.

"(b) The district attorney, city attorney, or other prosecuting agency shall notify the Division of Medical Quality of the pendency of an action against a licensee charging a felony or misdemeanor immediately upon obtaining information that the defendant is a licensee. The notice shall identify the licensee and describe the crimes charged and the facts alleged. The prosecuting agency shall also notify the clerk of the court in which the action is pending that the defendant is a licensee, and the clerk shall record prominently in the file that the defendant holds a license as a physician and surgeon.

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1 “(c) The clerk of the court in which a licensee is convicted of a crime shall, within 48 hours
2 after the conviction, transmit a certified copy of the record of conviction to the board. The
3 division may inquire into the circumstances surrounding the commission of a crime in order to fix
4 the degree of discipline or to determine if the conviction is of an offense substantially related to
5 the qualifications, functions, or duties of a physician and surgeon.

6 “(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to
7 be a conviction within the meaning of this section and Section 2236.1. The record of conviction
8 shall be conclusive evidence of the fact that the conviction occurred.”

9 7. Section 490 of the Code states:

10 “(a) In addition to any other action that a board is permitted to take against a licensee, a
11 board may suspend or revoke a license on the ground that the licensee has been convicted of a
12 crime, if the crime is substantially related to the qualifications, functions, or duties of the business
13 or profession for which the license was issued.

14 “(b) Notwithstanding any other provision of law, a board may exercise any authority to
15 discipline a licensee for conviction of a crime that is independent of the authority granted under
16 subdivision (a) only if the crime is substantially related to the qualifications, functions, or duties
17 of the business or profession for which the licensee’s license was issued.

18 “(c) A conviction within the meaning of this section means a plea or verdict of guilty or a
19 conviction following a plea of nolo contendere. Any action that a board is permitted to take
20 following the establishment of a conviction may be taken when the time for appeal has elapsed, or
21 the judgment of conviction has been affirmed on appeal, or when an order granting probation is
22 made suspending the imposition of sentence, irrespective of a subsequent order under the
23 provisions of Section 1203.4 of the Penal Code.

24 “(d) The Legislature hereby finds and declares that the application of this section has been
25 made unclear by the holding in *Petropoulos v. Department of Real Estate* (2006) 142 Cal.App.4th
26 554, and that the holding in that case has placed a significant number of statutes and regulations
27 in question, resulting in potential harm to the consumers of California from licensees who have
28 been convicted of crimes. Therefore, the Legislature finds and declares that this section

1 establishes an independent basis for a board to impose discipline upon a licensee, and that the
2 amendments to this section made by Senate Bill 797 of the 2007-08 Regular Session do not
3 constitute a change to, but rather are declaratory of, existing law."

4 **FIRST CAUSE FOR DISCIPLINE**

5 (Conviction of a Crime Substantially Related)

6 8. Respondent is subject to disciplinary action under Code sections 490 and 2236 in that
7 he has been convicted of a crime substantially related to the qualifications, functions, or duties of
8 a physician and surgeon. The circumstances are as follows:

9 9. On or about September 21, 2012, a multi-count Indictment was filed in the United
10 States District Court of the Central District of California, in Case No. CR12-00905, entitled *The*
11 *United States of America v. Victoria N. Onyeabor, Godwin Onyeabor, Dr. Sri J. Wijegunaratne*
12 *aka "Dr. J," and Heidi Morshita* as a result of Respondent's involvement in a medical supply
13 company defrauding Medicare from 2007 through 2012. A superceding indictment was later
14 filed. The Counts included the following:

15 Count 1: 18 U.S.C. § 1349, Conspiracy to Commit Health Care Fraud.

16 Counts 7 through 12: 18 U.S.C. §§ 1347 and 2, subdivision (b), Health Care Fraud and
17 Causing an Act to be Done.

18 Count 13: 18 U.S.C. §§ 371 and 2, subdivision (b), Conspiracy to Pay and Receive Health
19 care Kickbacks in Violation of 42 U.S.C. §§ 1320a-7b, subdivision (b)(1)(A), and 2, subdivision
20 (A).

21 10. On or about April 24, 2013, in Case Number CR12-00905 referenced above, before
22 the United States District Court for the Central District of California in the Western Division of
23 Los Angeles (Hon. Manuel L. Real), Respondent was found guilty by a jury of his peers on all
24 Counts referenced above. Respondent was subsequently sentenced to twenty-seven months in
25 prison followed by supervised release for three years.

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1 SECOND CAUSE FOR DISCIPLINE

2 (Dishonest or Corrupt Acts)

3 11. Respondent is subject to disciplinary action under Code section 2234, subdivision (e),
4 in that he has committed dishonest or corrupt acts substantially related to the qualifications,
5 functions, or duties of a physician and surgeon. The circumstances are as follows:

6 12. The facts and circumstances alleged in paragraphs 9 and 10 above are incorporated
7 here as if fully set forth.

8 THIRD CAUSE FOR DISCIPLINE

9 (Unprofessional Conduct)

10 13. Respondent is subject to disciplinary action under Code section 2234 in that he has
11 engaged in unprofessional conduct. The circumstances are as follows:

12 14. The facts and circumstances alleged in paragraphs 9 through 12 above are
13 incorporated here as if fully set forth.

14 PRAYER

15 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
16 and that following the hearing, the Medical Board of California issue a decision:

17 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 100580,
18 issued to Sri Jayantha Wijegoonaratna, M.D.;

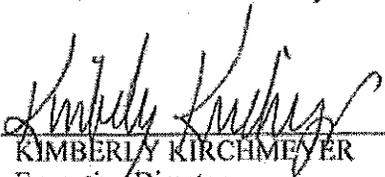
19 2. Revoking, suspending or denying approval of Sri Jayantha Wijegoonaratna, M.D.'s
20 authority to supervise physician assistants, pursuant to section 3527 of the Code;

21 3. Ordering Sri Jayantha Wijegoonaratna, M.D. to pay the Medical Board of California,
22 if placed on probation, the costs of probation monitoring; and

23 4. Taking such other and further action as deemed necessary and proper.

24 October 6, 2014

25 DATED: _____

26 
27 KIMBERLY KIRCHMEYER
28 Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant