

June 3, 2011  
212-335-9400

DISTRICT ATTORNEY VANCE ANNOUNCES INDICTMENT OF WASHINGTON HEIGHTS DOCTOR  
FOR MEDICAID FRAUD

Scam Cost State Taxpayers More Than \$700,000

Manhattan District Attorney Cyrus R. Vance, Jr., today announced the indictment of SURESH HEMRAJANI, 57, for perpetrating a \$700,000 Medicaid fraud out of his Washington Heights office. HEMRAJANI, a specialist in internal medicine, prescribed Human Immunodeficiency Virus (HIV) medications to his patients, though they did not have the virus, and arranged for these patients to bill the cost of the medications to Medicaid. The defendant has been charged with Grand Larceny in the Second Degree, Grand Larceny in the Fourth Degree, Health Care Fraud in the Fifth Degree, and eleven counts of Falsifying Business Records in the First Degree.[1]

“By taking advantage of a program intended to assist New Yorkers who cannot afford to pay for medical care, the defendant victimized not only the neediest members of our community but also all New York taxpayers,” said District Attorney Vance. “I want to thank the New York State Office of the Medicaid Inspector General and the New York City Human Resources Administration for their help in this investigation.”

New York State Medicaid Inspector General James G. Sheehan said: “The charges contained in the indictment against Dr. Hemrajani are serious and involve not only a fraud against the state’s taxpayers, but a risk to the prescription drug distribution system. The joint investigation with District Attorney Vance’s office and the New York City Human Resources Administration that led to this arrest is an example of how law enforcement agencies collaborate to stop fraud and abuse of the Medicaid program, and prevent diversion of prescription medicines. I applaud the diligence and commitment of the investigators and professional staff from the OMIG, the DA’s office, and HRA that led to this arrest. It is a demonstration of the kind of work that our offices conduct on a daily basis.”

New York City Human Resources Administration (HRA) Commissioner Robert Doar said: “HRA is committed to investigating and combating fraud and abuse in the Medicaid program so we can maintain the integrity of this critical program and continue to provide public health insurance to those who are truly eligible. Medicaid Providers who steal from public health insurance or any other program will be investigated and prosecuted to the full extent of the law. I would like to thank the Office of the Medicaid Inspector General and the Office of Manhattan District Attorney for their continuous commitment to pursue the prosecution of those who commit Medicaid fraud.”

According to documents filed in court and statements made on the record in court, throughout 2008, HEMRAJANI wrote prescriptions for HIV medications for numerous individuals without determining whether they actually had HIV. HEMRAJANI prescribed medications for these individuals after their first visit to his office and these individuals billed the cost of the medications to Medicaid. HEMRAJANI also created false records for his purported treatment of the patients, even though in most cases these individuals did not visit his office more than once. The defendant charged Medicaid for the initial patient visits and for the subsequent visits that did not take place. When some of these patients later attempted to obtain prescriptions from a hospital, they were tested and found to be HIV-negative, which prompted an investigation by the Office of the Medicaid Inspector General and the Manhattan District Attorney's Office, and led to today's announcement.

The investigation into this case is ongoing.

Assistant District Attorney David Casanova is handling the prosecution of this case under the supervision of Marcy Chelmow, Chief of the Public Assistance Fraud Unit. District Attorney Vance thanked the New York State Office of the Medicaid Inspector General and HRA Bureau of Fraud Investigation for their assistance in the investigation.

**Defendant Information:**

SURESH HEMRAJANI, D.O.B. 09/15/53

New York, NY

**Charges:**

Grand Larceny in the Second Degree, a class C felony, one count Grand Larceny in the Fourth Degree, a class E felony, one count Falsifying Business Records in the First Degree, a class E felony, eleven counts Health Care Fraud in the Fifth Degree, a class A misdemeanor, one count

A class C felony is punishable by up to 15 years in prison, a class E felony is punishable by up to 4 years in prison, and a class A misdemeanor is punishable by up to one year in jail.

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