

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF HEALTH
HEALTH PROFESSIONAL LICENSING ADMINISTRATION
BOARD OF MEDICINE**

IN RE:

RAMA S. PRAYAGA, M.D.

License No.: MD 21377

Licensee

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CONSENT ORDER

Jurisdiction

This matter comes before the District of Columbia Board of Medicine (the “Board”) pursuant to D.C. Official Code § 3-1201.01 *ff.* (2009), otherwise known as the Health Occupations Revision Act (the “HORA”). The HORA, at D.C. Official Code § 3-1202.03 (2009), authorizes the Board to regulate the practice of Medicine in the District of Columbia.

Background

Licensee is currently licensed to practice medicine in the District of Columbia and has held such license since July 31, 1995. Licensee provides psychiatric medical services at two offices in the District of Columbia – 601 Pennsylvania Avenue NW and 1012 14th Street NW. Licensee was brought to the Board’s attention during the course of an investigation into three other individuals who have all been under the supervision of Licensee during his practice in the District of Columbia. Upon investigation of these individuals, it was brought to light that Licensee had engaged in the following prohibited conduct:

By his own admission, Licensee provided to his licensed physician assistants, very briefly, and unintentionally to one unlicensed physician assistant, T.H., and to at least one physician covering his patients, pre-signed blank prescription slips bearing his DEA number, which licensee indicated he believed was an acceptable practice in the District of Columbia. Licensee further admitted that providing pre-signed blank prescriptions was common practice while Licensee was away from the office. A partial review of Licensee's patient records showed that each prescription reviewed was written in a physician assistant's handwriting, but signed by Licensee. The Licensee stated that he reviewed each prescription dispensed by a physician assistant on a daily basis.

By his own admission, Licensee provided to his licensed physician assistants, and very briefly, and unintentionally to one unlicensed physician assistant, pre-signed psychiatric medical follow up forms. The physician assistant would then conduct patient assessments or medication management sessions without his physical presence, but while available by phone and email contact. The Licensee stated that he reviewed each such medical follow up form on a daily basis.

By his own admission, Licensee permitted his licensed physician assistants, and very briefly and unintentionally one unlicensed physician assistant, to treat patients without his physical presence at the practice location, but while available by phone and by email contact. By his own admission, Licensee would then bill the insurance claim as if he conducted the medication management sessions himself. The Licensee indicated this was a permitted billing practice in some insurance plans and companies to which he billed.

The Licensee stated that for a period of six (6) days, relying on what he believed was a valid physician assistant license verification by a mutual employer of himself and the physician

assistant; and upon the belief that the physician assistant was licensed by the District of Columbia, he employed an unlicensed physician assistant. The Licensee's own verification efforts revealed that the physician assistants' credentials and representations were false. During this verification process, the licensee unintentionally permitted the unlicensed physician assistant to see some patients both with and without supervision, and to issue prescriptions for controlled and uncontrolled substances. As stated previously, the Licensee indicated that these actions were reviewed by him on a daily basis.

In some circumstances, Licensee provided proper supervision to physician assistants by phone and email. By his own admission, Licensee unintentionally permitted one unlicensed individual to access pre-signed, blank prescription scripts bearing his DEA number and Psychiatric Medication Management forms. In addition, during his physical absence at the facility but while being available by phone and email, he expected the unlicensed individual to treat patients. A review of Licensee's patient records showed numerous Psychiatric Medical Assessment forms bearing the signatures of Licensee's physician assistants without a signature or indication that Licensee reviewed the assessment.

The Licensee has not been formally charged with any violation of the D.C. laws or regulations. Instead, the Board of Medicine and Licensee agree to resolve this matter by entering into a public disciplinary consent order as follows:

CONSENT ORDER

Based on the aforementioned, it is hereby,

ORDERED that, within sixty (60) days from the date of signing this consent order, Licensee shall pay a fine in the amount of Four Thousand Dollars (\$4,000.00), which shall be paid by check or money order made payable to "D.C. Treasurer" and shall be submitted to Lisa

Robinson, Health Licensing Specialist, Board of Medicine, 899 North Capitol Street, NE, 2nd Floor, Washington, D.C. 20002; and it is further

ORDERED that, upon the effective date of this Consent Order, Licensee's medical license shall be placed on **probation status for a two-year period**, during which the following conditions and restrictions shall apply to Licensee's practice:

- (a) Licensee shall have an assessment and audit of his practice conducted by a provider or practice monitor who has been approved by the Board. Licensee will be required to submit ten (10) patient charts and records for a quarterly record review to the provider or practice monitor approved by the Board during probation. The practice monitor and the review of charts and records will be paid for by the Licensee.
- (b) Licensee shall be prohibited from, and shall not, supervise or practice with the assistance of any physician's assistant (PA) at any time in the District of Columbia; and
- (c) Licensee shall permit Board-sanctioned investigators to perform a random audit of Licensee's patient and billing records, at the Board's discretion. Licensee shall cause the patient and billing records to be presented to Board-sanctioned investigators in a prompt and timely manner;
- (d) After one (1) year of probation, the Licensee may petition the Board to have his probation terminated. The decision to terminate probation shall be within the sole discretion of the Board. At the end of the two-year period, the Licensee will be able to petition the Board to have his probation terminate,


and the Board will terminate his probation only after it has determined that Licensee has satisfied all of the terms and conditions.

ORDERED that, within one hundred eighty (180) days from the date of signing this consent order, Licensee shall submit to the Board proof of having completed thirty (30) hours of continuing medical education (“CME”) credit in practice ethics. The CME credits shall be earned in courses in which the primary focus of each course must be (a) the ethics of professional practice or (b) appropriate billing. Additionally, at least (15) hours of the CME credits shall be obtained in **in-person, face-to-face** CME courses, as opposed to non-traditional or online courses.

ORDERED that nothing in this Consent Order shall preclude the Board from taking disciplinary action against Licensee’s medical license in the event that Licensee is convicted of insurance fraud, as contemplated by the factual background of this Consent Order; and it is further

ORDERED that, if Licensee fails to satisfactorily fulfill the terms of the order, the Board may then issue a notice to take formal disciplinary action against Licensee’s license.

11.28.12
Date

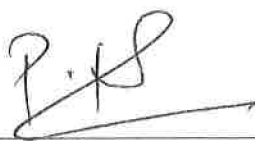

Janis M. Orłowski, M.D., MACP
Chairperson
District of Columbia
Board of Medicine

CONSENT OF LICENSEE

By signing this Consent Order, I agree to accept and abide by its terms. I acknowledge its validity and acknowledge that I have agreed to this Order in lieu of a hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections provided by law. By signing this order, I waive all such rights. I am fully aware that without my consent, no legal action can be taken against me except pursuant to the District of Columbia Administrative Procedures Act D.C. Official Code § 2-501 et. seq. (2001). I also recognize that, by this Consent, I am waiving my right to appeal this Order. I am also waiving my right to appeal any adverse ruling of the Board had this matter gone to a hearing regarding the application. Nothing in this Consent Order shall preclude the Board from taking disciplinary action against Licensee's medical license in the event that Licensee is convicted of insurance fraud, as contemplated by the factual background of this Consent Order. I have had an opportunity to review this document. I choose to sign this order willingly and without reservation and am fully aware of its meaning and effect.

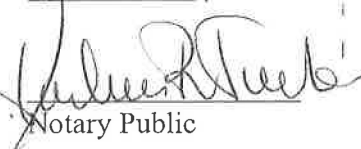
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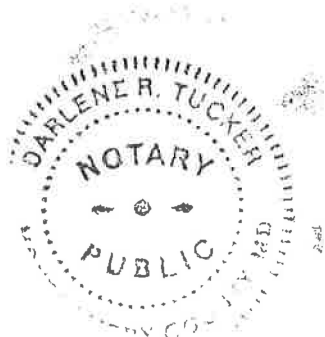
Date



Rama S. Prayaga, M.D., #MD21377

Sworn to and subscribed before me this 26 day of November 2012.


Notary Public



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Commission Expires
2-15-2014