LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

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Department of Investigations Telephone: (504) 568-6820 FAX: (504) 568-5754

In The Matter of

No. 13-I-598

EDOZIE CHUKWUDINMA OKEREKE, D.P.M.:

(Certificate No. DPM.PD196R):

CONSENT ORDER

An investigation conducted by the Louisiana State Board of Medical Examiners (the "Board") has revealed that Edozie C. Okereke, D.P.M. ("Dr. Okereke"), a podiatrist who at all pertinent times has been licensed to practice podiatry, and engaged in the practice of podiatric medicine in and around Shreveport, Louisiana, was charged and plead guilty to the felony crime of Health Care Fraud in the United States District Court for the Western District of Louisiana, in violation of Title 18, United States Code, Section 1347. Underlying the charges the indictment alleged that between 2005 and 2008 Dr. Okereke, among other items, falsely submitted claims for reimbursement to Medicare for services that were either not performed or which falsely represented the level or complexity of the services actually provided. As a result of his plea, on June 10, 2013, Dr. Okereke was sentenced to federal prison for a term of twenty-one (21) months, followed by three (3) years of supervised release and ordered to pay restitution in the amount of \$679,836.64. Finally, Dr. Okereke, further, failed to inform the Board of his indictment, plea or sentencing.

Predicated upon the foregoing information, the Investigating Officer assigned by the Board with respect to this matter has determined that reasonable cause exists for recommending that a formal Administrative Complaint be filed against Dr. Okereke, charging him with violations of the Louisiana Podiatry Practice Act (the "Act"), pursuant to La. Rev. Stat. §37:624A(1), (15), (18), and (19).4

¹Indictment for Health Care Fraud, United States of America vs. Edozie Okereke, U.S. Dist. Ct. WDLA, Crim. Docket No. 5:10-00374, (Dec. 15, 2010).

²See: Judgment In A Criminal Case.

³See: Judgment In A Criminal Case.

⁴ Pursuant to the Louisiana Podiatry Practice Act, La. Rev. Stat. §37:624A, the Board may take action against the license of a podiatrist as the result of: (1) 'Conviction of a crime;' (15) 'Failure by a podiatrist to self-report in writing to the board any personal action which constitutes a violation of this Chapter within thirty days of the occurrence;' (18) 'Making or submitting false, deceptive, or unfounded claims, reports or opinions to any patient, insurance company or indemnity association, company, individual, or governmental authority for the purpose of obtaining anything of economic value;' and (19) 'Unprofessional conduct'.

As evidenced by his subscription hereto, Dr. Okereke acknowledges that the abovecited information would constitute probable cause for the institution of administrative proceedings against him and that proof of such information upon administrative evidentiary hearing would establish grounds under the Act for the suspension or revocation of his license to practice podiatry in the State of Louisiana, or for such other action as the Board might deem appropriate.

Recognizing his right to have an administrative adjudication of any charges that may be filed in this matter, at which time Dr. Okereke would be entitled to be represented by legal counsel, to call witnesses and to present evidence on his own behalf in defense or in mitigation of the charges made and to a decision thereon by the Board based upon written findings of fact and conclusions of law, pursuant to La. Rev. Stat. §§49:951, et seq., Dr. Okereke, nonetheless, hereby waives his right to formal adjudication and pursuant to La. Rev. Stat. § 49:955(D) consents to entry of the Order set forth hereinafter. Dr. Okereke also acknowledges that he hereby waives any right to which he may be entitled pursuant to the Louisiana Administrative Procedure Act, La. Rev. Stat. §§49:951, et seq., or which he otherwise may be afforded by any law to contest his agreement to or the force and effect of the Board's investigation or this document in any court or other forum. By his subscription hereto, Dr. Okereke also hereby authorizes the Investigating Officer designated by the Board with respect hereto to present this Consent Order to the Board for its consideration and to fully disclose to and discuss with the Board the nature and results of the investigation, waiving any objection to such disclosures under La. Rev. Dr. Okereke expressly acknowledges that the disclosure of such information to the Board by the Investigating Officer shall be without prejudice to the Investigating Officer's authority to proceed with the filing and adjudication of an administrative complaint against him, or to the Board's capacity to adjudicate such charges should the Board decline to approve this Consent Order.

Accordingly, in consideration of the foregoing, and pursuant to the authority vested in the Board by La. Rev. Stat. §37:624 and La. Rev. Stat. §49:955(D):

- IT IS ORDERED that the license of Edozie C. Okereke, D.P.M., to engage in the practice of podiatry in the State of Louisiana, as evidenced by Certificate No. DPM.PD196R is hereby INDEFINITELY SUSPENDED.
- IT IS FURTHER ORDERED that the reinstatement of Dr. Okereke's license to practice podiatry in the State of Louisiana shall be subject to his acceptance of and strict compliance with the following terms, conditions and restrictions:
 - (A) Suspension of Practice/Reinstatement. Dr. Okereke shall not practice podiatry in any form in the State of Louisiana until and unless the Board issues

and serves on him a written order reinstating his license. As express conditions to the consideration of a request for reinstatement, Dr. Okereke shall have: (1) been released from any period of incarceration and shall have successfully completed any period of supervised release that may be imposed by virtue of the above mentioned criminal conviction or have waited for the passage of three (3) years from the effective date of this Order, whichever is the longer; (2) demonstrated clinical competency through an assessment at a program or facility approved by the Board and have successfuly completed any recommended remediation or training; (3) been cleared physically and mentally to resume practice by one or more physicians or institutions approved by the Board; and (4) scheduled and met with the Investigating Officer to discuss his then-current status and plans.

- (B) Medical Ethics. Dr. Okereke shall provide written confirmation that he has taken and successfully completed a course on medical ethics that is acceptable to and approved by the Board.
- (C) Appearance Before the Board. Dr. Okereke shall contact and arrange for a personal appearance before the Board or its designee at its next meeting following any request for reinstatement of his license to permit the Board to consider his compliance with each of the terms, conditions and restrictions of this Order and to advise the Board of any intentions with respect to his resumption of the practice of podiatry.
- IT IS FURTHER ORDERED that upon Dr. Okereke's compliance with and satisfaction of the terms and conditions hereinabove set forth, his license to practice podiatry in the state of Louisiana shall be reinstated by the Board ON PROBATION, for a period of three (3) years from the date of reinstatement (the "probationary period"); provided, however, that such reinstatement of licensure and his continuing exercise of rights and privileges thereunder shall be conditioned upon his acceptance of and strict compliance with the following terms, conditions and restrictions:
 - (1) Board Approval of Practice Setting. Dr. Okereke shall not, throughout the probationary period or thereafter until further written order of the Board, engage in the practice of podiatry in this state other than in a practice setting approved in advance by the Board in writing.
 - (2) Monitoring of Practice. Dr. Okereke's practice, including his billing, shall be supervised by another podiatrist approved by the Board, who shall monitor his practice to determine whether Dr. Okereke is practicing consistently with accepted standards. Dr. Okereke shall authorize and cause such podiatrist,

not less than quarterly during the first year of the probationary period and semiannually thereafter, to submit to the Board written reports as to his or her determinations concerning Dr. Okereke's professional and medical competence as derived from such monitoring.

- (3) Continuing Education; Professionalism. Within the first year of the probationary period, Dr. Okereke shall provide written confirmation that he has attended and successfully completed one or more courses of study in the areas of professionalism. All courses required by this provision shall be comprehensive in nature (greater than 20 credit hours) and shall be acceptable to and preapproved in writing by the Board or its designee.
- (4) Continuing Medical Education. Dr. Okereke shall not obtain less than fifty (50) credit hours per year for each year of the probationary period through attendance at and participation in continuing medical education programs ("CME") accredited by the American Podiatric Medical Association. On or before the anniversary date of each year for the three (3) years following the reinstatement of his license, Dr. Okereke shall cause to be submitted to the Board written certification of the CME programs and credits completed by him during the preceding 12 months.
- (5) Additional Probationary Terms. In addition to such other terms and conditions as are placed upon any reinstated license to practice podiatry by this Order, Dr. Okereke hereby consents to, agrees with and acquiesces in the imposition of any additional terms, conditions or restrictions, as well as the length and nature thereof including, but not limited to, the continued suspension of his license, and restrictions as to the nature, scope, location and supervision of his practice, which the Board in its sole discretion may deem necessary or appropriate.
- (6) Effect of Violation/Sanction/Resolution. Dr. Okereke acknowledges that his receipt of written notification from the Board that it has received apparently reliable information which indicates his failure to comply with the requirements set forth by this Order in any respect shall, without need for formal hearing or providing him with any right to which he may otherwise be entitled pursuant to the Louisiana Administrative Procedure Act, La. Rev. Stat. §§49:951, et seq., or which otherwise may be afforded to him by law, constitute his irrevocable consent to the immediate suspension of his license to practice podiatry in this state pending the issuance of a decision by the Board following administrative adjudication of such charges.

- (7) Probation Monitoring Fee. Dr. Okereke shall pay the Board a probation monitoring fee of Three Hundred (\$300.00) Dollars for each year that his license remains on probation. Payment of the initial fee shall be due not later than sixty (60) days from the reinstatement of his license. All subsequent annual payments shall be due on or before the anniversary date of the initial payment.
- (8) Absence from State/Practice/Effect on Probation. Should Dr. Okereke at any time during the probationary period be absent from the state of Louisiana, relocate to and/or take up residency in another state or country, or discontinue practicing podiatry for a period of thirty (30) days or more, he shall so advise the Board in writing. In such instance, the probationary period and all terms, conditions and restrictions thereof, shall be deemed interrupted and extended for no less than the period of time during which he was not engaged in practice or was absent from the state of Louisiana; however, all terms and conditions may continue to be in effect as ordered or may be modified or altered as needed at the Board's discretion.
- (9) Cooperation with Board's Probation and Compliance Officer. Dr. Okereke shall immediately notify the Board's Probation and Compliance Officer of any change in his current home and professional addresses and telephone numbers and he shall direct all matters required pursuant to this Consent Order to the attention of the Probation and Compliance Officer, with whom he shall cooperate on all matters and inquiries pertaining to his compliance with the terms, conditions and restrictions of this Consent Order.
- (10) Notification. Dr. Okereke shall provide a complete copy of this Order to each hospital, clinic, facility or other employer or prospective employer at which or for whom he provides services as a podiatrist in this state.
- (11) Certification of Compliance with Probationary Terms/Personal Appearance. At least sixty (60) days prior to the conclusion of the probationary period Dr. Okereke shall provide the Board with an affidavit certifying that he has complied with each of the terms, conditions and restrictions of probation impose by this order and he shall contact the Board and arrange for a personal appearance before the Board or its designee at its meeting preceding the expiration of his probationary period. The probationary period and all terms, conditions and restrictions shall be, and shall be deemed to be, extended and continued in full force and effect pending Dr. Okereke's compliance with the requirements of this provision.

IT IS FURTHER ORDERED that any violation or failure of strict compliance with any of the terms, conditions or restrictions set forth by this Order by Dr. Okereke shall be

deemed adequate and sufficient cause, upon proof of such violation or failure, for the revocation and cancellation of Dr. Okereke's license to practice podiatry in the State of Louisiana, or for such other action as the Board may deem appropriate, as if such violations were enumerated among the causes provided in La. Rev. Stat. §37:624.

IT IS FURTHER ORDERED that this Consent Order shall be, and shall be deemed to be, a PUBLIC RECORD.

Signed in New Orleans, Louisiana, and effective on this 15 day of 2013.

LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

Bv:

Melvin C. Bourgeois, M.D.

President

Acknowledge and Consent Follows on Next Page

STATE OF LOUISIANA PARISH OF _______

ACKNOWLEDGMENT AND CONSENT
I, EDOZIE C. OKEREKE, D.P.M., hereby acknowledge, approve, accept and consent to entry of the above and foregoing Order, this day of, 2013.
Edozie C. Okereke, D.P.M.
Signature Signature Signature Figure F Luc
Typed Name Typed Name 3334 Journe De
Address SIMPLES LA 71105 City, State, Zip Code Address City, State, Zip Code Address City, State, Zip Code
Sworn to and subscribed before me at SHOEVEROR, Louisiana, this day of JULY , 2013, in the presence of the two stated witnesses. Notary Public PUBLIC ADDO PARTITION ADDO PARTITION Name/Notary Number