

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA**

Case No. 07-20633-CR-60LD
18 U.S.C. § 1349
18 U.S.C. § 287

UNITED STATES OF AMERICA,

vs.

RITA CAMPOS RAMIREZ,

Defendant.

SUPERSEDING
STATEMENT OF THE OFFENSE

1. From in or about October 2002 through April 2006, **RITA CAMPOS RAMIREZ** (“**CAMPOS**”), formerly known as Rita Garcia, was the owner of R and I Medical Billing, Inc. (“**R&I**”), and was a medical biller who specialized in submitting bills to the Medicare program on behalf of health clinics that purportedly would provide medical services to Medicare eligible beneficiaries.

2. R&I was located at 8300 SW 8th Street, Suite 303, Miami, Florida.

3. From in or about October 2002 through April 2006, **CAMPOS** submitted bills on behalf of health clinics under her specialized Medicare sender number, A 7833.

4. From in or about October 2002 through April 2006, **CAMPOS** submitted approximately \$170 million in fraudulent medical bills to the United States Department of Health and Human Services (“**HHS**”), through HHS’s Medicare’s contractor First Coast Service Options, Inc., on behalf of approximately seventy-five health clinics that purported to specialize in treating patients with Human Immunodeficiency Virus (“**HIV**”). Of the \$170 million in

fraudulent bills submitted to HHS through **CAMPOS**, approximately \$105 million was actually paid by HHS.

5. From in or about October 2002 through April 2006, HIV clinics provided bills to **CAMPOS** indicating that patients were being injected with excessive amounts of HIV medications. Soon after **CAMPOS** began submitting bills to HHS, through First Coast, she learned that the bills she was receiving from the HIV clinics and submitting to HHS contained false and fraudulent information. **CAMPOS** continued to submit bills to HHS, knowing at the time she submitted the medical bills to HHS that they contained false and fraudulent information about HIV medications being provided by the HIV clinics to their clients.

6. **CAMPOS**, a registered biller for the Medicare system, used a special skill that facilitated the submission of fraudulent bills to HHS.


7. From in or about October 2002 through April 2006, **CAMPOS** was compensated by receiving a portion of the payments that her HIV clinic clients received from HHS. In total, during that period, **CAMPOS** received approximately \$5 million in fees from her HIV clinic clients.

8. On or about July 2, 2003, **CAMPOS** caused the submission of a claim for 300 units of Rho(D) immune globulin to Medicare, on behalf of Medicare beneficiary C.W., knowing at the time she submitted the claim that it contained false and fraudulent information about HIV medication being provided to C.W.

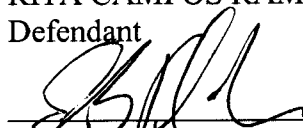
The preceding statement is a summary, made for the purpose of providing the Court with

a factual basis for my guilty plea to the charges against me. It does not include all of the facts known to me concerning criminal activity in which I and others engaged. I make this statement knowingly and voluntarily and because I am in fact guilty of the crimes charged.

DATE: 8-28-07



RITA CAMPOS RAMIREZ
Defendant



ERIC B. FELDMAN, ESQ.
Attorney for Defendant