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**For immediate release**

## **DHHR's Medicaid Fraud Control investigators uncover physician fraud scheme**

A 55-year-old Martinsburg physician, Dr. Danine A. Rydland, was convicted on 34 counts of health care fraud in Martinsburg, WV. Rydland fraudulently billed Medicaid, Medicare, Unicare (a Medicaid HMO) and the Public Employee's Insurance Agency from June 2004 to Sept. 2008. She was convicted on 34 counts of health care fraud in federal court.

The evidence that investigators uncovered showed that Rydland fraudulently billed Medicaid, Medicare, Unicare and PEIA and caused them to pay for services that she did not provide. Losses to West Virginia Medicaid and Unicare totaled about \$98,000. The total loss for all agencies involved was approximately \$148,469.

The case was investigated by the West Virginia Department of Health and Human Resources, Office of Inspector General, Medicaid Fraud Control Unit and the U.S. Department of Health and Human Services, Office of Inspector General.

DHHR Deputy Secretary Molly McIntyre Jordan said, “This is one example of the important work of West Virginia’s Medicaid Fraud Control Unit.” “Our investigators are diligent and uncompromising when it comes to uncovering fraud within our state’s health care system,” Jordan added.

The West Virginia Medicaid Fraud Control Unit conducts investigations into Medicaid provider fraud as well as the abuse, neglect, and financial exploitation of facility residents. In Fiscal Year 2010 the Medicaid Fraud Control Unit recovered \$12 million dollars for the State’s Medicaid program. So far in FY11, about \$14 million has been recovered.