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9	BEFORE THE ACUPUNCTURE BOARD
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA
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12	In the Matter of the Accusation Against: Case No. 1A-2016-178
13	ASHLEY RO AKA HEE RO KYUNG
14	1101 S. Winchester Blvd Suite D-138  ACCUSATION
15	San Jose, CA 95128
16	Acupuncture License No. AC 15197
17	Respondent.
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19	<u>PARTIES</u>
20	1. Benjamin Bodea (Complainant) brings this Accusation solely in his official capacity
21	as the Executive Officer of the Acupuncture Board, Department of Consumer Affairs.
22	2. On or about April 2, 2013, the Acupuncture Board issued Acupuncture License
23	Number AC 15197 to Ashley Ro AKA Hee Ro Kyung (Respondent). The Acupuncture License
24	was in full force and effect at all times relevant to the charges brought herein and will expire on
25	October 31, 2020, unless renewed.
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with Section 14200), of Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to determine whether or not the license or certificate shall be suspended, revoked, or some other disposition shall be considered, including, but not limited to, revocation with the opportunity to petition for reinstatement, suspension, or other limitations on the license or certificate as the board deems appropriate.

- (2) It shall constitute cause for automatic suspension and for revocation of a license or certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a licensee or certificate holder has more than one conviction of any felony arising out of separate prosecutions involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to revoke the license or certificate and an order of revocation shall be issued unless the board finds mitigating circumstances to order some other disposition.
- (3) It is the intent of the Legislature that paragraph (2) apply to a licensee or certificate holder who has one or more convictions prior to January 1, 2004, as provided in this subdivision.
- (4) Nothing in this subdivision shall preclude a board from suspending or revoking a license or certificate pursuant to any other provision of law.
- (5) Board, as used in this subdivision, means the Dental Board of California, the Medical Board of California, the California Board of Podiatric Medicine, the Board of Psychology, the State Board of Optometry, the California State Board of Pharmacy, the Osteopathic Medical Board of California, and the State Board of Chiropractic Examiners.
- (6) More than one conviction, as used in this subdivision, means that the licensee or certificate holder has one or more convictions prior to January 1, 2004, and at least one conviction on or after that date, or the licensee or certificate holder has two or more convictions on or after January 1, 2004. However, a licensee or certificate holder who has one or more convictions prior to January 1, 2004, but who has no convictions and is currently licensed or holds a certificate after that date, does not have more than one conviction for the purposes of this subdivision.
- (d) As used in this section, health care professional means any person licensed or certified pursuant to this division, or licensed pursuant to the Osteopathic Initiative Act, or the Chiropractic Initiative Act.

## **COST RECOVERY**

- 9. Section 4959 of the Code states:
- (a) The board may request the administrative law judge, under his or her proposed decision in resolution of a disciplinary proceeding before the board, to direct any licensee found guilty of unprofessional conduct to pay to the board a sum not to exceed actual and reasonable costs of the investigation and prosecution of the case.

for payment of a health care benefit]. The Court sentenced Respondent to two years' probation, 60 days in county jail, and pay restitution.

## SECOND CAUSE FOR DISCIPLINE

(Unprofessional Conduct; Fraud/Dishonesty; and or Submitting False Insurance Claims Related to the Care Provided to Patient A

- 14. Respondent is subject to disciplinary action under Code sections 4955 [unprofessional conduct]; and/or 4955(i) [conduct that would have been grounds for denial of a license]; and/or 4955.1 [fraud/dishonesty]; and/or 810 [insurance fraud]. The circumstances are as follows:
- 15. Respondent is the owner of The One Family Wellness Center and the only acupuncture provider. Respondent employs a receptionist and two massage therapists. Along with acupuncture treatment, Respondent also provides electric acupuncture, massage, cupping, herbal treatments, Transcutaneous Electrical Stimulation (TENS) therapy, and heat treatments (referred to as "infrared").
- 16. Between June 20, 2014 through September 10, 2014, Respondent provided acupuncture treatment to Patient A. Patient A went to Respondent for complaints of infertility, allergy/sinus, acne, and headache problems. According to Patient A, Respondent only provided acupuncture treatment lasting between 20 to 30 minutes and never included massage or exercises of any kind. Patient A stopped seeing Respondent after the September 10, 2014 appointment. Patient A also stated the acupuncture treatment Respondent provided never included electrical acupuncture and she never saw a massage therapist.
- 17. According to the "Acupuncture Evaluation" form, Patient A was seeking treatment for infertility, skin rash/acne, tendinitis in her right wrist, neck stiffness, and left knee "numbness." Respondent diagnosed the patient with cervical pain and "liv yin xu, kid yang xu, & kid yin xu" [liver and kidney deficiencies]. In the intervention portion of the record, Respondent placed a checkmark next to the following treatment methods: Acupuncture, Electric Acupuncture, Infrared, Therapeutic Exercises, and manual body parts. Respondent also listed several acupuncture treatment points in the body where treatment would be applied. Respondent listed the frequency of treatment would be two times per week for twelve weeks.

Respondent uses a half page "Acupuncture Daily Note" form to document the care 18. provided to Patient A. This includes information on the diagnosis and pain scale for the specific condition(s) treated. For Patient A's June 20, 2014 form, infertility is listed as "Dx1" [diagnosis] and "neck stiff/skin rash" is listed as "Dx2." The form also includes a subjective check list portion with descriptive words. For example, Respondent checked "stiffness" and "occasional" on the June 20, 2014 note. The next portion of the form includes objective information, such as the length of the various treatment provided for the specific diagnosis. The form lists five treatment modalities with a check mark next to the modality to indicate whether it was provided to the patient. On the June 20, 2014 note, Respondent wrote that she provided 30 minutes of acupuncture, 30 minutes of infrared, 10 minutes of therapeutic exercises (including strengthening), and 10 minutes of manual therapy. The time and treatment amounts are listed for both Dx1 and Dx2. The "Acupuncture Daily Note" also includes an assessment portion of the note where Respondent can check whether the condition is improved or not. For the June 20, 2014 note, Respondent placed a checkmark next to the term "chronic." The final portion of the form contains information related to the treatment plan. Respondent can place a check mark next to "decrease pain," "increase ROM [range of motion]/strength," or "improve activities of daily living" for both the diagnosis listed at the top of the form. Respondent checked "decrease pain" for Dx2 on Patient A's June 20, 2014 form. There is a line for Respondent to sign next to "Tx [treatment] by."

19. Respondent completed these forms for Patient A's appointments on June 20, 22, 26, 27, July 2, 5, 8, 10, 12, 16, 18, 23, 25, 28, 30, August 5, 8, 9, 12, 14, 20, 22, 25, 29, September 3, 5, 10, and 12, 2015. All of the forms are identical with one exception after the first appointment on June 20, 2014, under the assessment portion Respondent also placed a check mark next to "improving as expected."

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<sup>&</sup>lt;sup>1</sup> Patient A claims she did not receive any treatment from Respondent on September 12, 2015.

- 20. None of the "Acupuncture Daily Notes" identifies what locations Respondent needled, what types of exercises were provided for "strengthening," or what manual therapy Respondent provided.
- 21. Respondent billed Patient A's insurance for services using five different billing codes: 97813 (Acupuncture, one or more needles, with electrical stimulation, 15 minutes of one-on-one contact with patient); 97814 (Each additional 15 minutes of one-on-one contact with patient with reinsertion of needles); 97026 (infrared); 97110 (physical therapy billing code for therapeutic exercises); and 97140 (physical therapy billing code for manual therapy).<sup>2</sup>
- 22. For all 28 appointments, Respondent billed Patient A's insurance using codes 97813, 97814, and 97026. For all but two appointments, Respondent also billed Patient A's insurance using code 97110. For ten appointments, Respondent also billed Patient A's insurance code 97140. Respondent listed Patient A's diagnosis code as lumbago<sup>3</sup> on all of the insurance claim forms even though she was not complaining of lumbago or any lower back pain.
- 23. Respondent admitted to investigators that she uses the CPT billing codes 97026 for "therapeutic exercises" or 97140 "manual therapy" to bill for the treatments provided by the massage therapist, "which is working on muscles and stretching" or providing "sports massage." Respondent also stated that she does not keep any treatment notes or "SOAP notes" for her patients but simply knows what codes to bill insurance from her own memory.<sup>4</sup> Respondent told investigators that she performs the "same treatment" on all of her patients but just targets different areas for each patient based on their specific complaints.
- 24. Respondent's insurance billings for Patient A are not supported by the medical record. Key elements for each billing code are missing. For example, Respondent billed for physical therapy therapeutic exercises and manual therapy but never documented in Patient A's records the exercises performed, the type of manual therapy applied, the length of exercises or manual therapy, and the parts of the body where the therapy was applied. Respondent also billed

<sup>&</sup>lt;sup>2</sup> Respondent billed Patient A's insurance for a new patient evaluation using CPT code 99203 for treatment provided June 20, 2014.

<sup>&</sup>lt;sup>3</sup> Lumbago is pain in the muscles and joints of the lower back.

<sup>&</sup>lt;sup>4</sup> This statement is in direct conflict with the "Acupuncture Daily Notes" form Respondent produced for Patient A.