

SETTLEMENT AGREEMENT AND MUTUAL RELEASE

THIS SETTLEMENT AGREEMENT AND MUTUAL RELEASE ("Settlement Agreement") is entered into this 29th day of January, 2018 ("Effective Date") by and between BEATRICE ONYEADOR MD ("Dr. Onyeador") and STATE OF NEW JERSEY, OFFICE OF THE STATE COMPTROLLER, MEDICAID FRAUD DIVISION ("MFD"). Dr. Onyeador and MFD are hereinafter collectively referred to as the "Parties" and each individually as a "Party."

WHEREAS, MFD investigated Dr. Onyeador and has determined that between January 1, 2011, and January 4, 2016, Dr. Onyeador submitted for reimbursement claims that were not supported by required clinical documentation, in violation of N.J.S.A. 30:4D-7, N.J.A.C. 10:49-9.8, N.J.A.C. 10:54-9.1 ("the Covered Conduct"), resulting in Dr. Onyeador receiving overpayments from the Medicaid Program; and

WHEREAS, Dr. Onyeador has asserted that all services for which Dr. Onyeador submitted claims to be paid by Medicaid program funds were performed and properly supported by documentation; and

WHEREAS, the parties desire to amicably resolve all disputes between them giving rise to the Covered Conduct and have reached a mutually acceptable resolution of the controversies that exist between them;

NOW THEREFORE, in consideration of the mutual promises contained herein, as well as for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree to settle their dispute on the following terms:

(1) Dr. Onyeador agrees to pay restitution to the Medicaid program in the sum of Fifty Thousand Dollars (\$50,000) in the following manner: the first payment of \$8,335 will be made no later than February 28, 2018, followed by equal payments of \$8,333, on or before the

28th of the next five months thereafter. Dr. Onyeador will make a total of six (6) monthly payments totaling \$50,000, to be paid in full no later than July 28, 2018.

(2) Payment to MFD shall be by certified check, bank check, or attorney trust check made payable to “Treasurer, State of New Jersey,” and shall be mailed or delivered as follows:

Attention: Processing Bureau
Treasurer, State of New Jersey
Division of Revenue
200 Woolverton Street, Building 20
Lockbox 656
Trenton, New Jersey 08646

Dr. Onyeador will include “BEATRICE ONYEADOR– OSC-MFD” in the memo line so that it is properly credited.

(3) If the payment arrangement as provided for in this Settlement Agreement is more than ten (10) days late, Dr. Onyeador will be in default of this Settlement Agreement and the outstanding and unpaid balance, plus interest, will immediately become due and collected through any means available to MFD as provided by law.

(4) The parties agree that this Settlement Agreement is intended to be a final resolution of all issues arising out of the Covered Conduct, referenced above, and is intended by each party to release the other party and its representatives from liability arising out of the Covered Conduct, unless MFD is mandated to act by federal or State law; or mandated by order or judgment of a court or administrative agency (other than MFD).

(5) Nothing in this Settlement Agreement waives the rights of any other State or federal agency, including, among others, the New Jersey Division of Criminal Justice, from continuing with a pending or beginning a future civil or criminal investigation or other action for

alleged conduct concerning Dr. Onyeador or from taking any action for such conduct. Nothing in this Settlement Agreement waives the rights of MFD to conduct an audit or investigation of prior or future years for the improper submission of any claims or conduct not specifically covered by this agreement, and to take any action civilly or criminally for such conduct. Nothing in this Settlement Agreement waives any defenses that Dr. Onyeador, its officers, directors, successors or assigns may raise with respect to claims of any nature that may be raised by MFD or any other state or federal agency.

(6) Subject to the express terms of this Settlement Agreement as provided for in paragraphs 1-5 above, by the signatures set forth below, the authorization of which is hereby affirmed, Dr. Onyeador and MFD agree to the following release: in consideration of the provision hereof including this release, each party agrees to release the other party and its representatives from liability, obligations and damages arising out of the Covered Conduct, referenced above.

(7) Nothing herein shall constitute an admission, concession or finding of wrongdoing or liability by any party.

(8) This Settlement Agreement shall be construed, enforced and governed by the laws of the State of New Jersey.

(9) This Settlement Agreement may be executed in Counterparts.


(10) This Settlement Agreement is effective upon the last date it is executed by the parties hereto.

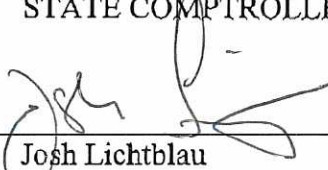
(11) This Settlement Agreement sets forth the entire agreement between and among the parties hereto with respect to the claims described herein and supersedes any other

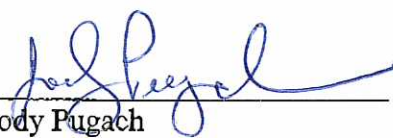
written or oral understandings. This Settlement Agreement does not reflect any other terms or conditions or agreements between or among the parties with respect to any other matter.

IN WITNESS WHEREOF, and intending to be legally bound, the parties hereto on the following page have executed the foregoing Settlement Agreement:

FORM AND CONTENT ACCEPTED AND AGREED TO BY:

DATE: 1/26/18
By: 
Beatrice Onyeador, M.D.
Owner

DATE: 1/29/18
By: 
PHILIP JAMES DEGNAN
STATE COMPTROLLER
Josh Lichtblau
Director
Medicaid Fraud Division

DATE: 1/29/18
By: 
Jody Pugach
Supervising Investigator
Medicaid Fraud Division