

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF ARKANSAS
FAYETTEVILLE DIVISION**

UNITED STATES OF AMERICA
ex. rel. **T.R HINES ; CHARLES
McCUTCHEON, VICTORIA WYCOFF;
And SARA HARTWICK,**

PLAINTIFFS

vs.

Case No. 5:08-cv-5157

**ROBERT TOMLINSON AND
PHYSICIANS SURGERY CENTER**

DEFENDANTS

CONSENT JUDGMENT

IT IS HEREBY ORDERED, ADJUDGED AND DECREED that:

1. This action arises under the False Claims Act, as amended, 31 U.S.C. §§ 3729-33.

This Court has jurisdiction over the subject matter of this action pursuant to 31 U.S.C. § 3730(a) and 28 U.S.C. §§ 1345 and 1367(a).

2. This Court has personal jurisdiction over Defendant Robert Tomlinson because Defendant can be found in, is authorized to transact business in and is transacting business in the Western District of Arkansas, and because Defendant committed acts within this District in violation of 31 U.S.C. § 3729.

3. Defendant Tomlinson has acknowledged and accepted service of the Summons and Complaint. Defendant admits jurisdiction is proper in this Court.

4. Defendant Tomlinson is an orthopedic surgeon. He maintained orthopedic surgery practices in Fayetteville and Rogers, Arkansas. He performed surgeries at, and had an ownership interest in, Physicians Surgery Center. Defendant specialized in knee and shoulder surgeries. His UPIN number is E88853. His NPI number is 1861441198.

5. Beginning in or about July 2002, and continuing until April 2010 (“the relevant time period”) Defendant Tomlinson routinely submitted or caused to be submitted false claims to Medicare, Medicaid and Tricare/Champus (collectively “the Federal Programs”) by submitting CMS-1500 forms that contained Current Procedural Terminology (“CPT”) codes for surgical procedures that were not in fact performed.

Throughout the relevant time period, when performing knee surgeries, Defendant Tomlinson routinely claimed entitlement to reimbursement from the Federal Programs for having performed one or more of the following procedures when in fact he had not performed all of the procedures claimed: partial medial and lateral meniscectomy (CPT codes 29880 and 29881), chondroplasty of the patellofemoral joint (CPT code 29877 or G0289), major synovectomy (CPT code 29876) and abrasion arthroplasty a/k/a micro fracture medial femoral condyle (CPT code 29879).

Throughout the relevant time period, when performing shoulder surgeries, Defendant Tomlinson routinely claimed entitlement to reimbursement from the Federal Programs for having performed one or more of the following procedures when in fact he had not performed all of the procedures claimed: arthroscopic subacromial decompression (CPT code 29826), extensive debridement (CPT code 29823), arthroscopic distal clavectomy (CPT code 29824), arthroscopic rotator cuff repair (CPT code 29827) and arthroscopic slap repair (CPT code 29807).

6. On April 2, 2010, Defendant Tomlinson pled guilty to one count of health care fraud in violation of 18 U.S.C. §§ 1347(2) and 2(b) in connection with the facts alleged in paragraph 22, “Patient 1,” of the Complaint.

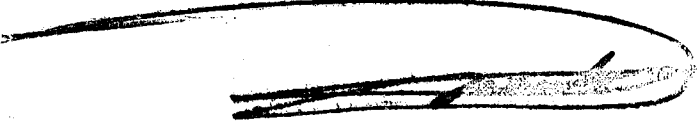
Judgment

Judgment in favor of the United States against Defendant Robert Tomlinson on the United States federal False Claims Act allegations in the amount of \$688,171,95.00 shall be and hereby is ordered and entered.

Attorney fees and expenses to Relators in the amount of \$38,568.83 and costs to Relators' attorneys in the amount of \$9328.05 are also ordered and entered.

IT IS SO ORDERED.

Dated: August 20, 2010




Honorable Jimm Larry Hendren
Chief United States District Judge

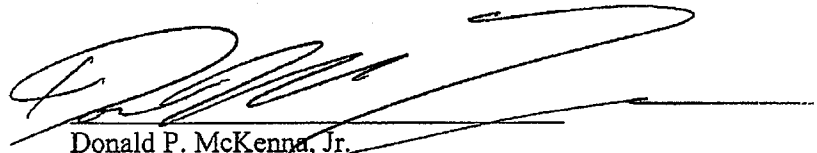
Approved by:



Steven N. Snyder
Assistant U.S. Attorney



William B. Putman
Attorney for Robert Tomlinson

A handwritten signature in black ink, appearing to read 'Donald P. McKenna, Jr.', written over a horizontal line.

Donald P. McKenna, Jr.
Attorney for Relators