

**STATE OF TENNESSEE
DEPARTMENT OF HEALTH**

IN THE MATTER OF:)	BEFORE THE TENNESSEE BOARD
)	OF MEDICAL EXAMINERS
SARANYACHARYULU MUDUMBI, M.D.))	
RESPONDENT)	CASE NO: 201702826
)	
BRENTWOOD, TENNESSEE)	
TENNESSEE LICENSE NO.: 31110)	

CONSENT ORDER

Come now the Division of Health Related Boards of the Tennessee Department of Health (hereinafter the "Division"), by and through the Office of General Counsel, and Respondent Saranyacharyulu Mudumbi, M.D. (hereinafter "Respondent"), who would respectfully move the Tennessee Board of Medical Examiners (hereinafter the "Board") for approval of this Consent Order affecting Respondent's medical license in the State of Tennessee.

The Board is responsible for the regulation and supervision of medical doctors licensed to practice in the State of Tennessee. See Tennessee Medical Practice Act, Tennessee Code Annotated Section (hereinafter "TENN. CODE ANN. §") 63-6-101, *et seq.* It is the policy of the Board to require strict compliance with the laws of this State, and to apply the laws so as to preserve the quality of medical care provided in Tennessee. It is the duty and responsibility of the Board to enforce the Tennessee Medical Practice Act in such a manner as to promote and protect the public health, safety and welfare in every practicable way, including disciplining medical doctors who violate the provisions of TENN. CODE ANN. § 63-6-101, *et seq.* or the Rules and Regulations promulgated by the Board and recorded in the Official Compilation Rules and Regulations of the State of Tennessee (hereinafter "TENN. COMP. R. & REGS.").

Respondent, by his signature to this Consent Order, waives the right to a contested case hearing and any and all rights to judicial review in this matter. Respondent agrees that

presentation to and consideration of this Consent Order by the Board for ratification and all matters divulged during that process shall not constitute unfair disclosure such that the Board or any of its members shall be prejudiced to the extent that requires their disqualification from hearing this matter should this Order not be ratified. Likewise, all matters, admissions and statements disclosed or exchanged during the attempted ratification process shall not be used against Respondent in any subsequent proceeding unless independently entered into evidence or introduced as admissions.

Respondent expressly waives all further procedural steps and expressly waives all rights to seek judicial review of or to challenge or contest the validity of this Consent Order. Respondent understands that by signing this Consent Order, Respondent is allowing the Board to issue its order without further process. Respondent acknowledges that this is a formal disciplinary action and will be reported to the Health Integrity and Protection Data Bank and/or similar agency. In the event that the Board rejects this Consent Order for any reason, it will be of no force or effect for either party.

I. STIPULATIONS OF FACT

- 1) Respondent has been at all times pertinent hereto licensed by the Board as a medical doctor in the State of Tennessee, having been granted Tennessee medical license number 31110 by the Board on November 9, 1998, which has a current expiration date of February 28, 2018.
- 2) Respondent is a healthcare provider who participates in Tennessee's Medicaid Program (TennCare).
- 3) The Respondent entered into a settlement agreement with the State of Tennessee after the State of Tennessee alleged that during the period of January 1, 2009 through December

31, 2011, Respondent improperly submitted, or caused to be submitted, claims to the TennCare program under CRT code 90807 that were not supported by the corresponding medical records. Specifically, the State of Tennessee alleged that Respondent was seeing patients in 15 minute increments instead of the 45 minutes sessions he was billing for.

- 4) The Respondent entered into a settlement agreement with the State of Tennessee and agreed to pay \$535,633.72 to the State of Tennessee to settle the allegations that the State alleged TennCare was improperly billed.
- 5) The settlement agreement was neither an admission of liability by the Respondent nor a concession by the State of Tennessee that the claims are not well founded and was reached to avoid delay, uncertainty, inconvenience and expense of protracted litigation of the claims.

II. GROUNDS FOR DISCIPLINE

- 6) Should the facts alleged by the State of Tennessee and described above be taken as true, the facts would be sufficient to establish that grounds for discipline of Respondent's medical license exist. Although Respondent does not admit that the State of Tennessee's claims are well founded, in order to avoid delay, uncertainty, inconvenience, and the expense of protracted litigation of the claims, Respondent agrees that the facts alleged are sufficient to establish violation of the following statute, which is a part of the Tennessee Medical Practice Act, (TENN. CODE ANN. § 63-6-101, *et seq.*) for which disciplinary action before and by the Board is authorized:

The facts stipulated above, when taken as true, constitute a violation of TENN. CODE ANN. § 63-6-214 (b)(1).

III. POLICY STATEMENT

The Tennessee Board of Medical Examiners takes this action in order to protect the health, safety and welfare of the people of the State of Tennessee and ensure that the public confidence in the integrity of the medical profession is preserved.

IV. ORDER

NOW THEREFORE, Respondent, for the purpose of avoiding further administrative action with respect to this cause, agrees to the following:

- 7) The Tennessee medical license of Saranyacharyulu Mudumbi, M.D., license number 31110, is hereby **REPRIMANDED** effective the date of entry of this Order.
- 8) Respondent must pay three (3) "Type C" civil penalties, in the amount of one hundred dollars (\$100.00) each, for a total assessment of three hundred dollars (\$300.00), representing the three years outlined in paragraph three of the Stipulations of Fact, *supra*. Any and all civil penalties shall be paid within thirty (30) days of the effective date of this Consent Order. Any and all civil penalty payments shall be paid by certified check, cashier's check, or money order payable to the **State of Tennessee**, which shall be mailed or delivered to: **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 665 Mainstream Drive, 2nd Nashville, Tennessee 37243**. A notation shall be placed on said check that it is payable for the civil penalty of Saranyacharyulu Mudumbi, MD Case No. 201702826.
- 9) Respondent must pay, pursuant to TENN. CODE ANN. §§ 63-6-214 (k) and 63-1-144(a)(4), the actual and reasonable costs of prosecuting this case to the extent allowed by law.


including all costs assessed against the Board by the Division's Bureau of Investigations in connection with the prosecution of this matter. These costs will be established by an Assessment of Costs prepared and filed by counsel for the Department. Said costs shall not exceed one thousand dollars (\$1,000.00). Costs shall be paid by certified check, cashier's check, or money order payable to the State of Tennessee, which shall be mailed or delivered to: **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 665 Mainstream Drive, 2nd Nashville, Tennessee 37243**. A notation shall be placed on said check that it is payable for the civil penalty of Saranyacharyulu Mudumbi, MD Case No. 201702826

- 10) Respondent understands that this is a formal disciplinary action and will be reported to the National Practitioner Data Bank (NPDB) and/or similar agency.

This **CONSENT ORDER** was approved by a majority of a quorum of the Tennessee Board of Medical Examiners at a public meeting of the Board and signed this 27th day of September, 2017.


Chairperson
Tennessee Board of Medical Examiners

APPROVED FOR ENTRY:



Saranyacharyulu Mudumbi, M.D.
Respondent

11/9/2017
DATE

Jennifer L. Putnam
Jennifer L. Putnam (B.P.R. #029890)
Assistant General Counsel
Tennessee Department of Health
665 Mainstream Drive
Nashville, Tennessee 37243
(615) 741-1611

DATE 9/27/17

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of this document has been served upon Respondent, Saranyacharyulu Mudumbi, M.D, 9009 Fallswood Lane, Brentwood, Tennessee 37027 by delivering same in the United States Mail, Certified Number 7016 1970 0001 1321 ⁸⁴⁹⁸ return receipt requested, and United States First Class Postage Pre-Paid Mail, with sufficient postage thereon to reach its destination and via email at ssrs87@comcast.net.

This 28th day of September, 2017.

Jennifer L. Putnam
Jennifer L. Putnam
Assistant General Counsel