



THE UNITED STATES ATTORNEY'S OFFICE  
NORTHERN DISTRICT *of* TEXAS

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**Department of Justice**

U.S. Attorney's Office

Northern District of Texas

FOR IMMEDIATE RELEASE

Friday, March 4, 2016

## **Federal Jury Convicts Dallas Anesthesiologist on Health Care Fraud Offenses Involving Approximately \$10 Million in Fraudulent Billings**

### **Dr. Richard Ferdinand Toussaint, Jr. Practiced at Forest Park Medical Center and Doctors Hospital in Dallas**

**DALLAS** — Following a four-day trial before U.S. District Judge Reed C. O'Connor and approximately three hours of deliberation, a federal jury has convicted Dr. Richard Ferdinand Toussaint, Jr., a licensed anesthesiologist, on all counts of a superseding indictment charging seven counts of health care fraud, announced U.S. Attorney John Parker of the Northern District of Texas.

Toussaint faces a maximum statutory penalty of 10 years in federal prison and a \$250,000 fine on each of the seven counts; a sentencing date was not set. Restitution is also mandatory under the law. In addition, the indictment includes a forfeiture allegation that would require Toussaint to forfeit any property, real or personal, derived from proceeds traceable to the offense.

Toussaint, 58, provided anesthesia services personally and through a company he founded, Ascendant Anesthesia. From approximately 2009-2010, Toussaint practiced medicine at several Dallas hospitals, including Forest Park Medical Center located on North Central Expressway and Doctors Hospital at White Rock Lake, located on North Buckner Boulevard. Toussaint founded and held a substantial ownership interest in Forest Park Medical Center.

The government presented evidence that during this time, Toussaint ran a scheme to defraud Blue Cross Blue Shield of Texas (BCBS), United Healthcare (UHC), the Federal Employees Health Benefits Program (FEHBP), Aetna, Cigna, Humana and others by submitting, or causing to be submitted, false and fraudulent claims for personally performing medical direction of anesthesia services for certified registered nurse anesthetists (CRNAs). Toussaint falsely represented he was "present for" these services when: 1) he was under anesthesia undergoing surgery himself; 2) he was flying on his private jet; 3) he was in another state; and 4) he was at another hospital several miles away. For example, Toussaint submitted or caused to be submitted several claims representing he was present for and medically directing six patients at two different hospitals and was medically directing two patients while under anesthesia himself.

In addition, the government presented evidence that Toussaint also inflated the amount of time the procedures took and pre-signed patients' medical records representing the services were provided before

the procedures even took place. In addition to personally creating false medical records and inflating anesthesia procedure time, Toussaint directed others to do the same, representing he was present for procedures when he knew he was not.

As part of his approximate 18-month-long fraud scheme, according to the government, Toussaint fraudulently billed health care benefit programs approximately \$10 million.

The case was investigated by the FBI, the U.S. Department of Labor OIG, the U.S. Department of Labor Employee Benefits Security Administration, the U.S. Postal Service OIG, the U.S. Department of Defense, OIG, Defense Criminal Investigative Service, the U.S. Office of Personnel Management OIG, the U.S. Department of Health and Human Services, the Food and Drug Administration, and Internal Revenue Service Criminal Investigation Unit. Assistant U.S. Attorneys Andrew Wirmani and Kate Pfeifle prosecuted the case. Assistant U.S. Attorney Mark Tindall is handling the forfeiture issues.

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**Topic(s):**

Health Care Fraud

**Component(s):**

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