



MEDICAID FRAUD REPORT

**National Association
of Medicaid Fraud Control Units**

September/October 2009

INSIDE

Massachusetts Home Health Care Aide Pleads Guilty to Falsely Billing Medicaid.....	1
Cases	2
Case Updates.....	20

Massachusetts Home Health Care Aide Pleads Guilty to Falsely Billing Medicaid

Attorney General Martha Coakley announced on October 23 that a woman pleaded guilty in Superior Court in connection with allegations that she overbilled the state's Medicaid program, MassHealth, over \$57,000 for Personal Care Attendant (PCA) services she did not receive. Lynn M. Patten pleaded guilty to charges of Medicaid False Claims (4 counts), Larceny over \$250 (4 counts), Distribution of a Class B Substance (2 counts), Uttering, and Forgery. Following the change of plea, Superior Court Judge Jeffrey Kinder sentenced Patten to one year in the House of Correction for the Medicaid False Claims, Uttering, and Forgery charges. Judge Kinder also sentenced Patten to five years of probation on the Larceny over \$250, and one year of probation on the Distribution of a Class B substance charges, and ordered her to pay \$57,000 in restitution.

In November 2005, the Attorney General's Office began an investigation after the matter was referred by the Stavros Center for Independent Living Personal Care Attendant Program (Stavros Center). Investigators discovered that during the period from November 2003 through November 2007, Patten submitted approximately 80 false claims to MassHealth by submitting fraudulent timesheets to the Stavros Center. Authorities found that Patten paid four different PCAs, with either cash or prescription medications, then signed and submitted false timesheets claiming that these PCAs worked over 35 hours per week assisting Patten with her daily living needs. Investigators discovered that not only did the PCAs work less than all of the hours documented on the falsified timesheets, but that Patten also kept for herself almost all of the Medicaid money that was supposed to be paid to the PCAs. Authorities determined that in the case of one of the PCAs, Patten continued to falsify PCA timesheets and received Medicaid money for over one year after the PCA stopped working for her. As a result of this scheme, Patten received over \$57,000 from MassHealth.

On February 26, a grand jury returned indictments against Patten. She was arraigned on the charges on March 30, 2009.

Superior Court Judge Kinder also ordered that Patten adhere to the following conditions as part of her probation:

- Undergo drug treatment and be drug and alcohol free,
- Undergo random drug and alcohol testing, and
- Patten cannot partake in any PCA or home health aide program

For further information contact Assistant Attorneys General Toby Unger and Michael Ahearn or Investigators Janine Queenin and Mike Russo (617) 727-2200.

CASES

Counseling Services: Tennessee

The Tennessee Bureau of Investigation announced on August 19, 2009 that Dwight and Solomie Guinn, owners of Guinn Consulting, pleaded guilty in district court to one count of Healthcare Fraud and Aiding and Abetting. Dwight Guinn was sentenced to one day of time served, given two years probation, and ordered to perform 1,000 hours of community service. Solomie Guinn was given two years probation and ordered to perform 500 hours of community service. Additionally, the Guinns were ordered to pay restitution in the amount of \$463,556.45 to the Centers for Medicare and Medicaid Services.

This case was opened on February 12, 2007 based upon information from the United States Attorney's Office Western District of Tennessee and United States Department of Health and Human Service's, Office of Inspector General. It was alleged that Guinn Consulting, a provider of counseling services for various nursing homes in the Memphis area, billed Medicare and TennCare for services not rendered. Interviews and surveillances revealed that Guinn Consulting was conducting bingo sessions at nursing homes and billing for psychological and group counseling. It was also alleged that Guinn had taken recipients on fishing trips and billed for psychological counseling. Neither Solomie Guinn, who is a licensed counselor, nor any other employees of Guinn Consulting was ever observed providing one-on-one counseling with residents.

For further information contact Special Agent Terry Reed (901) 379-3433.

Counseling Services: Texas

Attorney General Greg Abbott announced on September 26 that Rafael Suarez Solis, MD, and Sylvia Delgado were found guilty on three counts of providing false statements relating to health care matters and Delgado on seven counts of health care fraud, one count of conspiracy to commit health care fraud and two counts of providing false statements relating to health care matters.

The defendants operated Synergy Counseling and billed Medicaid and Medicare for group therapy services that were allegedly not provided. The investigation has identified \$1,411,202.48 in fraud. Synergy's clients allegedly participated in activities such as listening to someone read to them, watching TV, or playing bingo during group therapy sessions. Rael pleaded guilty in federal court in September 2007 to two felony counts and agreed to testify against Solis and Delgado.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Dentists: Kentucky

Attorney General Jack Conway announced on September 15 that a plea agreement was reached with Dr. Timothy Underwood, a dentist. He was indicted in December 2006 on charges that he defrauded the Kentucky Medicaid Program.

Under the terms of the plea agreement, Underwood will receive a 12 month sentence, that will be conditionally discharged on the condition that he pay more than \$7,000 in restitution to the Kentucky Medicaid Program and \$3,500 in investigative costs to the Kentucky Office of the Attorney General. The defendant has further agreed to never again be a provider in the Kentucky Medicaid Program.

On March 8, 1998 and continuing through March 31, 2003, Underwood submitted duplicate bills to the Kentucky Medicaid Program giving the perception that procedures were performed by two dentists, while they were actually performed by just one dentist.

For further information contact Mitchel Denham, Director (502) 696-5405.

Drug Diversion: Texas

Attorney General Abbott announced on September 17 that registered nurse Kenneth Dwayne Fannin was sentenced to eight years deferred adjudication community supervision, fined \$500 and was referred to the substance abuse treatment program after pleading guilty to obtaining a controlled substance by fraud. Fannin, an emergency room nurse at Wadley Hospital, was indicted on July 17, 2008, for obtaining a controlled substance by fraud. On or about December 4, 2006, Fannin allegedly removed 14 Demerol equivalent injections from the emergency room for his own use.

* * * *

Attorney General Abbott announced on September 22 that licensed vocational nurse (LVN) Dara Ann Dabelgott was sentenced in state court to four years deferred adjudication community supervision, fined \$1000 and ordered to attend drug rehabilitation after pleading guilty to obtaining a controlled substance by fraud. Later in the month, on September 29, Attorney General Abbott announced that licensed vocational nurse (LVN) John Travis Vanecek was sentenced to two years deferred adjudication community supervision, had his LVN license suspended for one year, and was ordered to pay \$400 for attorney fees after pleading guilty to obtaining a controlled substance by fraud.

The two allegedly diverted narcotics on February 27, 2008, from patients at the Woolridge Nursing Home in Beeville, where they were employed. Both admitted to taking the narcotics.

* * * *

Attorney General Abbott announced on October 1 that licensed vocational nurse (LVN) Kristin Marie Soto was sentenced in state court to three years deferred adjudication community supervision and 200 hours of community service after pleading guilty to obtaining a controlled substance by fraud. While employed at Heritage Oaks Nursing and Rehabilitation, Soto allegedly diverted 22 Lortab pills from a patient for her own use.

* * * *

Attorney General Abbott announced on October 22 that licensed vocational nurse (LVN) Susan Carpenter was indicted by a state grand jury on one count of obtaining a controlled substance by fraud.

This case alleges that in December 2007, Carpenter diverted a controlled substance for her own use from a resident at the Manor Healthcare Residence in Mexia.

For further information on these cases contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Durable Medical Equipment: Texas

Attorney General Abbott announced on September 3 that Agustus Okon Edet received five years deferred adjudication community supervision after pleading guilty in state court to theft over \$20,000 under \$100,000. Edet is the owner of COZ-DMEQ, a durable medical equipment company. He allegedly billed Medicare and Medicaid for power wheelchairs he did not deliver, billed for power wheelchairs but provided less expensive power scooters, and provided power wheelchairs to recipients who did not qualify for them. Edet also billed Medicaid for incontinence supplies in the maximum allowable amounts and allegedly delivered partial quantities to recipients. The total fraudulent overpayments identified were \$55,222 by Medicaid and \$35,257 by Medicare.

* * * *

Attorney General Abbott announced on September 23 that James Arua Agbeze was indicted for aggravated theft over \$20,000 by a government contractor. Agbeze, owner of Browne Medical Supply Company, was paid by Medicaid for products allegedly not provided to recipients.

* * * *

Attorney General Abbott announced on September 23 that DME owner Mfon O. Akpan was indicted by a state grand jury for theft by government contract greater than \$1,500. Akpan, owner of Ace Complete Medical Supply, Inc., submitted Medicaid claims for incontinent and other DME supplies which were allegedly only partially delivered or never delivered.

* * * *

Attorney General Abbott announced on October 2 that two durable medical equipment owners were indicted by a state grand jury: Henry Amabeoku Clement for theft greater than \$20,000 and Obinna Atuma for theft by a government contractor greater than \$20,000. Clement and Atuma, owners of Mid West Durable Medical Supply, Inc., submitted Medicaid claims for incontinent supplies that were allegedly not ordered or needed.

* * * *

Attorney General Abbott announced on October 2 that durable medical equipment (DME) owner Ekere Morgan Ebong was indicted by a state grand jury for theft by a government contractor greater than \$20,000. Ebong, owner of In Touch Medical Supply, Inc., submitted Medicaid claims for incontinent supplies and other DME supplies which were allegedly not ordered or needed.

* * * *

Attorney General Abbott announced on October 2 that Houston durable medical equipment (DME) owner Rita Joe Lemons was indicted by a state grand jury for aggravated theft over \$1,500 by a government contractor. Lemons, owner of Experts Are Us, billed Medicaid for incontinent supplies and other DME supplies allegedly not provided to recipients.

* * * *

Attorney General Abbott announced on October 15 that DME owner Bassey M. Idiong and employees Modupe A. Babanumi and Linda E. Kendabie were indicted by a federal grand jury for conspiracy to commit health care fraud and health care fraud. Idiong, doing business as B.I. Medical Supply, billed for products allegedly not delivered and upcoded the billing on products he did provide.

* * * *

Attorney General Abbott announced on October 26 that Katrice Oliver was sentenced in federal court to five years probation and was ordered to pay about \$1.7 million dollars, joint and severally with co-defendants Anthony Thurman and Sandra Thurman. Anthony Thurman pleaded guilty in February 2008 to conspiracy and health care fraud and is awaiting sentencing. Oliver and Sandra Thurman pleaded guilty in August 2007 to health care fraud and conspiracy. Sandra Thurman is awaiting sentencing.

Anthony Thurman was owner of Senior Comfort and Care Medical Supply, a DME company. Sandra Thurman allegedly recruited patients and opened DME companies in Katrice Oliver and Anthony Thurman's names then delivered scooters to patients who had been recruited and billed for more expensive motorized wheelchairs. The transactions were based on fraudulent CMNs, many of which were signed by Lewis Gottlieb, MD, who was sentenced in December 2006 to 6½ years in federal prison.

For further information on these cases contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Home Health Care Aides: California

Attorney General Edmund G. Brown Jr. announced on September 2 that Donna Tibbs was placed on three years probation on the condition that she pay restitution to the victim, IHSS/Medi-Cal, in the amount of \$5,404.50.

On May 21, a criminal complaint was filed in Los Angeles County Superior Court charging Tibbs with one count of Grand Theft, and one count of Welfare & Institutions, Presenting False Medi-Cal Claims. On July 21, Tibbs pleaded no contest to grand theft.

* * * *

Attorney General Brown announced on September 2 that Roderick Edward Woods was placed on three years probation on the condition that he pay restitution to the victim, IHSS/Medi-Cal, in the amount of \$2,007.

On May 21, a criminal complaint was filed in Superior Court charging Woods with one count of Grand Theft and one count of Welfare & Institutions, Presenting False Medi-Cal Claims. On July 21, Woods pleaded no contest to felony grand theft.

For further information on both cases contact Deputy Attorney General Gary Mogil (818) 556-2928

Home Health Care Aides: Florida

Attorney General Bill McCollum announced on September 1 the arrest of Tavia Denise Hines for fraudulent billing to the Florida Medicaid program. Hines is accused of submitting false Medicaid service logs for services not provided to a disabled recipient.

The Medicaid Fraud Control Unit was alerted to the fraudulent activities by Hidden Potentials, Inc., a Medicaid provider offering home and community based services under the Medicaid waiver program. Hidden Potentials, Inc. reported that an independent contractor was allegedly submitting false service logs. An investigation revealed that Hines submitted false service logs to Hidden Potentials documenting Medicaid services that she never performed. As a result, the Florida Medicaid program made payment to Hidden Potentials, Inc. for \$4,065.33 for services which were not rendered. Hines received payment for the services she billed for, but failed to render.

Hines is charged with one count of Medicaid fraud, a third-degree felony punishable by up to five years in prison and a \$5,000 fine; and one count of Grand Theft Third Degree, a third degree felony punishable by up to 5 years in prison and a \$5,000 fine.

For further information contact Scott Farr, Central Regional Chief (813) 287-7940.

Home Health Care Aides: Ohio

Attorney General Richard Cordray announced on September 1 that Christine Babiuch was sentenced to five years of Community Control, 40 hours of Community Service, and to pay restitution in the amount of \$24,171.75. Babiuch, billed for home health services not provided.

For further information contact Principal Assistant Attorney General Jordan Finegold (614) 466-0722.

* * * *

Attorney General Cordray announced on September 8 that Pauline Bradley pleaded guilty to one count of Theft, a misdemeanor of the first degree and was sentenced to two months Jail time-suspended, one year of probation, and pay restitution in the amount of \$400. Bradley, a home health aide billed while a recipient was hospitalized.

For further information contact Senior Assistant Attorney General Constance Nearhood (614) 466-0722.

* * * *

Attorney General Cordray announced on September 8 that Scott Emerman pleaded guilty to one count of Theft, a misdemeanor of the first degree and was sentenced to 90 days in Jail-suspended, two years probation, pay a fine of \$500-suspended, and pay restitution in the amount of \$5,260.06.

Emerman, billed Medicaid for services not rendered to recipients. Recipients were hospitalized during the time provider alleged he provided services.

For further information contact Associate Assistant Attorney General Claude Nicholson (614) 466-0722.

* * * *

Attorney General Cordray announced on September 15 that Tonya Bowling-Moore pleaded guilty to one count of Theft, a misdemeanor of the first degree and was sentenced to six months in jail, and to pay restitution in the amount of \$425.25. If restitution is paid in full by October 1, 2010, jail time will be suspended. Bowling-Moore, billed for home health services not provided.

For further information contact Principal Assistant Attorney General Jordan Finegold (614) 466-0722.

* * * *

Attorney General Cordray announced on October 19 that Yolanda Robinson pleaded guilty to one count of Theft, a misdemeanor of the first degree and one count of Attempted Forgery, a

misdemeanor of the first degree and was sentenced to six months in jail which was suspended, Community Control for 30 months, and ordered to pay restitution in the amount of \$1,064.

Robinson, a home health aide, submitted false time sheets to Maxim Healthcare. She claimed she provided services to a recipient who had died. Maxim in turn billed Medicaid.

For further information contact Senior Assistant Attorney General Constance Nearhood (614) 466-0722.

* * * *

Attorney General Cordray announced on October 19 that Amanda Tucker pleaded guilty to Theft, a misdemeanor of the first degree and was order to pay restitution in the amount of \$720 and serve six months in jail. The jail sentence will be suspended if the restitution is paid in full by October 19, 2010.

Tucker, conspired with the home health worker to bill Medicaid for services not rendered and shared the stolen money.

For further information contact Principal Assistant Attorney General Jordan Finegold (614) 466-0722.

* * * *

Attorney General Cordray announced on October 22 that Jocelyn Burke-Shriner was sentenced to 12 months in prison which was suspended, one year of Community Control. On the date of sentencing she paid full restitution in the amount of \$4,896.00. Burke-Shriner, a home health aide for her son billed for services not rendered.

For further information contact Senior Assistant Attorney General Constance Nearhood (614) 466-0722.

* * * *

Attorney General Cordray announced on October 27 that Veronica Sellers pleaded guilty to one count of Theft, a misdemeanor of the first degree and was sentenced to four years of non-reporting Community Control, and ordered to pay restitution in the amount of \$6,355.91. If she does not comply with Community Control she will be sentenced to 10 days in jail. Sellers, a home health aide billed for services not rendered.

For further information contact Principal Assistant Attorney General Jordan Finegold (614) 466-0722.

Home Health Care Aides: Oregon

Attorney General John Kroger announced on September 2 that Sharon Sommerhalder pleaded guilty to one felony count of Making a False Claim for Health Care Payment and was sentenced to three years of supervised probation, 120 hours of community service and \$5,085.92 in restitution.

Sommerhalder was paid by Medicaid to provide in-home care to Medicaid clients. She would submit a monthly voucher to the state for payment claiming the number of hours she had worked. She submitted vouchers for time periods when she provided no care, forging her clients' names in the process.

For further information contact Assistant Attorney General Sheen Y. Wu (971) 673-1992.

* * * *

Attorney General Kroger announced on September 28 the conviction and sentencing of Linda Sue Bogle and Kathryn Loucille Curtis on numerous felony charges for a three-year healthcare fraud scam that cost the state Medicaid program \$59,251.

The scam by Curtis and Bogle involved false claims for Medicaid payments based on phony disabilities. Curtis claimed severe disabilities-the inability to drive, dress, bathe, cook or walk without assistance. Bogle received Medicaid funds to care for Curtis through the Oregon Home Healthcare Provider Program. In early 2008, a case manager learned that Curtis was booked into the Klamath County Jail on an unrelated charge. The case manager called the jail to ensure that Curtis was receiving proper medical assistance, but learned that she was housed in general population, taking care of herself and required no assistance.

A surveillance by the MFCU determined that Curtis was in good health - she could walk, drive and did not need any care. In fact, the only time Curtis and Bogle met was to sign fraudulent vouchers and split the monthly Medicaid payments that Bogle received as caretaker.

Curtis was found guilty of five counts of First Degree Theft and one count of Making a False Claim for Health Care Payment and was sentenced to serve one year in jail. She also was ordered to pay \$59,251 to the state Medicaid program and placed on an extended five-year probation. If she fails any condition of her probation, including the payment of restitution, she would receive an additional 13-month prison sentence.

Bogle pleaded guilty on October 16, 2008, to five counts of First Degree Theft and was ordered to perform 480 hours of community service and placed on five years probation. She is also jointly liable for repaying the \$59,251 to the Medicaid program. Bogle agreed she would spend 13 months in prison for failing to satisfy any condition of her probation.

* * * *

Attorney General Kroger announced on October 8 the conviction of three people on multiple health care fraud charges.

The scam involved filing false claims with a state Medicaid program. John Lee Veals claimed that he was disabled—unable to walk without assistance, drive, brush his teeth or even shave. A Medicaid program designed to allow disabled people to remain at home instead of a nursing facility paid Veal's son, Ramone Lee Veals, approximately \$1,600 per month for three years to provide care for his father. John Veals' companion, Christina Underwood, claimed she would provide the care when Ramone was unavailable.

In July 2008, a state Department of Human Services caseworker discovered that Ramone Veals was employed full-time on a construction job. The caseworker contacted the Department of Justice Medicaid Fraud Control Unit, which launched an investigation. Investigators discovered that John Veals had recently been cited for running a red light and was scheduled to appear at the Gresham County Courthouse. Filmed surveillance of that hearing revealed Veals could drive and walk. Additional surveillance further undermined his disability claims.

All three defendants were found guilty of five felony counts of Theft in the First Degree in Multnomah County Circuit Court. They were ordered to jointly pay \$45,725 in restitution to Medicaid.

John Veals, the ringleader, was sentenced on September 10, to 13 months prison. Christina Underwood was sentenced to 800 hours of community service and pay restitution. Ramone Veals, who cooperated in the investigation, was ordered to perform 300 hours of community service. If he fails to pay restitution, he faces 13 months in prison.

For further information on both cases contact Senior Assistant Attorney General Rodney Hopkinson, Director (971) 673-1880.

Home Health Care Aides: South Carolina

Attorney General Henry McMaster announced on September 15 that Pamela McKenzie was convicted of one count of Filing False Claims. On or about November 1, 2008, McKenzie filed a false claim with the South Carolina Department of Disabilities and Special Needs for a Medicaid Recipient. A claim for respite care services was filed when no such service had been provided, and the South Carolina Department of Disabilities and Special Needs paid McKenzie for the service that was not provided.

McKenzie was sentenced to three years suspended to five years probation, with \$3,144.75 in restitution owed to S.C. DDSN plus costs.

For further information contact Assistant Deputy Attorney General C. William Gambrell, Jr., or Chief Investigator Jay Evans (803) 734-3660.

Home Health Care Aides: Vermont

Attorney General William H. Sorrell announced today that Deborah Spicer was arraigned on October 13 in district court on two counts of Medicaid Fraud, felonies. Spicer was released on several standard conditions.

According to papers filed in court, Spicer allegedly knowingly invoiced ARIS Solutions, the agency that processes timesheets for Vermont Medicaid waiver services, for services that she failed to provide to an individual, resulting in her receipt of \$6,808.54 from the Vermont Medicaid Program. Spicer pleaded not guilty to the charge.

For further information contact Assistant Attorney General Earl F. Fechter (802) 828-5511.

Home Health Care Aides: Washington State

Attorney General Rob McKenna announced on October 23 that Nina K. Silchuk pleaded guilty to one count of Theft in the First Degree and six counts of Medicaid False Statement. She was sentenced to serve one day of confinement, 45 days electronic home monitoring, 12 months of probation and was ordered to pay restitution in the amount of \$8,934 to the Medicaid program, of fees and costs of \$600.

Investigator Jeff Hartley completed the investigation for the Washington State MFCU. Silchuk had contracted with the Medicaid program to provide in-home personal care services for her grandfather, a Medicaid client. In order to receive payment under this program, Silchuk was to submit the number of hours of care that she provided on a monthly basis. The investigation revealed that, Silchuk continued to bill for services for six months after her grandfather passed away.

Andrea Jarmon, an Assistant Attorney General in the Washington State MFCU, handled the case for the prosecution.

For further information contact Assistant Attorney General Aileen Miller (360) 586-8888.

Home Health Care Agencies: Texas

Attorney General Abbott announced on October 14 that two additional Family Healthcare subjects were indicted by a federal grand jury. Ana Yancy Quinteros, and Michelle S. Turner were charged with conspiracy to commit health care fraud for allegedly accepted money from the owners of Family Healthcare in return for beneficiary identifiers.

Family Healthcare Services, owned by Clifford Ubani and Princewill Njoku, is a home health company. Ubani and Njoku allegedly billed the accounts of Medicare beneficiaries for orthotic kits which they did not receive. In addition, some beneficiaries received cheap substitute neoprene braces and/or received total orthotic kits which were not medically necessary. Although they were not paid by Medicaid for these services, Medicaid did pay for some services through Medicaid HMOs, and Medicaid also paid for attendant services and respite care to critically ill children. Ubani, Njoku, Mary Ellis and Rolandae Straughter were indicted in July 2009 for conspiracy to commit health care

fraud and health care fraud and are awaiting trial.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Medical Clinics: Texas

Attorney General Abbott announced on September 3 that Edmond Stillman Maxon III received one year deferred adjudication community supervision, was fined \$500 and ordered to pay \$225 in court costs after pleading guilty in state court to securing execution of a document by deception. Maxon, former owner of the Wise County Community Clinic, and his partner billed Medicaid for services allegedly not rendered. Maxon failed to disclose on the Medicaid provider enrollment application prior criminal convictions, which makes all Medicaid payments, \$28,769.49, an overpayment.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Medical Transportation: Ohio

Attorney General Cordray announced on September 3 that Mudar Ismail was sentenced to ten months in prison, six months of house arrest, three years of supervised release, ordered to pay a special assessment of \$300, and restitution in the amount of \$204,768.41.

Ismail, Owner of Nobility Medical Transportation, billed for ambulatory Medicaid recipients and transported individuals without wheelchairs and in non-wheelchair vehicles.

For further information contact Senior Assistant Attorney General Constance Nearhood (614) 466-0722.

* * * *

Attorney General Cordray announced on October 13 that Adel Muntaser was sentenced to five years of community control, 100 hours of community service, and ordered to pay restitution in the amount of \$80,254.82. If Munaser violates community control he will receive a prison term of 18 months.

Muntaser, Owner of an ambulette company billed for wheelchair transports that were not provided.

* * * *

Attorney General Cordray announced on October 26 that Abudnji Williams pleaded guilty to one count of Theft by Deception, a felony of the fifth degree and was sentenced to ten months in prison which was suspended, five years of community control, and ordered to pay restitution in the amount of \$140,000.

Williams, owner and operator of an ambulette company, billed for wheelchair transports which were not provided.

For further information on both cases contact Associate Assistant Attorney General Claude Nicholson (614) 466-0722.

Medical Transportation: Texas

Attorney General Abbott announced on September 11 that a federal jury found Robert Read and Claudette Read guilty of one count of conspiracy to commit healthcare fraud and twenty counts of mail fraud.

The Reads were on trial for healthcare fraud, conspiracy to commit healthcare fraud, mail fraud and aggravated identity theft based on allegations they conspired to bill Medicaid and Medicare for non-qualifying ambulance runs. Priority One EMS, owned by Robert Read, transported patients to and from dialysis via ambulances.

The investigation identified suspected Medicaid overpayments totaling approximately \$265,000 and Medicare overpayments of \$1.4 million.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Nurse Assistants: California

Attorney General Brown announced on September 3 that Eduardo Moreno was sentenced to 12 months of probation, ordered to do 96 hours of community service and to pay court fines and fees.

On July 2, a criminal complaint was filed in Superior Court charging Eduardo Moreno with two counts of "Use of False Citizenship Documents", and one count of "False Representation as a Certified Nursing Assistant". An investigation confirmed that Moreno was working at a convalescent hospital under a false name, using a false Social Security card and false citizenship documents.

For further information contact Deputy Attorney General Natasha Fagen (818) 556-2901.

Nurses: Florida

Attorney General McCollum announced on September 16 the arrest of Fredrica Hill, Cathy Summerlin and Larry Hill on charges that they conspired to defraud the Medicaid program out of over \$196,000.

Investigators with the Medicaid Fraud Control Unit received information from the Florida Department of Children and Families, Adult Protective Services, that Frederica Hill, a Licensed Practical Nurse, was employed by a home health agency to provide 40 hours of Skilled Nursing per week to a Medicaid recipient. The investigation revealed that in late 2004, Frederica entered into a verbal agreement with Summerlin, the mother of the Medicaid recipient, whereby Frederica would pay Cathy approximately \$150 per week in exchange for Cathy signing service logs indicating that

Frederica was providing the nursing care to her son, when in fact she was not.

Frederica's husband, Larry Hill, had knowledge of the agreement and would make payments to Cathy in furtherance of the fraud. Frederica would submit the falsified service logs to the home health agency, which in turn, electronically submitted the false claims to the Medicaid Program for payment. From January 1, 2005 until December 15, 2008, Medicaid paid the home health agency over \$196,000 for the fraudulent submissions. During the same time period, the home health agency paid Frederica over \$112,000.

Frederica Hill was arrested on September 15 on charges of Medicaid Provider Fraud, Organized Fraud, Communications Fraud, Grand Theft, Neglect of a Disabled Adult, and Conspiracy to Commit Medicaid Provider Fraud. Cathy Summerlin was arrested on September 16 on charges of Medicaid Provider Fraud, Organized Fraud, Communications Fraud, Neglect of a Disabled Adult, and Conspiracy to Commit Medicaid Provider Fraud. Larry Hill was arrested on September 15, on charges of Medicaid Provider Fraud and Conspiracy to Commit Medicaid Provider Fraud.

For further information contact Betty Cheramie, Acting Northern Regional Chief (850) 414-3300.

Nurses: Ohio

Attorney General Cordray announced on October 2 that Rose Mabrey was sentenced to five years of community control, 80 hours of community service, and ordered to pay restitution in the amount of \$6,500. If she violates community control she will receive a prison term of 12 months. Mabrey, an LPN was billing for services not rendered.

For further information contact Associate Assistant Attorney General Shawn Napier (614) 466-0722.

Patient Trust Funds: Ohio

Attorney General Cordray announced on October 9 that Kara Morris was sentenced to three years of community control, and ordered to pay a fine of \$1,401.98. Morris, stole a credit card from a nursing home resident and made improper charges on the card.

For further information contact Principal Assistant Attorney General Jordan Finegold (614) 466-0722.

Patient Trust Funds: Texas

Attorney General Abbott announced on September 17 that Sabrina Avants Tibbetts was sentenced to six months deferred adjudication community supervision. She paid \$5,206.33 in restitution after pleading guilty in state court to theft. Tibbetts is the former business office manager at Coleman Healthcare Center, a nursing home. She presented trust fund documents to a Department of Aging and Disability Services Medicaid facility consultant and some of the documents appeared to be altered. The investigation revealed that \$5,206.33 in residents' trust fund monies had been misappropriated.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Patient Trust Funds: Vermont

Attorney General Sorrell announced on October 6 the Heather Whitehouse, a former caregiver who provided care to seniors with Alzheimer's disease, has been sentenced to jail for financial exploitation of a vulnerable adult, fraud and other crimes of dishonesty. The charges stemmed from her employment as a caregiver at The Arbors, a residential care community dedicated to serving the needs of seniors with Alzheimer's disease and related memory impairments.

Heather Whitehouse was sentenced by Judge Linda Levitt to two to four years in jail, six months to serve, followed by four years of probation, subject to standard and special conditions, on charges of Financial Exploitation of a Vulnerable Adult, Fraudulent Use of a Credit Card, False Pretenses, and Selling Stolen Property. Immediately following her sentencing, Whitehouse was remanded to the custody of the Department of Corrections to begin serving her sentence.

For further information contact Assistant Attorney General Earl Fechter (802) 828-5511.

Pharmacies: Texas

Attorney General Abbott announced on September 3 that Kimberly Charleston and Carlos Simmons received five years deferred adjudication community supervision and were fined \$2,000 after pleading guilty on charges of obtaining a controlled substance by fraud. The two were indicted in March 2008. The investigation alleged that Charleston, a former pharmacy technician at a CVS Pharmacy, fabricated the authorization of new prescriptions which were dispensed and delivered to Simmons.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Physicians: Arizona

Attorney General Terry Goddard announced on October 14 that Christopher Barker was sentenced to three years supervised probation and ordered to pay investigative costs to the Medicaid Fraud Control Unit in the amount of \$3,000 payable at \$100 per month.

Between January, 2007, and December, 2008, Barker posed as a medical doctor and wrote numerous forged prescriptions to obtain controlled substances and other prescription-only drugs from Allen Pharmacy (the evidence includes 45 of these prescriptions). Barker is not licensed as a physician, and has never attended medical school or received medical training of any kind. In writing these prescriptions, the defendant primarily used his own name (Christopher Barker) along with the true DEA numbers of several doctors (including the DEA numbers of two doctors who both share the name of Christopher Barker). Additionally, at times, he used the names and DEA numbers of several actual medical doctors whom he had previously seen as a patient.

On February 12, Barker was indicted by a grand jury. The defendant was charged with one count Fraudulent Schemes and Artifices, class 2 felony; eight counts of Taking Identity of Another, class 4 felonies; 12 counts of Illegally Obtaining or Procuring the Administration of Dangerous Drugs, class 3 felonies; 44 counts of Forgery, class 4 felonies; and 16 counts of Illegally Obtaining or Procuring Administration of Narcotic Drugs, class 3 felonies.

On June 23, Barker pleaded guilty to an amended Count 1: Solicitation of Fraudulent Schemes and Artifices, a class 4 felony.

For further information contact Assistant Attorney Phil Garrow (602) 542-3881.

Physicians: Texas

Attorney General Abbott announced on October 13 that Darryl Clarence Harris, MD, pled guilty in federal court to one count of health care fraud. Prosecutors are seeking criminal forfeiture of \$76,683, representing the amount of proceeds obtained as result of the alleged health care offense. Harris had a medical practice specializing in obstetrics and gynecology, and allegedly billed for services not provided. Overpayments of \$963,328.39 have been identified.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Podiatrists: Texas

Attorney General Abbott announced on September 10 that podiatrist Franklin Beltre and unlicensed podiatrist Manuel Alana were indicted on eight counts of health care fraud. It is alleged that while Beltre worked and lived in Houston, Manuela Alana provided medical services to patients at Beltre's office.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Program Fraud: Arizona

Attorney General Goddard announced on October 6 the sentencing of Ericka Lashea Golden, an employee of the Arizona Health Care Cost Containment System ("AHCCCS"). AHCCCS administers Arizona's Medicaid System. On September 14, Golden was sentenced to three years probation, ordered to pay \$3,000 for investigative costs to the Medicaid Fraud Control Unit, complete 200 hours of approved community restitution at a minimum rate of 20 hours per month as directed by the Adult Probation Department and be incarcerated in the county jail for seven days, beginning September 18 with no credit served.

Between June 1, 2006 and February 29, 2008, Golden used her AHCCCS computer to obtain the personal identifying information of at least 22 AHCCCS clients. Golden then used this information to apply for credit using their names, Social Security numbers, and personal identifying information. In an interview with AHCCCS, Golden admitted using her access to the computer system to assist a furniture rental company to locate clients with overdue accounts, in exchange for

extensions of time to pay her own past due account. After her resignation, AHCCCS learned that she had misused clients' information for her own benefit, and a subsequent search warrant executed by MFCU of her home and computers revealed she had been misappropriating the patient information.

The state Grand Jury indicted Golden on March 18, charging her with one count Fraudulent Schemes and Artifices, class 2 felony; one count Computer Tampering, a class 3 felony, one count of Aggravated Taking Identity of Another, class 3 felony; and another count of Computer Tampering, a class 6 felony.

On July 31, she pleaded guilty to Count 2, Computer Tampering, a class 3 felony offense.

For further information contact Assistant Attorney General Steven J. Duplissis, Director (602) 542-3881.

Program Fraud: Oregon

Attorney General Kroger announced on October 7 that Naudaan Hurh was convicted of four felony counts including one count of Aggravated Theft in the First Degree, two counts of Theft in the First Degree and one count of Computer Crime. Washington County Judge Nachtigal sentenced Hurh to 20 months in prison and ordered that he pay the full restitution of \$19,124.96.

Hurh was an employee of the Oregon Department of Human Services (DHS) working as an eligibility worker. Hurh accessed the DHS computers and altered information resulting in the issuance of 26 fraudulent DHS checks. These checks were sent to names similar to his and family members and to addresses that he had access to. The checks were deposited into his own bank account and into his mother's bank account, an account he managed and used to fund his gambling addiction.

For further information contact Senior Assistant Attorney General Sheen Y. Wu (971) 673-1880.

Resident Abuse: District of Columbia

The District of Columbia Medicaid Fraud Control Unit announced on September 2 that a former counselor at Careco, Inc., a provider of residential services for individuals with developmental disabilities, pleaded guilty and was sentenced for Criminal Abuse of a Vulnerable Adult.

On July 9, Sheila Holland (a.k.a. Sheila Thomas) was sentenced following her guilty plea to one count of Criminal Abuse of a Vulnerable Adult in the Superior Court of the District of Columbia before the Honorable Anthony C. Epstein. Judge Epstein sentenced Holland to 90 days in jail, all suspended and three years of supervised probation. Holland was also ordered to stay away from Careco, Inc., the victim, and not to work with vulnerable adults. In addition, Holland was ordered to pay \$100 to the Victims of Violent Crime Compensation Fund.

According to the government's evidence, on December 15, 2008, Holland was a residential counselor for Careco, Inc. and directly responsible for the care of a Careco resident who attended a day treatment program for persons with disabilities at United Cerebral Palsy (UCP). While under Holland's care at UCP, a UCP employee witnessed Holland slap the victim as she quietly ate her lunch. Another UCP employee who was nearby heard Holland slap the victim.

For further information contact Attorney Dangkhwa Nguyen (202) 727-2641.

Resident Abuse: Ohio

Attorney General Cordray announced on September 2 that Taisha Brown pleaded guilty to Criminal Mischief, a misdemeanor of the first degree and was sentenced to six months Jail time, and to pay court costs in an amount to be determined. Brown, an STNA hit a resident on the head and thigh.

For further information contact Associate Assistant Attorney General Shawn Napier (614) 466-0722.

* * * *

Attorney General Cordray announced on September 28 that Beverly Jackson pleaded guilty to Patient Abuse, a misdemeanor of the first degree and was ordered to pay a fine in the amount of \$1,000. Jackson, hit a resident of Scenic Hills Nursing and Rehabilitation Center.

* * * *

Attorney General Cordray announced on October 6 that Runetta Jenkins pleaded guilty to one count of Assault, a misdemeanor of the first degree and was sentenced to 180 days in jail which was suspended, three years probation, and ordered to pay a fine of \$250. Jenkins, an aide in a nursing home she slapped a resident in the face.

For further information on these cases contact Senior Assistant Attorney General Constance Nearhood (614) 466-0722.

Resident Abuse: Tennessee

The Tennessee Bureau of Investigation announced on August 12 that Dustin Rhodes, a health care aide, pleaded guilty in the Davidson County Criminal Court to one count of willful abuse of an adult. Rhodes was granted a suspended sentence and placed on probation for a period of 11 months and 29 days. Additionally, Rhodes is in the process of being referred to the abuse registry maintained by the Tennessee Department of Health.

This case was opened on August 7, 2008, based on a referral from Parthenon Pavilion at Centennial Medical Center. It was alleged that Rhodes, a mental health assistant at Parthenon Pavilion, physically and verbally assaulted a resident. Witness statements supported the allegations that Rhodes forcefully pulled the patient out of his chair and then pushed him onto a

mattress that was on the floor, twisting the patient's arm in the process. When Rhodes was confronted with the allegations immediately following the incident, staff could smell a strong odor of alcohol on his breath. Rhodes was directed to submit to a Breathalyzer test, which he subsequently failed. On September 15, 2008, Rhodes was indicted on one count of willful abuse of an adult and one count of assault.

For further information contact Special Agent Paul Murray (615) 744-4552.

Resident Neglect: California

Attorney General Brown announced on September 9 that Doris Pascual Lagasca entered a plea of no contest to misdemeanor elder abuse and was sentenced to one year probation on the condition she perform 138 hours of community service along with the county's standard conditions of misdemeanor probation. She was also precluded from providing government funded health care services.

On October 9, 2008, a two count criminal complaint was filed charging Lagasca with elder abuse and falsifying a medical record. An investigation confirmed that Lagasca did willfully cause and permit the victim, an elder and dependent adult, to be placed in a situation in which her health was endangered. This resulted in a head injury from a fall that was accurately reported.

For further information contact Supervising Deputy Attorney General John Dower (415) 703-5785.

Resident Neglect: Colorado

Attorney General John Suthers announced on October 27 that Tammera Henritze was sentenced to 18 years in prison following a plea of guilty to Attempt to Commit First Degree Assault on an At-Risk Person, a class 3 felony. As part of a plea agreement, original charges of First Degree Assault on an At-Risk Person and two counts of felony Theft were dismissed.

The investigation showed that Henritze was employed by a Medicaid provider as a personal services provider for the victim, a 65-year old patient with severe memory problems. When she moved out of a residence, the landlord discovered strong evidence that dangerous, unclean conditions had been maintained in the house. The landlord notified the Sheriff's Office, who discovered the victim in a new residence, locked in a bedroom in squalid conditions, surrounded by rotting food, urine, and feces, and severely malnourished. She was removed from the home and taken to a hospital. Later she was placed in a nursing home where her health has dramatically improved and she has gained over 50 pounds.

As part of the plea agreement, Henritze was ordered to pay restitution for Medicaid services not rendered in an amount anticipated to be approximately \$8,500.

For further information contact Director George A. Coddling or Investigator Tony Matthews (303) 866-5431.

Resident Neglect: Kentucky

Attorney General Conway announced on September 4 that a plea agreement was reached in the case of Stacy Harrison. Harrison was indicted in June 2008 on charges related to the abuse and neglect of a patient under his care. Harrison pleaded guilty to knowing neglect of a vulnerable adult.

Under the terms of the plea agreement, Harrison will receive a five-year sentence and he agreed to forfeit his nursing license and to never again apply to be a nurse in Kentucky or any other state.

On March 8, 2008, and continuing through the early morning hours of March 9, 2008, Harrison was on duty and failed to respond to the victim, a vulnerable adult, when he was vomiting and showing other signs of distress. While the victim was in distress, Harrison stayed at the nursing station and sent text messages and ate snacks instead of responding to the patient, who later stopped breathing. Harrison did not attempt to resuscitate even though the victim's family had written his wishes were to be resuscitated.

For further information contact Mitchel Denham, Director (502) 696-5405.

Resident Neglect: Texas

Attorney General Abbott announced on October 29 that licensed vocational nurse (LVN) Sherry Ilene Wiseman was indicted by a state grand jury on one count of injury to the elderly (neglect). Wiseman, while employed at Prairie House Living Center, allegedly failed to respond to a patient in need of medical attention which resulted in the patient's death.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Speech Therapists: Texas

Attorney General Abbott announced on September 23 that licensed speech therapist Sylvia Cole was indicted for aggregate theft over \$20,000. Cole was a speech therapist for Special Kids Care home health agency. On May 11, 2007, Special Kids Care administrators, while conducting an internal audit, discovered that Cole generated notes describing therapy sessions she allegedly did not provide, causing Special Kids Care to bill Medicaid for services which were not rendered.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

CASE UPDATES

Adult Day Care Centers: Texas

Attorney General Abbott announced on September 4 that former adult day care center owner Martha Alaniz was sentenced in federal court to two years supervised probation and four

months house arrest. Alaniz pleaded guilty on June 26 to one count of the anti kickback statute. (*See: Medicaid Fraud Report*, May/June 2009, p. 2). Raul Torres, a marketer for Fabian Aurignac, MD, allegedly paid Alaniz on behalf of Aurignac for access to adult day care clients to obtain personal information to fraudulently bill Medicaid for cardiac services.

Fabian Aurignac was sentenced in August in federal court to four years and nine months in federal prison and fined \$20,000. (*See: Medicaid Fraud Report*, July/August 2009, p. 18). Aurignac pleaded guilty on May 8, to health care fraud and agreed to reimburse the government \$1,157,000. Aurignac billed for services that allegedly were not rendered, not medically necessary and that subjected patients to unnecessary invasive procedures. Although he had closed his office, Aurignac allegedly continued to practice medicine at another location, at adult day care centers and flea markets. His medical license was suspended indefinitely on October 17, 2007.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Counseling Services: Texas

Attorney General Abbott announced on September 10 that Harvey Smith received five years deferred adjudication community supervision and was ordered to pay \$24,833 restitution after pleading no contest to felony theft. Smith, owner/operator of Harmony Case Management Service, was indicted in January 2009. (*See: Medicaid Fraud Report*, January/February 2009, p. 3). Smith, a provider, was paid \$20,685.52 by Medicaid for counseling and evaluation services that he allegedly did not provide.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Drug Diversion: Texas

Attorney General Abbott announced on September 1 that licensed vocational nurse (LVN) James David Raulsten entered into a one-year pre-trial diversion agreement beginning September 1. Raulsten will pay \$1000 in program fees, and has been placed under travel restrictions, mandatory counseling and drug testing. Raulsten was indicted on March 26, on one count of tampering with a governmental record. (*See: Medicaid Fraud Report*, March/April 2009, p. 4). Raulsten, an LVN at The Palms Nursing & Rehabilitation Center, allegedly took hydrocodone from a resident his personal use.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Durable Medical Equipment: Texas

Attorney General Abbott announced on September 11 that Linda Patterson was sentenced in federal court to two years probation and 180 days home confinement. She pleaded guilty on February 23 to making or causing to be made a false statement or representation. (*See:*

Medicaid Fraud Report, January/February 2009, p. 6). She, along with Yvonne Heard who has already pled guilty, allegedly recruited Medicaid/Medicare recipients and provided their names and patient information to Enitan Isiwele. Isiwele, in turn, billed Medicaid and Medicare through Galaxy Medical Supplies for replacement wheelchairs to be provided to recipients who lost their wheelchairs due to the Hurricane Rita disaster. Isiwele was found guilty of 16 counts of health care fraud and one count of conspiracy for paying kickbacks and is awaiting sentencing.

* * * *

Attorney General Abbott announced on September 16 that durable medical equipment (DME) owner Ene Hogan was sentenced in federal court to two years incarceration, three years probation and was ordered to pay \$563,535.38 in restitution. Hogan pleaded guilty in June to three counts of health care fraud. (*See: Medicaid Fraud Report*, May/June 2009, p. 7). Hogan is the owner and operator of Shanet Medical Source, Inc. Hogan allegedly billed Medicaid for DME supplies that were never delivered or only partially delivered.

* * * *

Attorney General Abbott announced on October 5 that Yvonne Heard, recruiter for Galaxy Medical Supplies, was sentenced in federal court to one year probation and fined \$1,000. Heard pleaded guilty in March 2009 to one count of making or causing to be made a false statement or representation. (*See: Medicaid Fraud Report*, March/April 2009, p. 7). Two of her associates were convicted at trial for billing Medicaid and Medicare for replacement wheelchairs for recipients who allegedly lost theirs during Hurricane Rita, when no wheelchairs were delivered. Linda Patterson, another recruiter for Galaxy Medical Supplies, was sentenced to two years probation and 180 days home confinement. Galaxy Medical Supplies owner Enitan Isiwele was found guilty of 16 counts of health care fraud and one count of conspiracy for paying kickbacks. His sentencing date has not been set.

For further information on these cases contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Nurses: Texas

Attorney General Abbott announced on September 21 that registered nurse Carol Lynn Glover was sentenced to 18 months in federal prison with three years supervised release, and ordered to pay \$134,980.88 in restitution for theft in connection with health care fraud. She pleaded guilty in May 2009. (*See: Medicaid Fraud Report*, May/June 2009, p. 10). Glover, employed by Nurses by Prescription, allegedly provided services to a patient at Day Break Group Home. During this same time period, the patient's care was being provided by nursing staff of the facility. Nurses by Prescription submitted prior authorization requests for 80 hours of home health private duty nursing services per week for the patient and was paid approximately \$2,574 a week from April 2005 until July 2006, accounting for \$134,980 in overpayment.

For further information contact Rick Copeland, Director or Chief Investigator Jim Fossum (512) 371-4700.

Inquires on editorial content should be addressed to:

Barbara L. Zelner
Executive Director
National Association of Medicaid Fraud Control Units
2030 M Street NW, 8th Floor
Washington, DC 20036
bzelner@naag.org

Jon Bruning
President
National Association
of
Attorneys General

D. Mark Collins
President
National Association
of
Medicaid Fraud Control Units

James McPherson
Executive Director
National Association
of
Attorneys General

The views and opinions of authors expressed in this newsletter do not necessarily state or reflect those of the National Association of Attorneys General (NAAG). This newsletter does not provide any legal advice and is not a substitute for the procurement of such services from a legal professional. NAAG does not endorse or recommend any commercial products, processes, or services.

Any use and/or copies of the publication in whole or part must include the customary bibliographic citation. NAAG retains copyright and all other intellectual property rights in the material presented in the publications.

Copyright 2009, National Association of Attorneys General

INDEX OF CASES

ADULT DAY CARE CENTERS	20
COUNSELING SERVICES	
Dwight and Solomie Guinn	2
Harvey Smith	21
Rafael Suarez Solis, MD.....	2
DENTISTS	3
DRUG DIVERSION	
Susan Carpenter	4
Dara Ann Dabelgott	3
Kenneth Dwayne Fannin.....	3
James David Raulsten	21
Kristin Marie Soto.....	4
DURABLE MEDICAL EQUIPMENT	
James Arua Agbeze.....	4
Mfon O. Akpan	4
Jenry Amabeoku Clement and Obinna Atuma	5
Ekere Morgan Ebong	5
Agustus Okon Edet	4
Yvonne Heard	22
Ene Hogan.....	22
Bassey M. Idiong, Madupke A. Babanumi, and Linda E. Kendabie	5
Rita Joe Lemons.....	5
Katrice Oliver.....	5
Linda Patterson	21
HOME HEALTH CARE AIDES	
Christine Babiuch.....	7
Linda Sue Bodle and Kathryn Loucille Curtis.....	9
Tonya Bowling-Moore.....	7
Pauline Bradley	7
Jocelyn Burke-Shriner	8
Scott Emerman.....	7
Tavia Denise Hines	6
Pamela McKenzie	10
Yolanda Robinson.....	7
Veronica Sellers	8
Nina K. Silchuk.....	11
Sharon Sommerhalder.....	9
Deborah Spicer.....	11
Donna Tibbs.....	6
Amanda Tucker.....	8
John and Ramone Lee Veals, and Christina Underwood	10
Roderick Edward Woods	6

HOME HEALTH CARE AGENCIES	11
MEDICAL CLINICS	12
MEDICAL TRANSPORTATION	
Mudar Ismail.....	12
Adel Muntaser.....	12
Robert and Claudette Read	13
Abudnji Williams.....	12
NURSE ASSISTANTS	13
NURSES	
Carol Lynn Glover	22
Fredrica Hill, Cathy Summerlin, and Larry Hill.....	13
Rose Mabrey	14
PATIENT TRUST FUNDS	
Kara Morris	14
Sabrina Avants Tibbetts.....	14
Heather Whitehouse.....	15
PHARMACIES	15
PHYSICIANS	
Christopher Baker	15
Darryl Clarence Harris, MD	16
PODIATRISTS	16
PROGRAM FRAUD	
Ericka Lashea Golden.....	16
Naudaan Hurh.....	17
RESIDENT ABUSE	
Taisha Brown	18
Sheila Holland (aka Sheila Thomas).....	17
Beverly Jackson	18
Runette Jenkins	18
Dustin Rhodes.....	18
RESIDENT NEGLECT	
Stacy Harrison.....	20
Tammera Henritze	19
Doris Pascual Pagasca.....	19
Sherry Ilene Wiseman.....	20
SPEECH THERAPISTS	20