



MEDICAID FRAUD REPORT

**National Association
of Medicaid Fraud Control Units**

January/February 2010

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Texas DME Owners Sentenced to Prison

Attorney General Greg Abbott announced on January 22 that Rhonda Fleming and Bose Ebhamen were sentenced in federal court. They are the last two of six defendants who have been sentenced in a major Houston DME billing company fraud scheme and they all received prison sentences. The sentences ranged from 1 to 30 years, the average sentence was ten years and two months. They were all ordered to make restitution to Medicaid and/or Medicare, restitution ordered to Medicaid totaled over \$445,000, and to Medicare, \$5.8 million.

The case involved two billing companies, three DME companies and a nursing company that were charged with billing for products not supplied. Fleming owned a billing company Advanced Medical Billing Services, and was co-owner of three DME companies. Khira Guillory owned KJB Medical Billing Company. All of the defendants, except for Billy Perkins who is an employee, co-owned DME companies and medical billing companies with Fleming. Hi-Tech Medical Supply is owned by Fleming and King Adams Arthur. Medical Equipment and Supply Center is owned by Fleming and James Chaney. E and R Medical Supply is owned by Fleming and E.L. Gandy. First Advantage Nursing is owned by Bose Ebhamen. Rhonda Fleming and her associates were responsible for over \$6 million in overpayments to Medicaid and Medicare.

Chaney, Perkins and Guillory pleaded guilty. Fleming, Arthur and Ebhamen were convicted by a federal jury. Fleming was sentenced to 360 months without parole and was ordered to pay jointly and severally \$445,561.46 to Medicaid and \$5,845,754.00 to Medicare. Ebhamen was sentenced to 135 months and was ordered to pay jointly and severally \$155,206.92 to Medicaid and \$1,773,970.18 to Medicare. Arthur was sentenced to 95 months in prison and 3 years probation and was ordered to pay jointly and severally \$293,354.54 to Medicaid and \$5,845,754.00 to Medicare.

Perkins was sentenced to 70 months in prison and three years probation and was

ordered to pay jointly and severally \$293,354.54 to Medicaid and \$5,845,754.00 to Medicare. Guillory was sentenced to 12 months, one day in prison and three years probation and was ordered to pay jointly and severally \$2,500,284 to Medicare.

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

CASES

Counselors: Texas

Attorney General Abbott announced on February 11 that licensed professional counselor Belinda Skloss was sentenced in state court in Houston to 180 days in jail, ten years probation, was ordered to complete 200 hours of community service, to surrender her LPC license, and to pay \$43,000 in restitution. She was also sentenced on a related charge in which she pled guilty to defrauding Blue Cross Blue Shield in a similar scheme. Skloss received over \$43,000 from Medicaid for mental health/behavioral counseling services that were allegedly not provided.

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

Dentists: Texas

Attorney General Abbott announced on January 20 that Carlos Morales-Ryan of Orthogenesis International Centre was indicted by a federal grand jury on nine counts of health care fraud. Nelia Patricia Garcia-Morales (Morales-Ryan's wife) was indicted on eight counts of health care fraud. Morales-Ryan and Garcia-Morales were paid by Medicaid for dental procedures allegedly performed by dental assistants when Morales-Ryan and Garcia-Morales were not present in their offices.

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

Drug Diversion: Texas

Attorney General Abbott announced on February 18 that licensed vocational nurse (LVN) Rachel Marlene Boyd was sentenced in state court for fraud under the Health and Safety Code in two separate cases. She was given three and five years deferred adjudication community supervision respectively. Boyd allegedly diverted resident narcotics without authorization while employed at Oak Crest Nursing Center (three years deferred) and at Gulf Pointe Plaza Nursing Home (five years deferred).

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

Durable Medical Equipment: Texas

Attorney General Abbott announced on January 6 that Jasper Ogbonna, Anthony Nnadi, Kevin Onwudiwe, Tony Ahi, and Emmanuel Gabriels were indicted on multiple counts of conspiracy to commit health care fraud, health care fraud, and aggravated identity theft. Ogbonna is the owner of Matrix Medical Equipment & Supply in Weirton, West Virginia.

Matrix submitted Medicare crossover claims that were denied by Texas Medicaid. However, the Texas Medicaid beneficiaries became victims of identity theft. This is a joint investigation with HHS-OIG.

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Attorney General Abbott announced on January 13 that durable medical equipment owner Biola Adegbuyi was indicted by a state grand jury for theft by a Medicaid provider. Adegbuyi, owner of Family Medical Equipment, allegedly billed Medicaid between October 2004 through May 2007 for incontinence care products that were not delivered. Suspected Medicaid overpayments are in excess of \$77,000.

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Attorney General Abbott announced on January 13 that durable medical equipment owner Tonye Dagogojack was indicted by a state grand jury for theft by a Medicaid provider. Dagogojack, owner of Rightcare Medical, allegedly billed Medicaid between October 2003 through June 2007 for incontinence care products that were not delivered. In addition, Dagogojack, did not report his felony conviction on his Medicaid or Medicare contract applications. Suspected Medicaid overpayments are over \$633,000.

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Attorney General Abbott announced on January 14 that Manuel DeLuna pleaded guilty in federal court to conspiracy to commit health care fraud. He and two co-defendants were charged with receiving kickbacks from a DME owner for providing beneficiary information. The DME owner then allegedly billed Medicaid for cheap substitute neoprene braces or for orthotic kits that were not delivered.

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Attorney General Abbott announced on January 15 that durable medical equipment owner Emeka Iwunze was indicted by a state grand jury for theft by a Medicaid provider. Iwunze, owner of MGA Medical Equipment in Dallas, billed Medicaid between December 2004 and June 2007 for incontinence products that allegedly were not delivered.

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Attorney General Abbott announced on January 19 that Fred Jesse Cole, Jr., was indicted on 14 counts of health care fraud. Cole, co-owner of Crusade Integrated Health Services LLC, allegedly billed Medicaid between July 2002 and December 2006 for incontinence supplies that were not delivered.

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Attorney General Abbott announced on January 20 that durable medical equipment owner Ekere Morgan Ebong was given five years deferred adjudication community supervision and was ordered to pay \$23,497 in restitution and \$433 in extradition fees to after pleading guilty in state court to theft by a government contractor. Ebong, owner of In Touch Medical Supply, Inc., received over \$32,000 in payments from Medicaid for supplies allegedly not ordered or needed.

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Attorney General Abbott announced on February 1 that durable medical equipment owner Aghaegbuna Chibuike Odelugo pleaded guilty in state court to engaging in organized criminal activity. On February 8, co-defendant durable medical equipment owner Kodigbo N. Odelugo also pleaded guilty in state court to engaging in organized criminal activity. A third defendant, manager Samuel Ezezue, was indicted February 11 by a state grand jury for engaging in organized criminal activity.

Brothers Aghaegbuna Odelugo, Kodigbo Odelugo, and Chukwuma Odelugo were indicted in March 2008 for organized criminal activity and felony theft. Kodigbo Odelugo and Aghaegbuna Odelugo operated Nakon General Corporation (NGC) and Network Advantage Corporation (NAC). Chukwuma Odelugo also operated NGC. He is believed to be residing in Nigeria.

All four billed Medicare and Medicaid for motorized wheelchairs while allegedly providing less expensive motorized scooters or no equipment at all, and using forged certificates of medical necessity (CMN).

Aghaegbuna and Kodigbo are suspected of furthering the scheme by billing for incontinent supplies allegedly not provided to recipients. This activity resulted in over \$181,000 in alleged Medicaid overpayments and \$478,000 in Medicare overpayments.

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Attorney General Abbott announced on February 12 that DME owner Mfon O. Akpan was given five years deferred adjudication community supervision and was ordered to pay \$8,700 in restitution and complete 200 hours of community service after pleading guilty in state court to theft by government contract greater than \$1,500. Akpan, owner of Ace Complete Medical Supply, Inc., billed Medicaid for incontinent and other DME supplies which were allegedly only partially delivered or never delivered. The suspected fraud amount is over \$15,000.

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Attorney General Abbott announced on February 12 that a federal jury convicted Eleazar and M. Jeanette Garcia, owners of Orthopedic Specialist DME (OSDME), and John D. Martinez of conspiracy and healthcare fraud. Martinez and his brother own Orthotics and Artificial Limbs.

The subjects allegedly submitted false claims to Medicare and Medicaid for orthotic and prosthetic goods. John and his brother are licensed orthotists who worked one day per week at OSDME. For their services, they received a percentage of the money Medicare and Medicaid paid for work by Eli Garcia. OSDME allegedly received approximately \$1 million from Medicaid, Medicare and private insurance for services not provided.

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Attorney General Abbott announced on February 16 that durable medical equipment owners Henry A. Clement and Obinna Atuma were given five years deferred adjudication community supervision, 200 community service hours each and together paid \$28,092 in restitution after pleading guilty in state court to theft greater than \$20,000 (Clement) and theft by a government contractor greater than \$20,000 (Atuma). The two owners of Mid West Durable Medical Supply, Inc., received over \$28,000 from Medicaid for incontinent supplies which were allegedly not ordered or needed.

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Attorney General Abbott announced on February 25 that Benjamin Bassey Essien pleaded guilty in federal court to conspiracy to commit health care fraud, five counts of health care fraud and two counts of aggravated identity theft. His sister, Rose Essien, is set for trial on similar charges June 1, 2010.

The Essiens owned and operated Logic World Medical, a DME company. They billed Medicaid for supplies that allegedly were not delivered or only partially delivered. The suspected Medicaid fraud overpayment is over \$115,000 and administrative overpayment is more than \$1,180,000.

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 January 25 that Maria Antonieta Cordova was placed on four years probation on the condition that she reside in a residential reentry center for the first six months, participate in a home detention program for the second six months and pay \$291,000 restitution and a \$100 special assessment.

On July 9, 2009, a federal grand jury issued an indictment charging 42 defendants with Health Care Fraud, Conspiracy to Commit Health Care Fraud and Aiding and Abetting, Causing an Act to be Done. An investigation confirmed the allegations that Cordova conspired to commit health care fraud by billing the Medi-Cal program for home health care services that were required to have been

rendered by a licensed vocational nurse. Instead, the services were provided by non-licensed personnel.

For further information contact Special Agent Supervisor Shawn T. Collins (949) 588-3883.

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Attorney General Brown announced on February 2 that Mirna Letician Aldana pleaded guilty to grand theft and was sentenced to three years probation on the condition that she serve 90 days in the Los Angeles County jail, perform 240 hours of community service and pay \$27,000 restitution to the county In-Home Supportive Services program through the Medi-Cal program.

On October 28, 2009, a criminal complaint was filed against Aldana charging her with one count of grand theft, and one count of presenting false Medi-Cal claims. Aldana, a contracted provider of In-Home Supportive Services to qualified recipients, billed the county program for services that she did not provide.

For further information contact Supervising Deputy Attorney General Susan Melton Bartholomew (818) 295-2680.

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Attorney General Brown announced on February 2 that pursuant to a plea agreement, LaRonda Burton pleaded nolo contendere to presenting false Medi-Cal/IHSS claims and was sentenced to three years probation on the condition that she pay \$966.60 in restitution to the county In-Home Supportive Services program through the Medi-Cal program.

On June 17, 2009, a two-count criminal complaint was filed, charging Burton with grand theft, and presenting false Medi-Cal/IHSS claims. Burton, a contract provider of In-Home Supportive Services to qualified recipients, billed the county program for services she did not provide.

For further information contact Deputy Attorney General Gary M. Mogil (818) 556-2928.

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Attorney General Brown announced on February 2 that pursuant to terms of a plea agreement, Gwendolyn Jackson entered a plea of nolo contendere to a misdemeanor. She was sentenced to three years probation on the condition that she pay \$1,557.50 in restitution to the county In-Home Supportive Services program through the Medi-Cal program.

On May 21, 2009, a criminal complaint was filed charging Jackson with grand theft and presenting false Medi-Cal/IHSS claims. Jackson, a contract provider of In-Home Supportive Services for qualified recipients, billed the county program for services that she did not provide after the recipient passed away.

For further information contact Deputy Attorney General Steven Smith (818) 556-2928.

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Attorney General Brown announced on February 3 that a felony complaint was filed charging Stanley Jerome Beasley and Debra Lynn Cato with conspiracy, preparation of fraudulent claims, Grand Theft of Personal Property, and Forgery. An investigation confirmed the allegations of In-Home Supportive Services (IHSS) fraud. It was determined that the defendants fraudulently billed IHSS for services not rendered.

On November 10, 2009, Beasley pleaded guilty to presenting false claims. On January 27 he was granted probation for three years on the condition that he serve 180 days in county jail, and pay \$25,000 in restitution to the Medi-Cal program and \$1,509.50 in fines and penalties to Santa Clara County.

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

Home Health Care Aides: Ohio

Attorney General Richard Cordray announced on February 5 that Deborah Evans was sentenced to five years of Community Control, and was ordered to pay restitution in the amount of \$6,582. If Evans violates Community Control, she will receive a prison term of 12 months.

On May 19, 2009, an indictment was filed charging Evans with one count of Theft, a felony of the fourth degree. On February 4, Evans pleaded guilty to one count of Theft, a felony of the fifth degree. Evans is an independent provider who billed for services not rendered.

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

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Attorney General Cordray announced on February 19 that Karen Hocker was sentenced to five years of Community Control, and ordered to pay restitution in the amount of \$64,701.26. If Hocker violates Community Control she will receive a 12 month prison term.

On August 18, 2009, an indictment was filed charging Hocker with one count of Theft by Deception, a felony of the fourth degree. On December 17, 2009, Hocker pleaded guilty to one count of Theft by Deception, a felony of the fifth degree. Hocker, an independent provider billed for services not rendered.

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

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Attorney General Cordray announced on February 26 that Ann Williams was sentenced to five years of Community Control, and ordered to pay restitution in the amount of \$5,712.51. If Williams violates Community Control, she will receive a prison term of 11 months.

On October 27, 2009, an Indictment was filed charging Williams with one count of Theft by Deception, a felony of the fourth degree. On January 13 Williams pleaded guilty to one count of Theft, a felony of the fifth degree. Williams is an independent provider who billed for services not rendered.

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

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Attorney General Cordray announced on January 6 that Danna Deyo pleaded guilty to one count of Theft, a misdemeanor of the first degree and was sentenced to two days in jail which was suspended, five years of Probation, and ordered to pay restitution in the amount of \$4,137.64. On June 16, 2009, an indictment was filed charging Deyo with one count of Theft, a felony of the fifth degree. Deyo is an independent home health aide who billed for services that were not rendered.

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

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Attorney General Cordray announced on January 6 that Kesha Frazier was sentenced to sever years in prison, and ordered to pay restitution in the amount of \$74,742.00. Frazier has 60 days of jail credit.

On September 17, 2008, an indictment was filed charging Frazier with one count of Theft, a felony of the third degree, two counts of Identity Fraud, both felonies of the third degree, one count of Identity Fraud, a felony of the second degree. The case was tried by a jury which returned a verdict October 14, 2009, finding Frazier guilty of one count of Theft, a felony of the fourth degree, and two counts of Taking the Identity of Another, both felonies of the third degree.

Frazier, stole Medicaid provider numbers of two acquaintances and used those numbers to bill the Medicaid program for home health services to family members and others.

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

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Attorney General Cordray announced on January 12 that Juanita Griffin pleaded guilty to one count of Theft, a felony of the fifth degree, and was sentenced to five years of Community Control, and ordered to pay restitution in the amount of \$8,182.32. If Griffin violates Community

Control she will receive a prison term of 11 months.

On October 27, 2009, an indictment was filed charging Griffin with one count of Theft, a felony of the fourth degree and one count of Theft, a felony of the fifth degree.

Griffin, a home health aide was involved in a kickback scheme with her mother who is a Medicaid recipient.

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Attorney General Cordray announced on January 21 that Victor Carr was sentenced to five years of Community Control, 60 hours of Community Service, and ordered to pay restitution in the amount of \$10,816.10 and court costs in the amount to be determined. If Carr violates Community Control he will receive a prison term of 11 months.

On July 21, 2009, an indictment was filed charging Carr with one count of Theft, a felony of the fourth degree and one count of Theft, a felony of the fifth degree. On December 7, 2009, Carr pleaded guilty to one count of Theft, a felony of the fifth degree.

Carr, an independent provider, was involved in a kickback scheme with recipient and billed for services not rendered.

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

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Attorney General Cordray announced on January 21 that Michael Klingensmith was sentenced to two years of Community Control, 80 hours of Community Service, and was ordered to pay restitution in the amount of \$69,299.88 and court costs in an amount to be determined. If Klingensmith violates Community Control he will receive a prison term of 12 months.

On July 21, 2009, an Indictment was filed charging Klingensmith with one count of Theft by Deception, a felony of the fourth degree. On November 30, 2009, Klingensmith pleaded guilty to one count of Theft by Deception, a felony of the fifth degree.

Klingensmith, a home health aide was involved in a kickback scheme with his mother who is a Medicaid recipient.

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

Home Health Care Aides: Tennessee

The Tennessee Bureau of Investigation announced on February 5 that Sheresa Hewlett, a home health aide, pleaded guilty to one count of Adult Exploitation Abuse and Neglect. Hewlett

was sentenced to thirty days in a workhouse to be served on weekends, one year of probation, and ordered to pay restitution in the amount of \$130.00 to the victim.

This case was opened on June 1, 2009 based upon a referral from the Tennessee Division of Intellectual Disabilities Services. It was alleged that Hewlett obtained an EBT food stamp card from the mail of a TennCare recipient in her care and sold it to another individual for personal use. Grocery store surveillance photos identified the user of the stolen card, who was later interviewed. The subject who used the stolen card admitted to having purchased the card from Hewlett. On August 6, 2009 Hewlett was indicted on one count of Willful Abuse, Neglect, and Exploitation of an Adult and one count of Fraudulent Receipt of Food Assistance over \$100.

For further information contact Special Agent Roger Turner (901) 379-3432.

Home Health Care Aides: Washington State

Attorney General Rob McKenna announced on October 8, 2009, that Paul Allen Jamison pleaded guilty to one count of Theft in the First Degree and six counts of Medicaid False Statement. He was sentenced to serve 17 months of confinement, and was ordered to pay restitution in the amount of \$5,136 to the Medicaid program, and fees and costs of \$700.

Investigator Larry Carlier completed the investigation for the Washington State MFCU. Jamison had contracted with the Medicaid program to provide in-home personal care services for a Medicaid client. In order to receive payment under this program, Jamison was to submit the number of hours of care that he provided on a monthly basis. The investigation revealed that Jamison billed for the maximum hours of services that he had not provided.

Lynn Mounsey-Longmeier, an Assistant Attorney General in the Washington State MFCU, handled the case for the prosecution.

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Attorney General McKenna announced on January 15 that Sarah N. Matovu, a former DSHS case resources manager, Swaibu Matovu, her husband, and Umar Matovu, her son, pleaded guilty to multiple counts of Theft in the First Degree and Medicaid False Statement.

Sarah Matovu pleaded guilty to two counts of Theft in the First Degree and ten counts of Medicaid False Statement and was sentenced to serve 90 days of confinement, 24 months probation and was ordered to pay \$11,301 (Joint & Several) to the Medicaid program and fees and costs of \$600.

Swaibu Matovu pleaded guilty to one count of Theft in the First Degree and eight counts of Medicaid False Statement and was sentenced to serve 90 days of electronic home monitoring, and was ordered to pay \$9,553 (Joint & Several) to the Medicaid program and fees and costs of \$600.

Umar Matovu pleaded guilty to one count of Theft in the First Degree and one count of Medicaid False Statement and was sentenced to serve 90 days of electronic home monitoring, and was ordered to pay \$1,748 (Joint & Several) to the Medicaid program and fees and costs of \$600.

Investigator Darrell Noble completed the investigation for the Washington State MFCU. Sarah Matovu, authorized payments to both her husband and her son as providers for Medicaid clients when they were not rendering services. Sarah Matovu also manipulated clients' care assessments to inflate the number of care hours for which her husband and son could receive payment. Sarah Matovu admitted that during one month for which she and her husband had billed the state, they were on an extended trip to Africa. The nine victims had never received services from or heard the names Swaibu Matovu or Umar Matovu. In at least one instance, a family had contacted Sarah Matovu to inquire about additional hours of care and was given a "definite no," but for the same client, Sarah Matovu authorized additional hours for payment to her husband.

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

For further information on these two cases contact Aileen Miller, Deputy Director (360) 586-8888.

Hospice Care: California

Attorney General Brown announced on February 2 that Milagros and Mark Delmendo, Kristina DeGuzman and Nolan Joes pleaded guilty and were sentenced. Milagros Delmendo pleaded to grand theft, presenting false Medi-Cal claims and making fraudulent claims and was sentenced to three years in state prison. The prison sentence was suspended and he was placed on 36 months probation on the condition that he complete 365 days in home detention and pay \$1,000,000 in restitution, \$500,000 to the Medicare program and \$500,000 to the Medi-Cal program.

An investigation confirmed that the defendants participated in a scheme to defraud the Medi-Cal and Medicare programs by billing for services not rendered and for billing for patients whose treatment was not medically necessary.

Mark Delmendo pleaded to paying and receiving unlawful remuneration in return for referring and transporting Medi-Cal beneficiaries and was sentenced to 36 months probation on the condition he pay \$10,000 restitution to the Medi-Cal program jointly and severally with his co-defendants.

Kristina DeGuzman pleaded to paying and receiving unlawful remuneration in return for referring and transporting Medi-Cal beneficiaries and was sentenced to 36 months probation on the condition he pay \$10,000 restitution to the Medi-Cal program jointly and severally with her co-defendants.

Nolan Jones pleaded to presenting false Medi-Cal claims and was sentenced to 12 months probation on the condition he pay \$1,500 restitution to the Medi-Cal program.

For further information contact Supervising Deputy Attorney General Susan Melton Bartholomew (818) 295-2680.

Medical Clinics: California

Attorney General Brown announced on February 5 that Juan Van Putten was sentenced to three years probation on the condition that he serve 180 days in the Los Angeles County jail and pay in \$250,000 restitution to the Medi-Cal program.

An investigation confirmed that Van Putten engaged in a scheme to defraud the Medi-Cal program by submitting fraudulent claims for services not rendered or medically necessary.

For further information contact Supervising Deputy Attorney General Susan Melton Bartholomew (818) 295-2680.

Nurses: Ohio

Attorney General Cordray announced on February 2 that Aishia McGee pleaded guilty to one count of Theft, a felony of the fifth degree and was sentenced to three years Community Control, and ordered to pay restitution in the amount of \$5,937.80. If McGee violates Community Control she will receive a prison term of eight months.

On August 18, 2009, an indictment was filed charging McGee with one count of Theft, a felony of the fourth degree. McGee, an LPN, billed for nursing services that were not rendered.

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Attorney General Cordray announced on February 12 that Kathie Guitard was sentenced to three years Community Control, and ordered to pay restitution in the amount of \$5,676. If Guitard violates Community Control she will receive a prison term of ten months.

On June 16, 2009, an Indictment was filed charging Kathie Guitard with one count of Theft, a felony of the fourth degree. On December 7, 2009, Guitard pleaded guilty to one count of Theft, a felony of the fifth degree. Guitard, a LPN, for Cambridge Home Health Care billed for services not rendered.

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

Nurses: Texas

Attorney General Abbott announced on January 27 that licensed vocational nurse Sylvia Smith was found guilty by a federal jury on six counts of healthcare fraud and one count of conspiracy. Smith allegedly recruited patients for Trucare Medical Equipment Services, a durable medical equipment company which allegedly delivered medically unnecessary medical supplies. For some beneficiaries, no supplies were delivered while others got only a fraction of the enteral nutrition that was claimed. None of the enteral nutrition feeding supply kits billed for were delivered. Trucare Medical Equipment Services owner Noel Jhagroo pleaded guilty to conspiracy to commit health care fraud. This case was worked by the U.S. Department of Justice Houston Healthcare Fraud Strike Force and was jointly investigated with the FBI, HHS-OIG, and DEA.

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

Nursing Assistants: California

Attorney General Brown announced on February 23 that Maria Olmedo pleaded guilty and was sentenced to 12 months probation and ten days of community service.

On October 14, 2009, a three count criminal complaint was filed against Olmedo charging her with using false government documents. The investigation revealed that she obtained a job as a certified nurse's assistant in a convalescent hospital with a false identification card.

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

Nursing Homes: California

Attorney General Brown announced on January 13 that a civil complaint was filed against Healthcare Management Services LLC and the eight skilled nursing facilities it manages. The defendants are required to improve quality of care through various requirements and prohibitions in their eight skilled nursing facilities and management company.

On January 14, pursuant to the final judgment, the defendants are required to pay civil penalties in the sum of \$175,000 and reimburse the MFCU's legal costs of \$175,000.

For further information contact Deputy Attorney General Claude Vanderwold (916) 274-2905.

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Attorney General Brown announced on February 8 that Mary Louise Wilson was sentenced to 19 years, four months in state prison with custody credits of 198 days. The judge advised that he will recommend to the Department of Corrections that Wilson be evaluated for psychiatric placement. No restitution was ordered nor sought.

On August 18, 2009, a felony complaint was filed in the San Diego Superior Court charging Wilson with two counts of arson. Wilson set a fire endangering the other residents.

For further information contact Deputy Attorney General Hardy R. Gold (619) 688-6165.

Nursing Homes: Texas

Attorney General Abbott announced on January 21 that Roberta Lois Sinnema pleaded guilty in state court to securing execution of a document by deception. Sinnema allegedly embezzled over \$66,000 from a long-term healthcare facility by awarding herself unauthorized bonuses, which were included in Medicaid and Medicare cost reports.

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Attorney General Abbott announced on February 18 that Roberta Lois Beech was given five years deferred adjudication community supervision and was ordered to pay \$4,000 restitution and a \$2,000 fine for securing execution of a document by deception. Beech pleaded guilty in state court on January 21, for awarding herself unauthorized bonuses from a long-term healthcare facility, which were included in Medicaid and Medicare cost reports.

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

Pain Clinics: Texas

Attorney General Abbott announced on November 30 that Donald Holmes was sentenced in federal court to 18 months confinement and 24 months supervised release for conspiracy to distribute a controlled substance. He admitted to illegally dispensing approximately 90,000 units of Hydrocodone. Holmes and a physician used Global Logistics Consulting to set up pain clinics. These clinics saw patients on a cash-only basis. Patients would receive pain cocktails without a valid medical examination. Some patients then used the vendor drug program to obtain their prescriptions causing a loss to the Medicaid program.

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

Patient Trust Funds: Arizona

Attorney General Terry Goddard announced on January 20 that Between July 7, 2006, and October 30, 2006, Alma Joy stole over \$40,000 from a client. The client is a mentally and physically disabled adult, and Joy was employed as his home health caregiver during this time period.

This theft occurred following the client's receipt of \$48,000 from the Social Security Administration (SSA) in July, 2006. Joy apparently intercepted a letter from SSA notifying him of a status change (a change due to the death of his mother as well as some back payments from SSA), and she never notified the Division of Developmental Disabilities or her supervisors of the SSA payment. Joy then opened a P.O. Box and two Bank of America accounts in the client's name, and she deposited the money into those accounts. Joy withdrew money from these accounts, used the P.O. Box in order to hide the statements issued from the bank, and spent the money on her own personal expenses. Her withdrawals ranged from simple debit transactions to cash withdrawals, and included one withdrawal of \$20,000 in cash.

The case agent interviewed Joy on January 22, 2009. Joy confessed that she opened the accounts and P.O. Box, had made the withdrawals, and spent the money on personal items. She said the client was with her at the time she opened the accounts, but she also knew that he was mentally disabled and could not read or write.

On April 14, 2009, Joy was indicted by the Arizona State Grand Jury and charged with one count Theft, class 2 felony; one count Fraudulent Schemes and Artifices, a class 2 felony offense; and

one count of Money Laundering, a class 3 felony offense.

On September 18, 2009, Joy was sentenced to 120 days in jail, four years standard probation, ordered to pay \$48,042.16 in restitution to the victim, and ordered to pay \$5,000 in investigated costs to the Medicaid Fraud Control Unit.

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

Patient Trust Funds: Missouri

Attorney General Chris Koster announced on January 4 that criminal charges have been filed against a woman who allegedly forged checks in order to steal money from the resident trust fund account of the nursing home where she was the bookkeeper. Connie Jean Beckerman was charged with eight counts of forgery and one count of stealing by deceit. Koster said the victims were Medicaid recipients residing at Perry Oaks Manor, which is now under different ownership.

Beckerman admitted taking \$5,000 from the fund to buy lottery tickets. The Medicaid Fraud Control Unit investigated the case and found evidence that between September 2006 and October 15, 2007, Beckerman misappropriated more than \$14,500 by forging the nursing home administrator's signature on checks written for cash and by failing to deposit cash received from residents in the resident account.

For further information contact Joe Bindbeutel, Director (573) 751-7192.

Patient Trust Funds: South Carolina

Attorney General Henry McMaster announced on February 17 that Seberena Moragne was convicted of eight counts of Breach of Trust with Fraudulent Intent. On or about April 1 through July 30, 1009, Moragne while employed as a house manager by the South Carolina Department of Disabilities and Special Needs received in trust personal property valued at less than \$1,000 and appropriated the property to her own use with the fraudulent intent to deprive the owner of said property.

The Honorable Ronald W. Whitman sentenced Moragne to a fine of \$1092.50 and 30 days suspended to pay \$3000 at a rate of \$100 weekly for 30 weeks.

For further information contact Assistant Deputy Attorney General Charles W. Gambrell, Jr., Senior Assistant Attorney General William K. Moore or Investigator David Addison (803) 734-3660.

Patient Trust Funds: Tennessee

The Tennessee Bureau of Investigation announced on December 9 that Zanira A. Dudley, Program Coordinator for New Horizons, pleaded guilty to two counts of Elder Abuse and two counts of Criminal Simulation. Dudley was granted a four year suspended sentence, placed on probation for a period of four years, and ordered to pay restitution in the amount of \$2,473.40 to New Horizons Corporation. Additionally, Dudley has been referred to the abuse registry maintained by the Tennessee Department of Health.

This case was opened on October 28, 2008 based upon a referral from the Tennessee Division of Intellectual Disabilities Services. It was alleged that Zanira A. Dudley stole \$3,100 from clients of New Horizons. As a program coordinator, it was Dudley's responsibility to purchase personal items for the clients of New Horizons. In order to obtain access to the clients' funds, Dudley was required to present receipts for purchases on behalf of the clients to the New Horizons finance director. During the period of the alleged activity, Dudley produced receipts for clothing, furniture, an I-Pod, and YMCA memberships, among other items. However, an inspection of the clients' residences and other records revealed that these items were never given to the clients. On July 31, 2009, Dudley was indicted on four counts of Adult Abuse, one count of Theft, one count of Forgery, and three counts of Criminal Simulation.

For further information contact Special Agent Ramona Smith (615) 744-4229.

Patient Trust Funds: Texas

Attorney General Abbott announced on January 12 that Zulema Garcia was indicted by a state grand jury for misapplication of fiduciary property. Between September 2006 and February 2009, Garcia allegedly spent her mother's Social Security funds, which should have been used to pay for her nursing care. The victim was living in a nursing home at the time of the alleged offense.

* * * *

Attorney General Abbott announced on January 12 that Debbie Putnam-Trammel was sentenced in state court to five years probation and was ordered to pay \$34,595.62 restitution and complete 300 hours of community service after pleading guilty to misapplication of fiduciary funds. Putnam-Trammel was the owner/manager of The Putnam Home. Before closing in 2007, it was an assisted living facility that provided services under the community care for the aged and disabled program. Putnam-Trammel is alleged to have mishandled 32 trust fund accounts between September 2006 and November 2007, causing an estimated trust fund shortage of \$36,861.07.

* * * *

Attorney General Abbott announced on January 13 that Amber Christoffersen-Rogers and William Dale Rogers, Jr., were indicted by a state grand jury for theft of property. Former Collinsville Care Center administrator Christoffersen and former business office manager Rogers allegedly misappropriated money from the resident trust and petty cash funds.

* * * *

Attorney General Abbott announced on February 22 that Brittanie Ryan Patterson-Barrett was given four years deferred adjudication community supervision, economic crime stipulations, and was ordered to pay \$2,962 in restitution after pleading guilty in state court to theft charges. Patterson was also ordered to participate in community service. The economic crime stipulations preclude Patterson from being employed by or holding a position of financial responsibility in any nursing facilities that receive Medicaid and/or Medicare funding. In addition, she is barred from working in any business that services the elderly. Patterson reimbursed \$2,155.55 to one of the victims prior to the hearing.

Patterson-Barrett, the former business manager of Castle Manor Nursing Home, was indicted in December 2008 for misapplication of fiduciary property. From March 5, 2006, through April 9, 2007, Patterson allegedly misappropriated over \$5,000 from the residential trust fund of nine residents, many of whom were severely mentally challenged.

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

Physicians: Ohio

Attorney General Cordray announced on February 5 that Hanny Iskander was sentenced to 42 months in prison, three years of supervised release, ordered to pay a special assessment of \$600, and ordered to pay restitution in the amount of \$6,962,025 (Medicaid will receive \$2,873,056.92). After Iskander serves his prison term he will be deported to Egypt.

On October 7, 2008, an indictment was filed charging Iskander with one count of Destruction, Alteration, or Falsification of Records in a Federal Investigation, and one count of Obstruction of Criminal Investigations of Health Care Offenses. On January 29, 2009, a Superseding Indictment was filed charging Iskander with one count of Destruction, Alteration, or Falsification of Records in a Federal Investigation, one count of Obstruction of Criminal Investigations of Health Care Offenses, one count of Alteration, Destruction, Mutilation, and Concealment of Records, one count of Concealment of Records, one count of Alteration, Destruction, and Mutilation of Records, and one count of Conspiracy to Obstruct Justice. On October 2, 2009, Iskander was convicted by a jury and found guilty to one count of Health Care Fraud, one count of Destruction or Alteration of Records in Federal Investigation, one count of Obstruction of Criminal Health Care Investigation, two counts of Alteration, Destruction, Mutilation, and Concealment of Records, and one count of Conspiracy to Obstruct Justice.

Iskander, was an M.D. who billed for services not rendered and medically unnecessary services. To cover up, he concealed and destroyed medical records.

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

* * * *

Attorney General Cordray announced on February 19 that a complaint was filed charging Muhammad Akhtar with one count of Theft by Deception, a Misdemeanor of the first degree and Akhtar pleaded guilty to one count of Theft by Deception, a Misdemeanor of the first degree (M1) and was sentenced and ordered to pay a fine of \$250 and restitution in the amount of \$7,829.65 on that same day.

Akhtar, is a doctor who billed for services not rendered and upcoded for billings of Medicaid recipients.

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

Physicians: Tennessee

The Tennessee Bureau of Investigation announced on October 30 that Dr. James Brendan Durkin, a medical doctor, was granted pre-trial diversion in the Criminal Court for the Tenth Judicial District of Tennessee for a period of two years.

This case was opened on January 15, 2009 based upon a referral from the Etowah Police Department. It was alleged that Dr. Durkin, a physician, was overprescribing pain medications for a patient with whom he was having a personal relationship. Additionally, it was alleged that Durkin was writing Oxycontin prescriptions for the child of this patient. Initially, Durkin denied the relationship and admitted that the prescription was intended for the patient but was inadvertently written for the child instead. On April 21st, 2009, Dr. Durkin was indicted on fourteen counts of prescription fraud. Durkin later entered into a memorandum of understanding admitting to the personal relationship with the patient and that he used "poor judgment" in overprescribing pain medications for that patient.

For further information contact Special Agent Kim Harmon (423) 634-3044 x 119.

* * * *

The Tennessee Bureau of Investigation's Medicaid Fraud Control Unit announced on December 7 that Dr. Delvin E Littell, a medical doctor, pleaded guilty to TennCare fraud and reckless endangerment. Dr. Littell was granted diversion for a period of two years and was ordered to pay fines in the amount of \$4,450. Additionally, the State of Tennessee Board of Medical Examiners disciplined Dr. Littell for unprofessional conduct, for which he surrendered his medical license.

This case was opened on July 29, 2005 based upon a referral from the District Attorney General. It was alleged that Dr. Littell, practicing at the Oliver Springs Walk-In Clinic dispensed Oxycontin and other narcotics and that TennCare patients paid in cash for the prescribed narcotics. Patients stood in long lines and some had traveled from as far as Kentucky and Virginia to see Dr. Littell. It was further alleged that Dr. Littell would write prescriptions to certain patients without an office visit, often dispensing the prescription from the back door of the medical practice and circumventing the office staff. A search warrant of the premises was executed and Dr. Littell was interviewed, during which he advised investigators that he had written prescriptions to patients without medical examinations and that he had not recorded the information in the patients' medical chart. On February 10, 2009, Dr. Delvin Littell was indicted on one count of TennCare fraud and one count of misdemeanor reckless endangerment.

For further information contact Special Agent T.J. Battle (865) 549-7852.

Physicians: Texas

Attorney General Abbott announced on October 19 that Umawa Imo, owner of City Nursing Services of Texas was re-indicted in a superseding indictment that also indicted Thaddeus Hume, MD, and employees Joann M. White, Kenneth Ibezim Anokam and Godwin Nzeocha. Imo was originally indicted in July 2009 for health care fraud, conspiracy, mail fraud, and money laundering charges. He was arrested and remains in custody as a flight risk. The others were all

charged with conspiracy, health care fraud, money laundering, and wire fraud by a federal grand jury. City Nursing billed Medicare and Medicaid for physical therapy services that allegedly were not rendered. Physician Thaddeus Hume and others are alleged to have written fraudulent orders for physical therapy. Godwin Nzeocha was employed as a physical therapist. This case is being worked jointly with HHS-OIG, FBI, and ICE.

* * * *

Attorney General Abbott announced on January 13 that a federal grand jury indicted Harold Wagner, DO, for illegal remuneration. Wagner was allegedly paid to authorize certificates of medical necessity that resulted in the purchase and payment by Medicaid and Medicare payment for power wheelchairs. This case is a joint investigation with the FBI and HHS-OIG.

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

Psychotherapists: Texas

Attorney General Abbott announced on February 24 that Edward Alexander Birts was indicted on 17 counts to include conspiracy, health care fraud and identity theft. Birts, owner of Courage to Change, a physicians' group, billed Medicaid and Medicare for psychotherapy counseling and physical therapy services. Birts, who allegedly obtained a PhD from a diploma mill, listed either himself or another doctor as the performing provider on the counseling and therapy even though Birts is not qualified to perform such service. The other doctors was unaware his provider number was being used. This is a joint investigation with HHS-OIG.

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

Resident Abuse: California

Attorney General Brown announced on February 8 that James Mahloch pleaded guilty to battery and was sentenced to 18 months probation on the condition that he serve seven days in jail, pay county fines and penalties and not work with the elderly or in a medical facility.

A resident claimed that a male staff member "wrapped" him on his head with his knuckles. An investigation confirmed the allegations.

For further information contact Deputy Attorney General Daniel Kossick (916) 274-2950.

* * * *

Attorney General Brown announced on February 9 that Rudy Quinones was sentenced to 365 days in jail, ordered to pay \$2,070 in restitution, to pay \$3,344 in fines, submit to a 4th Amendment waiver, prevented from working as a caregiver, have no contact with the victims,

and to abide by all other terms and conditions of probation for a three year period.

On August 20, 2009, a two-count felony complaint was filed charging the defendant with committing a lewd act on a dependent adult, in violation of Penal Code section 288(c)(2) and financial elder abuse. An investigation revealed that Rudy Quinones had sexual relations with a twenty-eight year old developmentally disabled adult, who was his independent living skills client.

For further information contact Deputy Attorney General David B. Songco (619) 688-6633.

* * * *

Attorney General Brown announced on February 16 that Keshanna Marie Perkins pleaded guilty and was sentenced to 20 days custody in county jail, ordered to pay a fine of \$380 to the county, enroll in anger management, and have no direct or indirect contact with the victim.

A resident was having a behavior tantrum outside and began to strip off her clothes. While staff attempted to get the resident inside, the resident hit staff member Keshanna Perkins in the stomach. Perkins responded by hitting the resident on the back.

For further information contact Deputy Attorney General David B. Songco (619) 688-6633.

Resident Abuse: District of Columbia

The District of Columbia Medicaid Fraud Control Unit announced on January 4 that a former certified nursing assistant (CNA) at Washington Nursing Facility (WNF), pleaded guilty and was sentenced for abuse of a vulnerable adult.

On December 30, 2009, Stella McFadden was convicted of one count of Criminal Abuse of a Vulnerable Adult in the Superior Court of the District of Columbia before the Honorable Florence Pan. Judge Pan sentenced McFadden to 180 days in prison, with all but 30 days suspended, and two years of supervised probation.

McFadden was also ordered to undergo anger management counseling and perform 40 hours of community service. Judge Pan imposed an order prohibiting McFadden from working with vulnerable adults for the duration of the probation period and ordered her to pay \$100 to the Victims of Violent Crime Compensation Act fund.

According to the government's evidence, on October 11, 2009, McFadden was employed as a CNA with responsibility for caring for residents of the nursing facility. A nurse witnessed McFadden strike a 68-year-old resident multiple times on the face and chest with a closed fist.

For further information contact Health Investigator Meghan Strickland (202) 727-8008.

Resident Abuse: Ohio

Attorney General Cordray announced on February 3 that Kimberly Crank pleaded guilty to one count of Patient Endangerment, a Misdemeanor of the first degree and was sentenced to 180 days in Jail- and could avoid 80 days by doing 100 hours of Community Service within six months, 90 days were suspended with the remaining ten days being served straight time. Also, she received two years probation and ordered to pay a fine of \$500.

On December 7, 2009, an indictment was filed charging Crank with one count of Patient Abuse, a felony of the fourth degree and one count of Patient Endangerment, a Misdemeanor of the first degree.

Crank, an aide pushed a nursing home resident into a door, injuring the resident's eye and lip.

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

Resident Abuse: Tennessee

The Tennessee Bureau of Investigation announced on February 18 that Foday Kamara, a home health aide, pleaded guilty to one count of Adult Abuse. Kamara was given a suspended sentence of 11 months and 29 days and placed on probation concurrently. Additionally, Kamara has been referred to the abuse registry maintained by the Tennessee Department of Health.

This case was opened on September 23, 2009 based upon a referral from the Tennessee Department of Human Services, Adult Protective Services. It was alleged that Kamara, a caregiver employed with Preferred Alternatives, Inc., abused a service recipient in his care. The victim indicated that Kamara bit him on the stomach. A physician verified that the bite marks on the victim's stomach were that of a human, and photographs of the bite marks were taken. Kamara's dental x-rays and the photographs of the bite marks were examined by a forensic dentist, who determined that Kamara's teeth matched the impression on the victim's stomach. On December 15, 2009 Foday Kamara was indicted on one count of Adult Abuse.

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

Resident Abuse: Texas

Attorney General Abbott announced on February 3 that Francis Uzoh was indicted by a state grand jury for injury to a disabled individual. In September 2006, an employee of Gentle Hands Home Care saw assistant manager Uzoh allegedly assault a client resulting in broken arm.

* * * *

Attorney General Abbott announced on February 12 that Carl Waylon Hudspeth was sentenced in state court to ten years in prison for sexual assault and indecency with a child by

contact. Hudspeth was charged with sexually assaulting a 56-year-old disabled female resident while he was employed at the Crestview Manor Nursing and Rehabilitation Center.

* * * *

Attorney General Abbott announced on February 16 that Mercedes Garcia Randolph was indicted by a state grand jury for criminal negligence. While employed with Living Resources, a community-based service provider, Randolph allegedly neglected a resident by leaving another patient's pills within reach of the victim who is blind. The victim took the wrong pills and was taken to the emergency room for treatment. Randolph did not report the incident.

* * * *

Attorney General Abbott announced on February 18 that Jose Lance Gutierrez was indicted by a state grand jury for injury to a disabled individual. Gutierrez, while employed with Hill Resources, allegedly placed an empty CO2 pellet gun against three residents' chests and discharged the weapon.

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

Resident Neglect: Texas

Attorney General Abbott announced on January 13 that licensed vocational nurse Sherry Ilene Wiseman was given two years deferred adjudication community supervision, and ordered to serve 160 hours of community service and pay a \$300 fine after pleading guilty in state court to injury to the elderly. 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.

CASE UPDATES

Physicians: Texas

Attorney General Abbott announced on January 26 that Raul Torres was sentenced in federal court to 12 months plus one day incarceration and two years supervised after released. Torres pleaded guilty on November 3, 2009, to one count of the anti-kickback statute. (*See: Medicaid Fraud Report, September/October 2009, p. 20-21 and November/December 2009, p. 18-19*).

Torres was a marketer for Fabian Aurignac, MD. Torres allegedly paid Martha Alaniz on behalf of Aurignac for access to adult day care clients to obtain personal information to fraudulently bill Medicaid for cardiac services. Alaniz owned La Familia Adult Day Care Center. She pleaded guilty to one count of the anti kickback statute and was sentenced in

September 2009 to two years probation with four months of home confinement.

Dr. Aurignac pleaded guilty in May 2009 to one count of health care fraud and agreed to reimburse the government \$1,157,000. He was sentenced in August 2009 to four years and nine months in the federal penitentiary and was fined \$20,000.

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

Podiatrists: Texas

Attorney General Abbott announced on January 27 that podiatrist Franklin Beltre, DPM, pleaded guilty in federal court to health care fraud. Beltre and Manuela K. Alana were indicted in September 2009 on eight counts of health care fraud. On December 21, 2009, Alana pleaded guilty to knowingly and willfully executing and attempting to execute a scheme to defraud a health care program. (*See: Medicaid Fraud Report, September/October 2009, p. 16*) While Beltre worked and lived in Houston, Alana, an unlicensed podiatrist, allegedly provided medical services to patients at Beltre's office in San Juan, Texas. While Beltre was in Houston, he billed Medicaid for services rendered by Alana. The suspected fraud amount is over \$466,800.

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

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