FILED IN OPEN COURT U.S.D.C. Atlanta

FER 1 7 2015

JAMES N. HATTEN, Clerk

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA ATLANTA DIVISION

UNITED STATES OF AMERICA

v.

DAPHNE MARIA PATTERSON

Criminal Indictment

No. 1:15-CR-049

THE GRAND JURY CHARGES THAT:

Counts One through Twenty

Health Care Fraud (18 U.S.C. § 1347)

1. Beginning in or about May 2013 and continuing through in or about September 2014, in the Northern District of Georgia and elsewhere, the Defendant, DAPHNE MARIA PATTERSON, a registered nurse, did knowingly and willfully execute and attempt to execute a scheme and artifice to defraud and to obtain, by means of materially false or fraudulent pretenses, representations and promises, money and property owned by and under the control of health care benefit programs, as defined in Title 18, United States Code, Section 24(b), in connection with the delivery of and payment for health care benefits, items and services, as set forth below.

Background

At all times relevant to this Indictment:

2. United Healthcare Services, Inc. ("United"), Humana Insurance Company ("Humana"), Blue Cross Blue Shield of Georgia ("BCBS"), Aetna Health, Inc.,

("Aetna") and Cigna Corporation ("Cigna"), (collectively, the "health care benefit programs") are private plans and contracts, affecting commerce, under which medical benefits, items and services are provided to individuals. Individuals who receive benefits from the health care benefit programs are referred to as "beneficiaries."

- 3. Health care providers that provide services to beneficiaries are able to apply for and obtain "provider numbers" from the health care benefit programs. A health care provider who is issued a provider number is able to file claims with the health care benefit programs to obtain reimbursement for goods or services provided to beneficiaries.
- 4. Payments under the health care benefit programs are often made directly to a provider of the goods or services, rather than to the beneficiary. This occurs when the provider accepts assignment of the right to payment from beneficiary. In that case, the provider submits the claim to the health care benefit program for payment, either directly or through a billing company.
- 5. After obtaining a provider number, a provider then submits or causes the submission of claims to an entity that processes those claims for the health care benefit program. To submit a claim, the provider typically has to provide information identifying the date of services rendered, the specific services provided, which are identified by a Current Procedural Terminology (CPT) code, and the identity of the medical provider who performed the services. Claims are typically submitted in electronic form and transferred via interstate wire.

- 6. CPT codes 95165, 95004, 83516, 86003, and 86160 are used for various allergy tests and treatments.
- 7. Defendant DAPHNE PATTERSON is a licensed nurse practitioner. From in or about May 2013 through in or about September 2013, PATTERSON was employed on a part-time basis as an independent contractor nurse practitioner with Family Medical Center (FMC), a general medical practice located in Lawrenceville, Georgia. PATTERSON's responsibilities included providing nutritional consulting, taking measurements and vital signs, and conducting examinations of the patients.
- 8. Healthier U 4 Ever Complete Wellness Center LLC is a Georgia limited liability company registered to DAPHNE PATTERSON in or about April 2012. PATTERSON had signatory authority over an account ending in 9232 at PNC bank and an account ending in 8334 at Wells Fargo Bank.

Description of the Scheme

- 9. From May 2013 through September 2013, PATTERSON worked as an independent contractor nurse practitioner at FMC, where she was paid on an hourly basis and was instructed not to bill any health care benefit programs for services that she rendered to patients at FMC. Instead, health care benefit programs were billed for services rendered to beneficiaries by FMC under a provider number assigned to FMC or its doctors.
- 10. Beginning no later than May 2013, PATTERSON began using personal identifying information from FMC patients and their family members who were United beneficiaries to file claims for reimbursement from United on the basis of

services she had purportedly rendered to United beneficiaries. In fact,
PATTERSON had not rendered the services that she was billing for, and in some
instances, had never even met the patient for whom she claimed to have
provided services. In most instances, PATTERSON submitted claims for services
rendered on dates when the beneficiaries had not visited FMC at all.

- 11. Primarily, PATTERSON submitted claims for reimbursement to United for two types of allergy tests, represented by CPT codes 83516 and 86003, claiming that she had provided those services to various FMC patients and their family members. In fact, PATTERSON had not provided those services.
- 12. After leaving her employment with FMC, PATTERSON began to submit claims to the health care benefit programs on behalf of patients who visited the Healthier U 4 Ever Wellness Center office in Stone Mountain, Georgia, for various allergy tests and treatments. In fact, she had not administered the allergy tests or treatments to the beneficiaries.
- 13. During the period of the scheme, PATTERSON electronically submitted claims to the health care benefit programs seeking reimbursement on the basis of her false and fraudulent representations that services had been rendered to their beneficiaries. PATTERSON sought reimbursement for at least approximately \$2.2 million for the various allergy tests and treatments that had not been provided to the health care benefit program beneficiaries. The amount of funds that the health care benefit programs agreed to pay on the basis of PATTERSON's false and fraudulent representations were then electronically transferred to either the PNC bank account ending in 9232 or the Wells Fargo account ending in 8334, at

PATTERSON's direction. In total, PATTERSON received more than \$1 million from the health care benefit programs as a result of the fraudulent claims.

Execution of the Scheme

14. On or about the dates set forth below, within the Northern District of Georgia and elsewhere, Defendant DAPHNE MARIA PATTERSON knowingly and willfully executed and attempted to execute the above-described scheme and artifice to defraud health care benefit programs, as defined in Title 18, United States Code, Section 24(b), affecting interstate commerce, and to obtain money from health care benefit programs by means of materially false and fraudulent pretenses, representations, and promises; that is, by submitting a claim to the health care benefit program listed below seeking payment for health care services by falsely representing that the beneficiary listed below had received the services represented by the CPT code listed below:

| Count | Date of Claim (On or about) | Beneficiary | CPT code | Health Care Benefit Program |
|-------|--------------------------------|-------------|----------|-----------------------------------|
| 1 | 6/26/2013 | T.W. | 83516 | United |
| 2 | 7/9/2013 | L.G. | 83516 | United |
| 3 | 7/26/2013 | D.G. | 83516 | United |
| 4 | 7/28/2013 | O.G. | 83516 | United |
| 5 | 8/2/2013 | V.S. | 86003 | United |
| 6 | 8/19/2013 | M.T. | 86003 | United |
| 7 | 8/19/2013 | M.Y. | 83516 | United |
| 8 | 8/30/2013 | S.H. | 86003 | United |
| 9 | 8/30/2013 | A.H. | 83516 | United |
| 10 | 10/7/2013 | J.E. | 86003 | United |
| 11 | 10/7/2013 | J.C. | 86003 | United |
| 12 | 10/7/2013 | C.E. | 86003 | United |

| 13 | 5/5/2014 | S.G. | 86160 | Aetna |
|----|-----------|--------|-------|--------|
| 14 | 6/4/2014 | B.W. | 95165 | Humana |
| 15 | 6/27/2014 | B.W.H. | 95165 | Humana |
| 16 | 9/18/2014 | D.H. | 95165 | Aetna |
| 17 | 9/19/2014 | V.G. | 95165 | BCBS |
| 18 | 9/19/2014 | R.B.J. | 83516 | BCBS |
| 19 | 9/19/2014 | E.H. | 95004 | BCBS |
| 20 | 9/19/2014 | M.U. | 95165 | BCBS |

All in violation of Title 18, United States Code, Section 1347.

Counts Twenty-One through Twenty-Five Aggravated Identity Theft (18 U.S.C. § 1028A)

15. The factual allegations contained in paragraphs 2 through 13 of this Indictment are realleged and incorporated herein as if copied here verbatim.

16. On or about the dates set forth below, in the Northern District of Georgia, Defendant DAPHNE MARIA PATTERSON, did knowingly transfer, possess and use, without lawful authority, the means of identification of the person set forth below during and in relation to a felony violation enumerated in 18 U.S.C. § 1028A(c), to wit, health care fraud, in violation of Title 18, United States Code, Section 1347, as set forth above, knowing that the means of identification belonged to another actual person:

| Count | Date of Claim (on or about) | Means of Identification |
|-------|--------------------------------|-------------------------|
| 21 | 6/26/2013 | T.W. |
| 22 | 7/9/2013 | L.G. |
| 23 | 8/19/2013 | M.Y. |
| 24 | 8/30/2013 | A.H. |

| 25 10/7/2013 | Γ |
|---------------------|----------|
|---------------------|----------|

All in violation of Title 18, United States Code, Section 1028A(a)(1).

Forfeiture Provision

Upon conviction of one or more of the offenses alleged in this Indictment, Defendant DAPHNE MARIA PATTERSON shall forfeit to the United States all property, real and personal, which constitutes or is derived from proceeds traceable to such violations, pursuant to Title 18, United States Code, Section 981(a)(1)(C) and Title 28, United States Code, Section 2461(c), including but not limited to the following:

- a. a money judgment representing the amount of proceeds obtained as a result of said offenses;
- b. Up to \$215,830 from the Wells Fargo Bank account held in the name of Healthier U 4 Ever Complete Wellness Center, LLC and ending in 8334;
- c. Up to \$17,300.00 from the Wells Fargo Bank account held in the name of Healthier U 4 Ever Complete Wellness Center, LLC ending in -7237;
- d. Up to \$40,164.19 from the Wells Fargo Bank account held in the name of DAPHNE PATTERSON and ending in -1237;
- e. One Carti Roads Chrono S/S purchased on October 10, 2013 by Daphne Patterson from Forever Diamonds for \$7,500.00;
- f. One 1.5 CTW SS MOP LDS DATE and One .92 CTW RDS 18 KW HALO purchased on October 11, 2013 by Daphne Patterson from Forever Diamonds for \$7,200.00;

- g. One Cartier Tan Francaise Mid Size Quartz Watch purchased July 13, 2013 by Daphne Patterson from IceBox Diamonds & Watches for \$3,692.57;
- h. One Lady Rolex Datejust Two-Tone 18 and SS, Serial P810931, and one pink/black Shamballa bead bracelet purchased on October 3, 2013 by Daphne Patterson from IceBox Diamonds & Watches for \$3,794.31;
- i. One Gucci 101M Chronoscope 1.50ctw Comm Clean Stainless Quartz
 Watch purchased on October 11, 2013 by Daphne Patterson from IceBox
 Diamonds & Watches for \$2,095.19; and
- j. One Cartier Roadster Mid Breast Cancer Edition purchased on December 20, 2013 by Daphne Patterson from IceBox Diamonds & Watches for \$2,985.66.

If, as a result of any act or omission of the defendant, any property subject to forfeiture:

- a. cannot be located upon the exercise of due diligence;
- b. has been transferred or sold to, or deposited with, a third person;
- c. has been placed beyond the jurisdiction of the Court;
- d. has been substantially diminished in value; or
- e. has been commingled with other property which cannot be subdivided without difficulty;

the United States intends, pursuant to Title 21, United States Code, Section 853(p) as incorporated by Title 28, United States Code, Section 2461, to seek forfeiture of any other property of said defendant up to the value of the forfeitable property.

BILL

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