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U.S. District Court
Southern District of Florida
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Date 6/14/15

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

Case No. **15-20412**

18 U.S.C. § 1349
18 U.S.C. § 1347
18 U.S.C. § 2
18 U.S.C. § 982

CR-WILLIAMS
MAGISTRATE JUDGE
SIMONTON

UNITED STATES OF AMERICA

vs.

EKLIS ALMANZA,
JUAN E. DIAZ GONZALEZ, and
ANDRES F. ROJAS,

Defendant.

FILED BY JB
JUN 04 2015
STEVEN M. LARIMORE
CLERK U.S. DISTRICT COURT
S. D. OF FLORIDA

INDICTMENT

The Grand Jury charges that:

GENERAL ALLEGATIONS

At all times material to this Indictment:

The Medicare Program

1. The Medicare Program ("Medicare") was a federally funded program that provided free or below-cost health care benefits to certain individuals, primarily the elderly, blind, and disabled. The benefits available under Medicare were governed by federal statutes and regulations. The United States Department of Health and Human Services, through its agency, the Centers for Medicare and Medicaid Services ("CMS"), oversaw and administered Medicare. Individuals who received benefits under Medicare were commonly referred to as Medicare "beneficiaries."
2. Medicare programs covering different types of benefits were separated into different program "parts." Part D of Medicare (the "Medicare Part D Program") subsidized the costs of prescription drugs for Medicare beneficiaries in the United States. The Medicare Part D Program was

enacted as part of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 and went into effect on January 1, 2006.

3. In order to receive Part D benefits, a beneficiary enrolled in a Medicare drug plan. Medicare drug plans were operated by private companies approved by Medicare. Those companies were often referred to as drug plan "sponsors." A beneficiary in a Medicare drug plan could fill a prescription at a pharmacy and use his or her plan to pay for some or all of the prescription.

4. A pharmacy could participate in Part D by entering a retail network agreement directly with a plan or with one or more Pharmacy Benefit Managers ("PBMs"). A PBM acted on behalf of one or more Medicare drug plans. Through a plan's PBM, a pharmacy could join the plan's network. When a Part D beneficiary presented a prescription to a pharmacy, the pharmacy submitted a claim either directly to the plan or to a PBM that represented the beneficiary's Medicare drug plan. The plan or PBM determined whether the pharmacy was entitled to payment for each claim and periodically paid the pharmacy for outstanding claims. The drug plan's sponsor reimbursed the PBM for its payments to the pharmacy.

5. A pharmacy could also submit claims to a Medicare drug plan to whose network the pharmacy did not belong. Submission of such out-of-network claims was not common and often resulted in smaller payments to the pharmacy by the drug plan sponsor.

6. Medicare, through CMS, compensated the Medicare drug plan sponsors. Medicare paid the sponsors a monthly fee for each Medicare beneficiary of the sponsors' plans. Such payments were called capitation fees. The capitation fee was adjusted periodically based on various factors, including the beneficiary's medical conditions. In addition, in some cases where a sponsor's expenses for a beneficiary's prescription drugs exceeded that beneficiary's capitation fee, Medicare reimbursed the sponsor for a portion of those additional expenses.

7. Medicare and Medicare drug plan sponsors were “health care benefit program[s],” as defined by Title 18, United States Code, Section 24(b).

Medicare Drug Plan Sponsors

8. First Health Life & Health Insurance Company (“First Health”) and Pennsylvania Life Insurance Company (“Penn Life”) were Medicare drug plan sponsors.

The Defendant and Related Companies

9. Endless Medical Services, Corp., d/b/a, E-Z Pharmacy (“E-Z Pharmacy”) was a Florida corporation that did business in Miami-Dade County, purportedly providing prescription drugs to Medicare beneficiaries.

10. **EKLIS ALMANZA**, a resident of Miami-Dade County, was an owner and corporate representative of E-Z Pharmacy. **ALMANZA** was director, president, secretary, and treasurer of E-Z Pharmacy from October of 2008 to January of 2014.

11. **JUAN E. DIAZ GONZALEZ** was a resident of Miami-Dade County, and husband of **EKLIS ALMANZA**.

12. **ANDRES F. ROJAS**, a resident of Miami-Dade County, was an owner and corporate representative of E-Z Pharmacy. **ROJAS** was director, president, secretary, and treasurer of E-Z Pharmacy from January of 2014 to May of 2014.

COUNT 1

**Conspiracy to Commit Health Care Fraud and Wire Fraud
(18 U.S.C. § 1349)**

1. Paragraphs 1 through 12 of the General Allegations section of this Indictment are realleged and incorporated by reference as though fully set forth herein.

2. From in or around October of 2008 and continuing through in or around May of 2014, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

**EKLIS ALMANZA,
JUAN E. DIAZ GONZALEZ, and
ANDRES F. ROJAS,**

did willfully, that is, with the intent to further the objects of the conspiracy, and knowingly, combine, conspire, confederate, and agree with each other and with others known and unknown to the Grand Jury, to commit offenses against the United States, that is:

a. to knowingly and willfully execute a scheme and artifice to defraud a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, Medicare, First Health and Penn Life, and to obtain, by means of materially false and fraudulent pretenses, representations, and promises, money and property owned by, and under the custody and control of, said health care benefit programs, in connection with the delivery of and payment for health care benefits, items, and services, in violation of Title 18, United States Code, Section 1347; and

b. to knowingly, and with the intent to defraud, devise and intend to devise a scheme and artifice to defraud, and to obtain money and property by means of materially false and fraudulent pretenses, representations, and promises, knowing that the pretenses, representations, and promises were false and fraudulent when made, and for the purpose of executing the scheme and artifice, did knowingly transmit and cause to be transmitted by means of wire communication in interstate commerce, certain writings, signals, pictures, and sounds, in violation of Title 18, United States Code, Section 1343.

PURPOSE OF THE CONSPIRACY

3. It was the purpose of the conspiracy for the defendants and their co-conspirators to unlawfully enrich themselves by, among other things: (a) submitting and causing the submission of false and fraudulent claims to health care benefit programs; (b) concealing the submission of false

and fraudulent claims to health care benefit programs, and the receipt and transfer of fraud proceeds; and (c) diverting fraud proceeds for the personal use and benefit of themselves and others.

MANNER AND MEANS OF THE CONSPIRACY

The manner and means by which the defendants and their co-conspirators sought to accomplish the objects and purpose of the conspiracy included, among other things, the following:

4. **EKLIS ALMANZA, JUAN E. DIAZ GONZALEZ, and ANDRES F. ROJAS** submitted and caused the submission of claims, via interstate wire, that falsely and fraudulently represented that various health care benefits, primarily prescription drugs, were medically necessary, prescribed by a doctor, and had been provided to Medicare beneficiaries by E-Z Pharmacy.

5. As a result of such false and fraudulent claims, Medicare prescription drug plan sponsors, through their PBMs, made overpayments funded by the Medicare Part D Program to E-Z Pharmacy, in the approximate amount of \$4,787,343.

6. **EKLIS ALMANZA, JUAN E. DIAZ GONZALEZ, and ANDRES F. ROJAS** used the proceeds from the false and fraudulent Medicare Part D claims for their own use, the use of others, and to further the fraud.

All in violation of Title 18, United States Code, Section 1349.

COUNTS 2-7
Health Care Fraud
(18 U.S.C. § 1347)

1. Paragraphs 1 through 12 of the General Allegations section of this Indictment are realleged and incorporated by reference as though fully set forth herein.

2. From in or around October of 2008 and continuing through in or around May of 2014, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

**EKLIS ALMANZA,
JUAN E. DIAZ GONZALEZ, and
ANDRES F. ROJAS,**

in connection with the delivery of and payment for health care benefits, items, and services, did knowingly and willfully execute, and attempt to execute, a scheme and artifice to defraud health care benefit programs affecting commerce, as defined by Title 18, United States Code, Section 24(b), that is, Medicare, First Health and Penn Life, and to obtain, by means of materially false and fraudulent pretenses, representations, and promises, money and property owned by, and under the custody and control of, said health care benefit programs.

PURPOSE OF THE SCHEME AND ARTIFICE

3. It was the purpose of the scheme and artifice for the defendants and their accomplices to unlawfully enrich themselves by, among other things: (a) submitting and causing the submission of false and fraudulent claims to health care benefit programs; (b) concealing the submission of false and fraudulent claims to health care benefit programs, and the receipt and transfer of fraud proceeds; and (c) diverting fraud proceeds for the personal use and benefit of themselves and others.

THE SCHEME AND ARTIFICE

4. The allegations contained in paragraphs 4 through 6 of the Manner and Means section of Count 1 of this Indictment are realleged and incorporated by reference as though fully set forth herein as a description of the scheme and artifice.

**ACTS IN EXECUTION OR ATTEMPTED EXECUTION
OF THE SCHEME AND ARTIFICE**

5. On or about the dates set forth as to each count below, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

**EKLIS ALMANZA,
JUAN E. DIAZ GONZALEZ, and
ANDRES F. ROJAS,**

as specified in each count below, in connection with the delivery of and payment for health care benefits, items, and services, did knowingly and willfully execute, and attempt to execute, the above-described scheme and artifice to defraud health care benefit programs affecting commerce, as defined by Title 18, United States Code, Section 24(b), that is, Medicare, First Health and Penn Life, and to obtain, by means of materially false and fraudulent pretenses, representations, and promises, money and property owned by, and under the custody and control of, said health care benefit programs, in that the defendants submitted and caused the submission of false and fraudulent claims seeking the identified dollar amounts, and representing that E-Z Pharmacy provided pharmaceutical items and services to Medicare beneficiaries pursuant to physicians' orders and prescriptions, as set forth in each count below:

Count	Defendants	Medicare Beneficiary	Approx. Date of Submission of Claim	Medicare Claim Number	Medicare Drug Plan Sponsor	Item Claimed; Approx. Amount Claimed
2	EKLIS ALMANZA and JUAN E. DIAZ GONZALEZ	A.R.	9/8/2011	7501421841-6319503028	Penn Life	ABILIFY TAB 30MG; \$756
3	EKLIS ALMANZA and JUAN E. DIAZ GONZALEZ	T.R.	12/7/2011	7383200300-4261903073	Penn Life	LIDODERM DIS 5%; \$434

Count	Defendants	Medicare Beneficiary	Approx. Date of Submission of Claim	Medicare Claim Number	Medicare Drug Plan Sponsor	Item Claimed; Approx. Amount Claimed
4	EKLIS ALMANZA and JUAN E. DIAZ GONZALEZ	A.R.	8/31/2012	12244414910-909799990	Penn Life	ABILIFY TAB 20MG; \$855
5	EKLIS ALMANZA and JUAN E. DIAZ GONZALEZ	T.R.	11/30/2012	123355163333-07999990	Penn Life	ABILIFY TAB 20MG; \$855
6	EKLIS ALMANZA, JUAN E. DIAZ GONZALEZ and ANDRES F. ROJAS	A.J.	4/16/2014	9265794540-7500274055	First Health	ATRIPLA TAB \$2075;
7	EKLIS ALMANZA, JUAN E. DIAZ GONZALEZ and ANDRES F. ROJAS	A.J.	5/9/2014	26152976407-500274039	First Health	TASMAR TAB 100MG; \$2012

In violation of Title 18, United States Code, Sections 1347 and 2.

FORFEITURE
(18 U.S.C. § 982)

1. The allegations contained in this Indictment are realleged and incorporated by reference as though fully set forth herein for the purpose of alleging forfeiture to the United States

of America of certain property in which the defendants, **EKLIS ALMANZA, JUAN E. DIAZ GONZALEZ,** and **ANDRES ROJAS** have an interest.

2. Upon conviction of any violation of Title 18, United States Code, Sections 1347 and 1349, as alleged in Counts 1 through 7 of the Indictment, the defendant so convicted shall forfeit all of their right, title and interest to the United States of any property, real or personal, that constitutes or is derived, directly or indirectly, from gross proceeds traceable to the commission of such violations, pursuant to Title 18, United States Code, Section 982(a)(7).

3. The property subject to forfeiture includes, but is not limited to, the sum of at least \$4,787,343 in United States currency, which is a sum of money equal in value to the gross proceeds traceable to the commission of the violations alleged in this Indictment, which the United States will seek as a forfeiture money judgment as part of the defendant's sentence.

4. If the property described above as being subject to forfeiture, as a result of any act or omission of defendants, **EKLIS ALMANZA, JUAN E. DIAZ GONZALEZ,** and **ANDRES ROJAS,**

(a) cannot be located upon the exercise of due diligence;

(b) has been transferred or sold to or deposited with a third party;

(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; it is the intent of the United States, pursuant to Title 21, United States Code, Section 853(p), as made applicable through Title 18, United States Code, Section 982(a)(7) to seek forfeiture of any other property of defendants, up to the value of the above forfeitable property, including, but not limited to:

