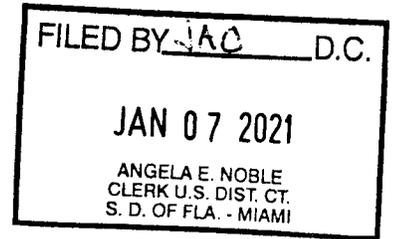


UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA



Case No. 19-CR-20583-SINGHAL(s)

18 U.S.C. § 1349
18 U.S.C. § 1347
21 U.S.C. § 846
21 U.S.C. § 841(a)(1)
18 U.S.C. § 371
18 U.S.C. § 220(a)(2)(B)
18 U.S.C. § 1956(h)
18 U.S.C. § 1956(a)(1)(B)(i)
18 U.S.C. § 1957(a)
18 U.S.C. § 2
18 U.S.C. § 982(a)(1), (a)(7)

UNITED STATES OF AMERICA

v.

PETER PORT,
MARK HERNANDEZ,
BRIAN DUBLYNN, and
JENNIFER SANFORD,

Defendants.

_____ /

SUPERSEDING INDICTMENT

The Grand Jury charges that:

GENERAL ALLEGATIONS

At all times material to this Superseding Indictment:

Drug and Alcohol Rehabilitation

1. Substance abuse treatment regulations described a continuum of care including, from most intensive to least intensive, detox, residential treatment, partial hospitalization (“PHP”)¹, intensive outpatient (“IOP”), and outpatient (“OP”). The varying levels of treatment

¹ The Florida Department of Children and Families (“DCF”), which regulated and licensed treatment facilities in Florida, referred to PHP as Day or Night Treatment with Community Housing. Unlike IOP or

provided were based on the severity of the addiction and the patient's symptoms. Persons undergoing treatment on an outpatient basis, whether in PHP, IOP, or OP, often elected to live in a "recovery residence," also known as a "sober home," "halfway house," or in some cases "community housing," with other persons who were also in treatment and committed to a drug-free and alcohol-free lifestyle. While these terms for the residences are commonly interchanged, they are referred to herein as "sober homes."

2. Facilities that provided detox, residential treatment, PHP, IOP and OP were "clinical treatment facilities," as defined in 18, United States Code, Section 220(e)(2).

3. Detox facilities assisted patients in dealing with the effects of withdrawal from the complete cessation of using drugs and/or alcohol. After successfully completing detox or other inpatient services, patients received treatment for their underlying addiction in the form of outpatient care, through either PHPs, IOPs, and/or OPs. PHP, IOP, and OP patients attended facilities on an ongoing basis where treatment was rendered, generally in the form of group and individual therapy sessions. The distinction among the three different treatments plans related to, among other things, the amount of therapy time on a daily or weekly basis. Patients generally transition from detox to PHP, then to IOP, and finally to OP as they overcome their addiction.

4. Medical and osteopathic doctors, both physicians, played an essential role in substance abuse treatment. Without a physician, patients at the substance abuse treatment centers would not have received prescriptions for drugs, receive treatment, or have urine, blood, or other bodily fluid testing. Bodily fluid tests, which were prescribed by the physicians, were billed to health plans by the substance abuse treatment centers and/or laboratories, as were patient

OP patients who elected to live in a sober home and were required to pay their own rent or room and board, in a Day Night or Treatment with Community Housing program, room, board, and transportation were provided by the program, but only for PHP patients.

evaluations performed by a physician. Physicians would authorize blood tests and urine drug tests through orders or prescriptions often certifying such services were medically necessary. Without a physician's order authorizing such bodily fluid testing, private insurance companies would often not pay for such services.

5. Substance abuse treatment programs, particularly PHPs and IOPs, generally included the following core services: orientation and intake; bio-psychosocial assessment; individual treatment planning; group and individual counseling; case management; integration into mutual-help and community-based support groups; 24-hour crisis coverage; medical treatment; substance evaluation and psychotherapy; medication management; and transition or discharge planning.

6. Sober homes, conversely, typically did not provide medical care or clinical services to their residents but operated solely as group residences where residents could live with a support network of others in recovery. Except for facilities whose licensing included community housing (such as those licensed to provide Day or Night Treatment with Community Housing),² residents of sober homes were expected to pay their own rent and utilities, allowing the sober homes to recover their costs, as in any typical landlord-tenant relationship. In an effort to maintain a safe and sober environment for all other residents, if any patient was found to be using drugs or alcohol while living in a legitimate sober home or community housing, they should have been removed from the facility.

7. DCF licensed and oversaw addiction treatment facilities that provided detox, residential treatment, PHP, IOP, and OP programs in Florida. Florida state regulations governed

² Under Florida regulations, programs licensed to provide day and night treatment with community housing are required to provide or manage community housing for their patients. See Fla. Admin. Code R. 65D-30.0081. However, this applies only to those patients undergoing PHP-level treatment.

substance abuse treatment services, including standards for detox, residential treatment, PHP, IOP and OP. Fla. Admin. Code §§ 65D-30.006, 65D-30.0081, 65D-30.0091 and 65D-30.010. One of the requirements that DCF placed on certain facilities was that they have a medical director.

8. In Florida, substance abuse treatment services were governed by the “Hal S. Marchman Alcohol and Other Drug Services Act” (“the Marchman Act”), Fla. Stat. § 397.301. Under the Marchman Act, private substance abuse service providers’ policies regarding payment for services had to comply with federal and state law. Fla. Stat. § 397.431.

9. All “clinical treatment” under the Marchman Act was required to be “a professionally directed, deliberate, and planned regimen of services and interventions that are designed to reduce or eliminate the misuse of drugs and alcohol and promote a healthy, drug-free lifestyle.” Fla. Stat. § 397.311(26)(a).

10. The U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment (“SAMHSA”), also promulgated guidelines for varying levels of treatment based on the severity of the addiction, including detox and IOP.

11. The American Society of Addiction Medicine (“ASAM”) was a professional medical society representing over 6,000 physicians, clinicians, and associated professionals in the field of addiction medicine. ASAM published the ASAM Criteria, which was a collection of objective guidelines that gave clinicians a way to standardize treatment planning and where patients were placed in treatment, as well as how to provide continuing, integrated care and ongoing service planning, including for detox, PHP, IOP, and OP treatment services.

12. The Controlled Substances Act (“CSA”) governed the manufacture, distribution, and dispensing of controlled substances in the United States. With limited exceptions for medical

professionals, the CSA made it unlawful for any person to knowingly or intentionally manufacture, distribute, or dispense a controlled substance or conspire to do so.

13. The CSA and its implementing regulations set forth which drugs and other substances were defined by law as “controlled substances,” and assigned those controlled substances to one of five schedules (Schedule I, II, III, IV, or V) depending on their potential for abuse, likelihood of physical or psychological dependency, accepted medical use, and accepted safety for use under medical supervision.

14. Medical practitioners, such as physicians and nurse practitioners, who were authorized to prescribe controlled substances by the jurisdiction in which they were licensed to practice medicine, were authorized under the CSA to prescribe, or otherwise distribute, controlled substances, if they were registered with the Attorney General of the United States. 21 U.S.C. § 822(b); 21 C.F.R. § 1306.03. Upon application by the practitioner, the DEA assigned a unique registration number, also known as a “DEA number,” to each qualifying medical practitioner, including physicians and nurse practitioners.

15. Chapter 21 of the Code of Federal Regulations, Section 1306.04, governed the issuance of prescriptions and provided, among other things, that a prescription for a controlled substance “must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice.” Moreover, “[a]n order purporting to be a prescription issued not in the usual course of professional treatment . . . is not a prescription within the meaning and intent of [the CSA] and the person knowingly filing such a purported prescription, as well as the person issuing it, shall be subject to the penalties provided for violations of the provisions of law relating to controlled substances.” Id.

16. Regulations also provided that “[a]ll prescriptions for controlled substances shall be dated as of, and signed on, the day when issued and shall bear the full name and address of the patient, the drug name, strength, dosage form, quantity prescribed, directions for use, and the name, address and registration number of the practitioner.” 21 C.F.R. § 1306.05(a).

17. One form of treatment for substance abuse involved the use of a prescription controlled opioid, buprenorphine, in order to wean addicts off of illegal opioids, including heroin. Because drugs containing buprenorphine were Schedule III controlled substances, meaning that there was a strong potential for abuse, resulting in fatal and non-fatal overdoses, prescribing physicians were also required to have two U.S. Drug Enforcement Agency (“DEA”) registrations. The first registration was the standard “DEA number,” required to prescribe any controlled substance. The second registration was a “DEA X-number,” which was granted to a limited number of physicians with valid “DEA numbers,” who had completed a training program on substance abuse treatment and have fulfilled other regulatory requirements. In addition, Benzodiazepines, including Lorazepam (also known by the brand name Ativan), were Schedule IV controlled substances often used to relieve anxiety, muscle spasms, and reduce seizures. Benzodiazepines were sometimes used in substance abuse treatment to alleviate some of the symptoms of detoxification and withdrawal. Benzodiazepines were frequently co-abused by opioid users, due to their ability to enhance opioids’ euphoric effects. This combination was extremely dangerous, and could result in fatal overdoses.

18. The Drug Addiction Treatment Act (“DATA”) of 2000 amended the Controlled Substances Act to permit physicians to treat opioid addiction using Schedules III-V, U.S. Food and Drug Administration (“FDA”)-approved narcotic drug products without having to obtain a separate DEA registration as a narcotic treatment program. Those registered with the DEA as

DATA-waived physicians could treat 30 or 100 patients at any one time. In 2016, Congress passed the Comprehensive Addiction and Recovery Act (“CARA”), which amended the Controlled Substances Act to permit nurse practitioners and physician assistants registered with the DEA to also treat opioid addiction based on state authority. In 2016, the Department of Health and Human Services published a Federal Register Notice which increased the patient limitation to 275 for physicians.

Bodily Fluid Testing in Substance Abuse Treatment

19. Urine drug testing was one monitoring strategy used by substance abuse treatment centers to detect recent drug or alcohol use by a patient. There were two primary categories of urine drug testing: immunoassay testing (e.g., a drug screen or point of care (“POC”) testing) and specific drug identification (e.g., definitive, or confirmatory, testing).

20. POC urine testing involved collecting urine in a specific cup designed for testing. The specimen was analyzed using a color band or numbered dipstick, allowing for visual positive or negative results. POC urine testing usually tested for the presence of 9 to 13 specific types of drugs. POC tests typically cost between \$5 and \$10 and could be read easily by a layperson. This testing was convenient, less costly, and the results could be read quickly. POC testing was the most common form of urine testing performed at treatment facilities.

21. Definitive (or confirmatory) urine drug tests used gas liquid chromatography-mass spectrometry (“LCMS”) and/or gas chromatography, or high-performance liquid chromatography, to analyze the urine specimen. These techniques were highly sensitive and accurately and definitively identified specific substances and the quantitative concentrations of the drugs or their metabolites. This testing was more precise, more sensitive, and detected more substances than other types of urine testing. Results of definitive or confirmatory testing took longer, and the tests

were significantly more expensive; single urine specimens that underwent drug screen analyzers and definitive or confirmatory urine drug testing could be billed to insurance companies for thousands of dollars.

Payment for Substance Abuse Treatment

22. Insurance coverage for substance abuse treatment and testing was available through a number of avenues, including federal health care benefits programs like the Federal Employees Health Benefits Program (“FEHBP”), health plans sponsored by employers, and health plans offered directly by private insurance companies. Health plans sponsored by private employers were governed by the Employee Retirement Income Security Act of 1974 (“ERISA”), 29 U.S.C. §§ 1001, *et. seq.*, while those sponsored by government employers and certain others are exempted from ERISA’s jurisdiction.

23. Both ERISA and non-ERISA health benefit plans, including Affordable Care Act plans, were offered or administered by private insurance companies.

24. Aetna Health Management LLC and Aetna Life Insurance for Members (“Aetna”); Blue Cross/Blue Shield (“BCBS”); Cigna Healthcare (“Cigna”); Humana Inc. (“Humana”); United Behavioral Health and United Health Group, Inc. (“United”); and Optum Health (“Optum”) (collectively referred to hereinafter as “the Insurance Plans”) were “health care benefit programs,” as defined in Title 18, United States Code, Sections 24(b), and 220(e)(3), that is “public or private plans or contracts, affecting commerce, under which any medical benefit, item or service is provided to any individual.” The Insurance Plans were health insurance providers doing business in the State of Florida. Safe Haven submitted claims to the Insurance Plans for payment for addiction treatment services via interstate wires.

25. Under the terms of insurance policies and consistent with state and federal law, the Insurance Plans were only responsible for claims for services that: (a) were medically necessary and actually rendered, (b) were provided by a properly licensed service provider, and (c) complied with the terms of the health care plans, including the obligation to pay co-insurance and deductibles.

The Defendants and Related Individuals and Entities

The Treatment Center

26. Safe Haven Recovery, Inc. (“Safe Haven”) was a Florida corporation with its principal place of business in Miami-Dade County. Safe Haven purported to operate as a licensed “substance abuse service provider” or “substance abuse treatment center,” that is, it purportedly offered clinical treatment services for persons suffering from alcohol and drug addiction. Safe Haven was licensed to provide Day or Night Treatment with Community Housing as well as outpatient detox, IOP, and OP treatment.

27. Lab #1 was a Florida limited liability company with its principal place of business in Broward County. Lab #1 performed urine drug testing for Safe Haven.

28. Lab #2 was a Florida corporation with its principal place of business in Broward County. Lab #2 performed urine drug testing for Safe Haven.

29. Lab #3 was a California corporation with its principal place of business in Los Angeles County, California. Lab #3 performed urine drug testing for Safe Haven.

30. Lab #4 was a Pennsylvania corporation with its principal place of business in Bucks County, Pennsylvania. Lab #4 performed urine drug testing for Safe Haven.

31. Lab #5 was a Florida limited liability company with its principal place of business in St. Lucie County. Lab #5 performed urine drug testing for Safe Haven.

32. Lab #6 was a Florida limited liability company with its principal place of business in Broward County. Lab #6 performed urine drug testing for Safe Haven.

33. Lab #7 was a Georgia corporation with its principal place of business in Lumpkin County, Georgia. Lab #7 performed urine drug testing for Safe Haven.

34. Lab #1 – Lab #7, as described above in Paragraphs 27-33, are hereafter collectively referred to as “the Clinical Laboratories.” Each of the Clinical Laboratories was a “laboratory,” as defined in Title 18, United States Code, Section 220e(4), and Title 42, United States Code, Section 263a.

Other Entities

35. Kiawah Properties Corp. (“Kiawah Properties”) was a Florida limited liability company with its principal place of business in Miami-Dade County.

36. Troon Consulting Inc. (“Troon Consulting”) was a Florida corporation with its principal place of business in Palm Beach County.

37. Interactive Abstract Corp. (“Interactive Abstract”) was a New York corporation with its principal place of business in Nassau County, New York.

38. Dubs Enterprise LLC (“Dubs Enterprise”) was a Florida limited liability company with its principal place of business in Palm Beach County.

39. UA Drop Corp. (“UA Drop”) was a New York corporation with its principal place of business in Queens County, New York.

40. Corporation 1 was a Florida corporation with its principal place of business in Broward County.

41. Holding Company 1 was a Florida limited liability company with its principal place of business in Broward County.

42. Holding Company 2 was a Florida limited liability company with its principal place of business in Broward County.

The Defendants and Relevant Individuals

43. **PETER PORT**, a resident of Palm Beach County, Florida, founded, owned and controlled Safe Haven, and owned and/or controlled Kiawah Properties, Troon Consulting, and Interactive Abstract.

44. **MARK HERNANDEZ**, a resident of Miami-Dade County, Florida, was a physician licensed in the State of Florida and served as a medical director of Safe Haven.

45. **BRIAN DUBLYNN**, a resident of Broward County, Florida, was a registered Vice President of Safe Haven, operated and controlled Safe Haven, and owned and controlled Dubs Enterprise.

46. **JENNIFER SANFORD**, a resident of Broward County, Florida, purported to work as a marketer for Safe Haven.

47. Individual 1, a resident of Broward County, Florida, purported to work as a marketer for clinical laboratories, including Lab #2, and owned and controlled Corporation 1.

48. Individual 2, a resident of Broward County, Florida, owned and controlled Holding Company 1, Holding Company 2, Lab #2 and Lab #7.

COUNT 1
Conspiracy to Commit Health Care Fraud and Wire Fraud
(18 U.S.C. § 1349)

1. Paragraphs 1 through 45, 47, and 48 of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by reference as though fully set forth herein.

2. From in or around July 2014, and continuing through in or around September 2019, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

**PETER PORT,
MARK HERNANDEZ, and
BRIAN DUBLYNN,**

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 others, known and unknown to the Grand Jury, to commit offenses against the United States, that is:

a. to knowingly and willfully execute and attempt to 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, the Insurance Plans, 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 for obtaining money and property by means of materially false and fraudulent pretenses, representations, and promises, knowing the pretenses, representations, and promises were false and fraudulent when made, and for the purpose of executing such scheme and artifice, did knowingly transmit and cause to be transmitted by means of wire communication in interstate and foreign commerce, certain writings, signs, signals, pictures and sounds, in violation of Title 18, United States Code, Section 1343.

Purpose of the Conspiracy

3. It was a purpose of the conspiracy for the defendants and their co-conspirators to unjustly enrich themselves by, among other things: (a) submitting and causing the submission of false and fraudulent claims to the Insurance Plans; (b) concealing the submission of false and fraudulent claims to the Insurance Plans, and the receipt and transfer of fraud proceeds; and (c) diverting the fraud proceeds for their personal use and benefit, the use and benefit of others, and to further the fraud.

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:

4. **PETER PORT, BRIAN DUBLYNN**, and co-conspirators established, operated, and controlled Safe Haven, a substance abuse treatment center, which was purportedly in the business of providing clinical treatment services for persons suffering from alcohol and drug addiction.

5. **PETER PORT, BRIAN DUBLYNN**, and co-conspirators created and signed documents to conceal from the Florida Department of Children and Families, and others, the fact that **PORT** owned and controlled Safe Haven.

6. **PETER PORT, BRIAN DUBLYNN**, and co-conspirators purported to provide drug-free and alcohol-free residences, in which substance abuse patients would reside during their admission at Safe Haven.

7. To obtain patients for Safe Haven, **PETER PORT, BRIAN DUBLYNN**, and co-conspirators paid, and caused to be paid, kickbacks and bribes in the form of cash, free or reduced sober homes rent, payment for food, payment for travel (including airfare), and other benefits to

individuals with insurance who agreed to be patients at Safe Haven and attend substance abuse treatment, often in the form of Detox, PHP, IOP and/or OP sessions, and to submit to excessive (typically three or more times per week) and medically unnecessary urine drug testing, including definitive or confirmatory urine drug testing, so members of the conspiracy could bill the patients' Insurance Plans for substance abuse treatment and urine drug testing, including definitive or confirmatory urine drug testing, without regard to medical necessity.

8. **PETER PORT, BRIAN DUBLYNN**, and co-conspirators paid, and caused to be paid, kickbacks and bribes to patient recruiters for referring individuals to serve as patients at Safe Haven.

9. **PETER PORT, MARK HERNANDEZ, BRIAN DUBLYNN**, and co-conspirators permitted patients admitted at Safe Haven to use illicit drugs in Safe Haven's sober homes to induce patients to stay at Safe Haven and to agree to receive substance abuse treatment services, and to submit to excessive urine drug testing, including definitive or confirmatory urine drug testing done at laboratories, including the Clinical Laboratories.

10. **PETER PORT, MARK HERNANDEZ, BRIAN DUBLYNN**, and co-conspirators caused Safe Haven to submit claims to the Insurance Plans for addiction treatment services, including Detox, PHP, IOP and OP, that were not provided as billed in that, among other things, Safe Haven: failed to provide required individualized addiction treatment to patients, failed to provide required medical oversight, allowed patients to miss some or all of certain required therapy sessions, provided therapy by unlicensed professionals that did not qualify as actual addiction treatment, failed to timely review initial psychiatric evaluations, did not form individual treatment plans and meet with patients to discuss patient care, and undercut the very purpose of its

addiction treatment services by permitting patients at Safe Haven to use illicit drugs, including marijuana, cocaine, and opiates, while admitted at Safe Haven.

11. **PETER PORT, MARK HERNANDEZ, BRIAN DUBLYNN**, Individual 1, and co-conspirators ordered and caused the ordering of urine drug screens and expensive definitive or confirmatory urine drug testing by various laboratories including the Clinical Laboratories that were not medically necessary or reimbursable by the Insurance Plans, in that, among other things: (i) the urine drug tests were ordered on a systematic basis and not on an individualized basis according to the medical need of the patient; (ii) the urine drug tests were ordered too frequently (i.e., every other day) to allow for meaningful use of the tests in medical decision-making, as additional tests were often ordered before any medical professional or doctor received or reviewed the results of the previous tests; (iii) the urine drug tests were not timely reviewed by a qualified medical professional or by a doctor or treatment professional in developing or modifying the patients' treatment; (iv) many of the urine drug tests were not reviewed by a qualified medical professional or by a doctor or treatment professional until days or weeks after the results were reported, at which point the patient often had been discharged from Safe Haven, and some urine drug tests were not reviewed at all; and (v) when a patient tested positive for a substance that he or she should not have been taking, Safe Haven seldom took action or imposed consequences for patients with medical insurance.

12. **PETER PORT, BRIAN DUBLYNN**, Individual 1, and co-conspirators directly and indirectly solicited and received kickbacks and bribes from co-conspirator owners, agents, and employees of the Clinical Laboratories, including Individual 2, for sending the orders for expensive urine drug tests, including definitive or confirmatory urine drug testing, for patients of Safe Haven to the clinical laboratories that, in turn, would bill the patients' Insurance Plans. These

kickbacks and bribes were sometimes paid through shell companies, including Holding Company 1, Holding Company 2, Corporation 1, and UA Drop.

13. **PETER PORT, BRIAN DUBLYNN** and other co-conspirators hired **MARK HERNANDEZ** to serve as medical director of Safe Haven. **PORT** and **DUBLYNN** paid and caused the payment of **HERNANDEZ**'s monthly salary, and in return, **HERNANDEZ** ordered drug screens and expensive definitive or confirmatory urine drug testing for Safe Haven's patients, regardless of whether such testing was medically necessary or conducted, and regardless of whether such tests were billed in compliance with the terms of the patients' Insurance Plans. **HERNANDEZ** also failed to integrate the results of these drug tests into the treatment plans for patients at Safe Haven. Further, **HERNANDEZ** failed to meaningfully oversee the treatment of patients at Safe Haven, and ignored the fact that therapy sessions at Safe Haven were often not attended, and were provided by unlicensed professionals. Further, **HERNANDEZ** failed to conduct and/or timely review initial psychiatric evaluations, did not form individual treatment plans and meet with patients to discuss patient care, and ignored the fact that patients at Safe Haven used illicit drugs, including marijuana, cocaine, and opiates, while admitted at Safe Haven. Finally, **HERNANDEZ** prescribed and dispensed controlled substances to patients at Safe Haven, including but not limited to buprenorphine and benzodiazepines, outside the scope of professional practice and not for a legitimate medical purpose.

14. **PETER PORT, BRIAN DUBLYNN**, and co-conspirators directly and indirectly maintained control over patients at Safe Haven by threatening to confiscate and confiscating the patients' personal belongings, including, money, identification and medications, and permitted patients to use drugs while admitted at Safe Haven, among other things, in order to keep patients at Safe Haven so that Safe Haven could continue to bill the Insurance Plans.

15. **PETER PORT, MARK HERNANDEZ, BRIAN DUBLYNN**, Individual 1, Individual 2, and co-conspirators submitted and caused the submission of false and fraudulent insurance claims to the Insurance Plans, via interstate wire communication, for various health care benefits, primarily substance abuse treatment and bodily fluid testing, including urine drug testing, that were medically unnecessary, not provided, obtained through kickbacks and bribes, and otherwise not eligible for reimbursement.

16. Safe Haven billed the Insurance Plans approximately \$59.3 million dollars, for which Safe Haven was paid approximately \$14 million by the Insurance Plans. Safe Haven caused the submission of approximately \$15.9 million in bodily fluid testing claims by the Clinical Laboratories to the Insurance Plans, for which the Clinical Laboratories were paid over \$1.3 million by the Insurance Plans. Safe Haven thus billed and caused to be billed a total of approximately \$75.2 million to the Insurance Plans, and the Insurance Plans paid a total of approximately \$15.3 million as a result.

17. **PETER PORT, MARK HERNANDEZ, BRIAN DUBLYNN**, Individual 1, and co-conspirators used the proceeds from the false and fraudulent claims for their own use and the use of others, and to further the fraud.

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

COUNTS 2-6
Health Care Fraud
(18 U.S.C. § 1347)

1. Paragraphs 1 through 45, 47, and 48 of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by reference as though fully set forth herein.

2. From in or around July 2014, and continuing through in or around September 2019, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

**PETER PORT,
MARK HERNANDEZ, and
BRIAN DUBLYNN**

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 a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, the Insurance Plans, 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 a 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 the Insurance Plans; (b) concealing the submission of false and fraudulent claims to the Insurance Plans, and the receipt and transfer of fraud proceeds; and (c) diverting fraud proceeds for their personal use and benefit, the use and benefit of others, and to further the fraud.

The Scheme and Artifice

4. The allegations contained in the Manner and Means of the Conspiracy section of Count 1 are re-alleged 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 below, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants, 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 a health care benefit program affecting commerce, as defined by Title 18, United States Code, Section 24(b), that is, the Insurance Plans, 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 the services listed below were medically necessary and provided as claimed:

Count	Patient	Approx. Claim Date	Approx. Claim Amount	Benefit Provider	Claim Number	Codes Billed
2	J.L.	7/17/2018	\$3,100	BCBS	F100000682263166	G0482
4	C.C.	7/31/2018	\$3,100	BCBS	H100000684905613	G0482
3	C.B.	8/16/2018	\$3,100	BCBS	H100000688188810	G0482
5	A.L.	8/20/2019	\$2,000	BCBS	H100000761395860	G0481
6	S.B.	8/23/2019	\$2,000	BCBS	H100000762204550	G0481

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

COUNT 7
Conspiracy to Dispense and Distribute a Controlled Substance
(21 U.S.C. § 846)

1. Paragraphs 12 through 18, 26, and 43 through 44 of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by reference as though fully set forth herein.

2. From in or around March 2015, and continuing through in or around September 2019, in Miami Dade County, in the Southern District of Florida, and elsewhere, the defendants,

**PETER PORT and
MARK HERNANDEZ,**

did knowingly and willfully combine, conspire, confederate, and agree with each other, and with others known and unknown to the Grand Jury, to distribute, possess with intent to distribute, and dispense outside the scope of professional practice and not for a legitimate medical purpose, a controlled substance, in violation of Title 21, United States Code, Section 841(a)(1); all in violation of Title 21, United States Code, Section 846.

Pursuant to Title 21, United States Code, Section 841(b)(1)(E), it is further alleged that the controlled substance involved in the conspiracy attributable to the defendants as a result of their own conduct, and the conduct of other conspirators reasonably foreseeable to them, involved a Schedule III controlled substance, that is, a mixture and substance containing a detectable amount of buprenorphine.

Pursuant to Title 21, United States Code, Section 841(b)(1)(E), it is further alleged that the controlled substance involved in the conspiracy attributable to the defendants as a result of their own conduct, and the conduct of other conspirators reasonably foreseeable to them, involved a Schedule IV controlled substance, that is, a mixture and substance containing a detectable amount of lorazepam.

COUNTS 8-12
Dispensing and Distributing a Controlled Substance
(21 U.S.C. § 841(a)(1))

1. Paragraphs 12 through 18, 26, and 43 through 44 of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by reference as though fully set forth herein.

2. On or about the dates set forth as to each Count below, in Miami-Dade County, in the Southern District of Florida, the defendants, so identified in each count, did knowingly and intentionally distribute and dispense outside the scope of professional practice and not for a legitimate medical purpose, a controlled substance in violation of Title 21, United States Code, Section 841(a)(1), and Title 18, United States Code, Section 2:

Count	Defendant(s)	Approximate Date	Patient	RX Number	Controlled Substance
8	MARK HERNANDEZ	10/19/2017	K.M.	4008348	30 day supply of Suboxone 8 mg-2 mg SL Film
9	MARK HERNANDEZ	10/20/2017	B.U.	4008397	30 day supply of Suboxone 8 mg-2 mg SL Film
10	MARK HERNANDEZ	12/18/2017	R.D.	4009401	5 day supply of Lorazepam 1 mg tablet
11	MARK HERNANDEZ	02/22/2018	J.P.	4010896	30 day supply of Suboxone 8 mg-2 mg SL Film
12	PETER PORT and MARK HERNANDEZ	05/16/2019	C.C.	14006320	3 day supply of Lorazepam 1 mg tablet

Pursuant to Title 21, United States Code, Section 841(b)(1)(E), it is further alleged that this violation involved a Schedule III controlled substance, that is, a mixture and substance containing a detectable amount of buprenorphine.

Pursuant to Title 21, United States Code, Section 841(b)(1)(E), it is further alleged that this violation involved a Schedule IV controlled substance, that is, a mixture and substance containing a detectable amount of lorazepam.

COUNT 13
Conspiracy to Pay and Receive Kickbacks
(18 U.S.C. § 371)

1. Paragraphs 1 through 43, and 46 of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by referenced as though fully set forth herein.

2. From in or around November 2018 and continuing through in or around July 2019, in Miami-Dade County, in the Southern District of Florida and elsewhere, the defendants,

PETER PORT and
JENNIFER SANFORD,

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 others known and unknown to the Grand Jury, to commit offenses against the United States, that is:

a. to knowingly and willfully, with respect to services covered by a health care benefit program, that is the Insurance Plans, in and affecting interstate and foreign commerce, solicit and receive any remuneration (including any kickback, bribe, and rebate) directly and indirectly, overtly and covertly, in cash and in kind, in return for referring a patient or patronage to a recovery home, clinical treatment facility, and laboratory, in violation of Title 18, United States Code, Section 220(a)(1); and

b. to knowingly and willfully, with respect to services covered by a health care benefit program, that is the Insurance Plans, in and affecting interstate and foreign commerce, pay and offer any remuneration (including any kickback, bribe, and rebate), directly and indirectly, overtly and covertly, in cash and in kind, to induce a referral of an individual to a recovery home, clinical treatment facility, and laboratory, in violation of Title 18, United States Code, Section 220(a)(2)(A).

c. to knowingly and willfully, with respect to services covered by a health care benefit program, that is the Insurance Plans, in and affecting interstate and foreign commerce, pay and offer any remuneration (including any kickback, bribe, and rebate), directly and indirectly, overtly and covertly, in cash and in kind, in exchange for an individual using the services of a recovery home, clinical treatment facility, and laboratory, in violation of Title 18, United States Code, Section 220(a)(2)(B).

Purpose of the Conspiracy

3. It was a purpose of the conspiracy for the defendants and their co-conspirators to unjustly enrich themselves by, among other things: (a) offering and paying kickbacks, bribes, and rebates to induce the referral of beneficiaries of the Insurance Plans to Safe Haven and the Clinical Laboratories; (b) offering and paying kickbacks, bribes, and rebates in exchange for a beneficiary of the Insurance Plans using the services of Safe Haven and the Clinical Laboratories; (c) soliciting and receiving kickbacks, bribes, and rebates in return for referring a patient or patronage to Safe Haven and the Clinical Laboratories; (d) concealing and causing the concealment of kickbacks, bribes, and rebates; and (e) diverting kickbacks, bribes, and rebates for their personal use and benefit, the use and benefit of others, and to further the conspiracy.

MANNER AND MEANS OF THE CONSPIRACY

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

2. To obtain and retain patients for Safe Haven whose insurance, including the Insurance Plans, could be billed for substance abuse services and laboratory testing done at the Clinical Laboratories. **PETER PORT, JENNIFER SANFORD**, and their co-conspirators offered, paid, or caused to be paid, kickbacks and bribes to prospective clients in the form of cash,

free or reduced sober homes rent, payment for food, payment for travel (including airfare), and other benefits.

3. **PETER PORT** and his co-conspirators further paid, and caused to be paid, kickbacks and bribes to patient recruiters, including **JENNIFER SANFORD**, for referring patients to Safe Haven.

4. **PETER PORT** and his co-conspirators permitted patients admitted to Safe Haven to use illicit drugs in Safe Haven's sober homes to induce patients to stay at Safe Haven and to agree to receive substance abuse treatments services, and to submit to excessive urine drug testing, including definitive or confirmatory urine drug testing done at laboratories, including the Clinical Laboratories.

5. **PETER PORT** and co-conspirators directly and indirectly solicited and received kickbacks and bribes from co-conspirator owners, agents, and employees of the Clinical Laboratories, including Individual 2, for sending the orders for expensive urine drug tests, including definitive or confirmatory urine drug testing, for patients of Safe Haven to the Clinical Laboratories that, in turn, would bill the patients' Insurance Plans. These kickbacks and bribes were sometimes paid through shell companies, including Holding Company 1, Holding Company 2, Corporation 1, and UA Drop.

OVERT ACTS

In furtherance of the conspiracy, and to accomplish its objects and purpose, at least one of the co-conspirators committed and caused to be committed, in Broward County, in the Southern District of Florida and elsewhere, at least one of the following overt acts, among others:

1. On or about January 26, 2019, **PETER PORT** purchased and caused to be purchased a Delta Airlines flight for J.K. from Bismarck, North Dakota to Fort Lauderdale, Florida

for approximately \$773 using American Express credit card ending in 3002 as a kickback for using the services of Safe Haven.

2. On or about February 8, 2019, **PETER PORT** instructed **JENNIFER SANFORD** via text message to book a flight for H.S as a kickback for using the services of Safe Haven.

3. On or about February 9, 2019, **JENNIFER SANFORD** purchased and caused to be purchased a Southwest Airlines flight from Atlanta, Georgia to Fort Lauderdale, Florida for H.S. as a kickback for using the services of Safe Haven.

4. On or about April 12, 2019, **PETER PORT** purchased and caused to be purchased a United Airlines flight for A.N. from Santa Ana, California, to Miami, Florida for approximately \$227 using American Express credit card ending in 3002 as a kickback for using the services of Safe Haven.

5. On or about April 22, 2019, **PETER PORT** paid **JENNIFER SANFORD** from Bank of America account ending in 8363 approximately \$2,000 as a kickback for recruiting patients to Safe Haven.

6. On or about June 20, 2019, **PETER PORT** purchased and caused to be purchased a Delta Airlines flight for C.M. from Santa Ana, California to Miami, Florida for approximately \$432 using American Express credit card ending in 2004 as a kickback for using the services of Safe Haven.

7. On or about June 20, 2019, **PETER PORT** purchased and caused to be purchased a Delta Airlines flight for M.D. from Santa Ana, California, to Miami, Florida for approximately \$432 using American Express credit card ending in 2004 as a kickback for using the services of Safe Haven.

All in violation of Title 18, United States Code, Section 371.

COUNTS 14-18
Payment and Offer of Kickbacks in Exchange for Use of Services
(18 U.S.C. § 220(a)(2)(B))

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

PETER PORT,

did knowingly and willfully pay, offer, and cause to be paid and offered, any remuneration, including any kickback, bribe, and rebate, namely, the payments specified as to each count below, directly and indirectly, overtly and covertly, in cash and in kind, that is, payments for flights to South Florida, in exchange for an individual using the services of recovery homes, clinical treatment facilities, and laboratories, that is, Safe Haven and the Clinical Laboratories, with respect to services covered by a health care benefit program, each in and affecting interstate and foreign commerce:

Count	Patient/Recipient	Approx. Date	Description of Remuneration
14	D.F.	12/31/2018	Purchase of American Airlines ticket by Peter Port using American Express account ending in 6003 in the approximate amount of \$171.
15	B.D.	3/7/2019	Purchase of United Airlines ticket by Peter Port using American Express account ending in 3002 in the approximate amount of \$507.
16	C.S.	3/7/2019	Purchase of United Airlines ticket by Peter Port using American Express account ending in 3002 in the approximate amount of \$507.
17	B.H.	8/12/2019	Purchase of United Airlines ticket by Peter Port using American Express account ending in 6005 in the approximate amount of \$244
18	Q.M	7/30/2019	Purchase of American Airlines ticket by Peter Port using American Express account ending in 2004 in the approximate amount of \$294.

In violation of Title 18, United States Code, Sections 220(a)(2)(B) and 2.

COUNT 19
Conspiracy to Commit Money Laundering
(18 U.S.C. § 1956(h))

From in and around July 2014, through in or around July 2019, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

PETER PORT and
BRIAN DUBLYNN,

did willfully, that is, with intent to further the object of the conspiracy, and knowingly combine, conspire, confederate, and agree with each other and with others, known and unknown to the Grand Jury, to violate Title 18, United States Code, Section 1956(a)(1)(B)(i), that is, to knowingly conduct a financial transaction affecting interstate and foreign commerce involving the proceeds of specified unlawful activity, knowing that the property involved in such financial transaction represented the proceeds of some form of unlawful activity, and knowing that such financial transaction was designed in whole and in part to conceal and disguise the nature, location, source, ownership, and control of the proceeds of specified unlawful activity.

It is further alleged that the specified unlawful activity is wire fraud, in violation of Title 18, United States Code, Section 1343, health care fraud, in violation of Title 18, United States Code, Section 1347, and conspiracy to commit health care fraud and wire fraud, in violation of Title 18, United States Code, Section 1349.

All in violation of Title 18, United States Code, Section 1956(h).

COUNTS 20-27
Money Laundering
(18 U.S.C. § 1956(a)(1)(B)(i))

1. Paragraphs 22 through 26, 35 through 43, and 45 of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by referenced as though fully set forth herein.

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

**BRIAN DUBLYNN and
PETER PORT,**

did knowingly conduct and attempt to conduct a financial transaction affecting interstate and foreign commerce, which financial transaction involved the proceeds of specified unlawful activity, knowing that the property involved in the financial transaction represented the proceeds of some form of unlawful activity, and knowing that such transaction was designed, in whole and in part, to conceal and disguise the nature, location, source, ownership, and control of the proceeds of specified unlawful activity, as more specifically described below:

Count	Defendant	Approximate Date	Description of Financial Transaction
20	BRIAN DUBLYNN	01/16/2016	BRIAN DUBLYNN negotiated UA Drop Corp. Check No. 1502 in the amount of \$7,500, using an account ending in 4588 at TD Bank, made payable to BRIAN DUBLYNN
21	PETER PORT	08/08/2017	PETER PORT negotiated Safe Haven Check No. 8967 in the amount of \$20,000, using an account ending in 8363 at Bank of America, made payable to Kiawah Properties Corp.
22	BRIAN DUBLYNN	12/17/2017	BRIAN DUBLYNN negotiated UA Drop Corp. Check No. 0098 in the amount of \$21,000, using an account ending in 4588 at TD Bank, made payable to BRIAN DUBLYNN
23	BRIAN DUBLYNN	01/26/2018	BRIAN DUBLYNN negotiated UA Drop Corp. Check No. 1503 in the amount of \$9,000, using an account ending in 4588 at TD Bank, made payable to BRIAN DUBLYNN
24	BRIAN DUBLYNN	01/27/2018	BRIAN DUBLYNN negotiated UA Drop Corp. Check No. 1504 in the amount of \$6,000, using an account ending in 4588 at TD Bank, made payable to BRIAN DUBLYNN
25	BRIAN DUBLYNN	02/08/2018	BRIAN DUBLYNN negotiated Safe Haven Check No. 2917 for \$4,000 using an account

Count	Defendant	Approximate Date	Description of Financial Transaction
			ending in 8054 at Bank of America made payable to Dubs Enterprise LLC
26	PETER PORT	02/26/2018	PETER PORT negotiated Safe Haven Check No. 9195 in the amount of \$50,000, using an account ending in 8363 at Bank of America, made payable to Troon Consulting
27	PETER PORT	12/07/2018	PETER PORT negotiated Safe Haven Check No. 10080 in the amount of \$20,000, using an account ending in 8363 at Bank of America, made payable to Interactive Abstract

It is further alleged that the specified unlawful activity is wire fraud, in violation of Title 18, United States Code, Section 1343, health care fraud, in violation of Title 18, United States Code, Section 1347, and conspiracy to commit health care fraud and wire fraud, in violation of Title 18, United States Code, Section 1349.

In violation of Title 18, United States, Sections 1956(a)(1)(B)(i) and 2.

COUNTS 28-29
Money Laundering
(18 U.S.C. § 1957(a))

1. Paragraphs 22 through 26, and 35 through 43, of the General Allegations section of this Superseding Indictment are re-alleged and incorporated by referenced as though fully set forth herein.

2. On or about the dates specified as to each count below, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendant,

PETER PORT,

did knowingly engage and attempt to engage in a monetary transaction by, through, and to a financial institution affecting interstate and foreign commerce in criminally derived property of a value greater than \$10,000, and such property having been derived from specified unlawful activity, knowing that the property involved in the monetary transaction was derived from some

form of unlawful activity, as set forth below:

Count	Approximate Date	Description of Monetary Transaction
28	06/26/2018	PETER PORT negotiated Safe Haven Check No. 9488 in the amount of \$50,000, using an account ending in 8363 at Bank of America, made payable to Interactive Abstract.
29	03/26/2019	PETER PORT negotiated Safe Haven Check No. 9965 in the amount of \$200,000, using an account ending in 8363 at Bank of America, made payable to Troon Consulting.

It is further alleged that the specified unlawful activity is wire fraud, in violation of Title 18, United States Code, Section 1343, health care fraud, in violation of Title 18, United States Code, Section 1347, and conspiracy to commit health care and wire fraud, in violation of Title 18, United States Code, Section 1349.

In violation of Title 18, United States Code, Sections 1957(a) and 2.

FORFEITURE
(18 U.S.C. § 982(a)(1) and (a)(7))

1. The allegations of this Superseding Indictment are hereby re-alleged and by this reference fully incorporated herein for the purpose of alleging forfeiture to the United States of certain property in which the defendants, **PETER PORT, MARK HERNANDEZ, and BRIAN DUBLYNN**, have an interest.

2. Upon conviction of a violation of Title 18, United States Code, Sections 1347 or 1349, as alleged in this Superseding Indictment, the defendants shall forfeit to the United States any property, real or personal, that constitutes or is derived, directly or indirectly, from gross proceeds traceable to the commission of the offense, pursuant to Title 18, United States Code, Section 982(a)(7).

3. Upon conviction of a violation of Title 18, United States Code, Sections 1956(a)(1)(B)(i), 1956(h) or 1957(a), as alleged in this Superseding Indictment, the defendants

shall forfeit to the United States any property, real or personal, involved in such offense, and any property traceable to such property, pursuant to Title 18, United States Code, Section 982(a)(1).

4. Upon conviction of a violation of Title 21, United States Code, Sections 841 or 846, as alleged in this Superseding Indictment, the defendants shall forfeit to the United States any property constituting, or derived from, any proceeds obtained, directly or indirectly, as a result of such offense, and any property used, or intended to be used, in any manner or part, to commit, or to facilitate the commission of, such offense, pursuant to Title 21, United States Code, Section 853.

5. The property subject to forfeiture as a result of the alleged offenses includes, but is not limited to, the following:

- (i) real property located at 50 Starling Court, Roslyn, New York 11576;
- (ii) real property located at 3579 NW Clubside Circle, Boca Raton, Florida 33496;
- (iii) real property located at 1417 NE 17th Street, Ft. Lauderdale, Florida 33305;
- (iv) A 2016 Mercedes Model E400C4, bearing Vehicle Identification Number WDDKJ6HB9GF317576;
- (v) The contents of account number 483049118363 at Bank of America held in the name of Safe Haven Recovery, Inc.;
- (vi) The contents of account number 483072846301 at Bank of America held in the name of Safe Haven Recovery, Inc.;
- (vii) The contents of account number 483049118305 at Bank of America held in the name of Kiawah Properties Corp.;

- (viii) The contents of account number 4835570293 at Bank of America held in the name of Interactive Abstract Corp.;
- (ix) The contents of account number 4835570303 at Bank of America held in the name of Interactive Abstract Corp.;
- (x) The contents of account number 898086389630 at Bank of America held in the name of Troon Consulting, Inc.;
- (xi) The contents of account number 483068437818 at Bank of America held in the name of Excel One Municipal Corp.; and
- (xii) The contents of account number 898095180930 at Bank of America held in the name of First Rate Medical Billing Corp.;

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

- 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 divided without difficulty,

the United States shall be entitled to forfeiture of substitute property under the provisions of Title 21, United States Code, Section 853(p), and such substitute property includes, but is not limited to, the following:

- (i) Real Property located at 12355 SW 76th Street, Miami, Florida 33183; and
- (ii) Real property located at 12680 SW 77th Street, Miami, Florida, 33183.

All pursuant to Title 18, United States Code, Section 982(a)(1) and (a)(7), Title 21, United States Code, Section 853, as incorporated by Title 28, United States Code, Section 2461(c), and Title 21, United States Code, Section 853.

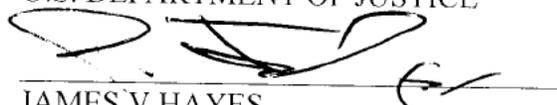
A T D I E D I T

FOREPERSON


ARIANA FAJARDO ORSHAN
UNITED STATES ATTORNEY
SOUTHERN DISTRICT OF FLORIDA

DANIEL KAHN
ACTING CHIEF
CRIMINAL DIVISION, FRAUD SECTION

ALLAN MEDINA
DEPUTY CHIEF
CRIMINAL DIVISION, FRAUD SECTION
U.S. DEPARTMENT OF JUSTICE


JAMES V HAYES
SENIOR LITIGATION COUNSEL
LIGIA MARKMAN
TRIAL ATTORNEY
CRIMINAL DIVISION, FRAUD SECTION
U.S. DEPARTMENT OF JUSTICE

UNITED STATES OF AMERICA

CASE NO. 19-CR-20583-SINGHAL(s)

v.

PETER PORT, et al.

CERTIFICATE OF TRIAL ATTORNEY*

Superseding Case Information:

_____ Defendants. /

Court Division: (Select One)

Miami _____ Key West
 _____ FTL _____ WPB _____ FTP

New defendant(s) Yes No _____
 Number of new defendants 1
 Total number of counts 18

1. I have carefully considered the allegations of the indictment, the number of defendants, the number of probable witnesses and the legal complexities of the Indictment/Information attached hereto.
2. I am aware that the information supplied on this statement will be relied upon by the Judges of this Court in setting their calendars and scheduling criminal trials under the mandate of the Speedy Trial Act, Title 28 U.S.C. Section 3161.
3. Interpreter: (Yes or No) No
 List language and/or dialect _____
4. This case will take 30 days for the parties to try.
5. Please check appropriate category and type of offense listed below:

(Check only one)

I 0 to 5 days _____
 II 6 to 10 days _____
 III 11 to 20 days _____
 IV 21 to 60 days _____
 V 61 days and over _____

(Check only one)

Petty _____
 Minor _____
 Misdem. _____
 Felony _____

6. Has this case previously been filed in this District Court? (Yes or No) Yes _____
 If yes: Judge SINGHAL Case No. 19-CR-20583-RS
 (Attach copy of dispositive order)
 Has a complaint been filed in this matter? (Yes or No) Yes
 If yes: Magistrate Case No. 20-MJ-03663-GOODMAN
 Related miscellaneous numbers: _____
 Defendant(s) in federal custody as of _____
 Defendant(s) in state custody as of _____
 Rule 20 from the District of _____

Is this a potential death penalty case? (Yes or No) No

7. Does this case originate from a matter pending in the Central Region of the U.S. Attorney's Office prior to August 9, 2013 (Mag. Judge Alicia O. Valle)? Yes _____ No
8. Does this case originate from a matter pending in the Northern Region of the U.S. Attorney's Office prior to August 8, 2014 (Mag. Judge Shaniek Maynard)? Yes _____ No
9. Does this case originate from a matter pending in the Central Region of the U.S. Attorney's Office prior to October 3, 2019 (Mag. Judge Jared Strauss)? Yes _____ No



JAMES V. HAYES
 ASSISTANT UNITED STATES ATTORNEY
 District Court No.

*Penalty Sheet(s) attached

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

PENALTY SHEET

Defendant's Name: PETER PORT

Case No:

Count #1:

Conspiracy to commit wire fraud and health care fraud

Title 18, United States Code, Sections 1349, 1343, and 1341

***Max. Penalty:** Twenty (20) years' imprisonment

Counts #2-6:

Health care fraud

Title 18, United States Code, Section 1347

***Max. Penalty:** Ten (10) years' imprisonment as to each count

Count #7:

Conspiracy to dispense and distribute a controlled substance

Title 21, United States Code, Section 846

***Max. Penalty:** Ten (10) years' imprisonment

Count #12:

Unlawful dispensing and distributing a controlled substance

Title 21, United States Code, Section 841(a)(1)

***Max. Penalty:** Ten (10) years' imprisonment

Count #13:

Conspiracy to pay and receive kickbacks

Title 18, United States Code, Section 371

*** Max. Penalty:** Five (5) years' imprisonment

Counts #14-18:

Payment and offer of kickbacks in exchange for use of services

Title 18, United States Code, Section 220(a)(2)(B)

*** Max. Penalty:** Ten (10) years' imprisonment as to each count

Count #19:

Conspiracy to commit money laundering

Title 18, United States Code, Section 1956(h)

*** Max. Penalty:** Twenty (20) years' imprisonment

Counts #21, 26-27:

Money laundering

Title 18, United States Code, Section 1956(a)(1)(B)(i)

*** Max. Penalty:** Twenty (20) years' imprisonment as to each count

Counts #28-29:

Money Laundering

Title 18, United States Code, Section 1957

*** Max. Penalty:** Ten (10) years' imprisonment as to each count

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

PENALTY SHEET

Defendant's Name: MARK HERNANDEZ

Case No: 19-CR-20583-SINGHAL(s)

Count #1:

Conspiracy to commit wire fraud and health care fraud

Title 18, United States Code, Sections 1349

*** Max. Penalty:** Twenty (20) years' imprisonment

Counts #2-6:

Health care fraud

Title 18, United States Code, Section 1347

*** Max. Penalty:** Ten (10) years' imprisonment as to each count

Count #7:

Conspiracy to dispense and distribute a controlled substance

Title 21, United States Code, Section 846

*** Max. Penalty:** Ten (10) years' imprisonment

Counts #8-12:

Dispensing and distributing a controlled substance

Title 21, United States Code, Section 841(a)(1)

*** Max. Penalty:** Ten (10) years' imprisonment as to each count

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

PENALTY SHEET

Defendant's Name: BRIAN DUBLYNN

Case No: 19-CR-20583-SINGHAL(s)

Count #1:

Conspiracy to commit wire fraud and health care fraud

Title 18, United States Code, Sections 1349

*** Max. Penalty:** Twenty (20) years' imprisonment

Counts #2-6:

Health care fraud

Title 18, United States Code, Section 1347

*** Max. Penalty:** Ten (10) years' imprisonment as to each count

Count #19:

Conspiracy to commit money laundering

Title 18, United States Code, Section 1956(h)

*** Max. Penalty:** Twenty (20) years' imprisonment

Counts #20, 22-25:

Money laundering

Title 18, United States Code, Section 1956(a)(1)(B)(i)

*** Max. Penalty:** Twenty (20) years' imprisonment as to each count

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

PENALTY SHEET

Defendant's Name: JENNIFER SANFORD

Case No: 19-CR-20583-SINGHAL(s)

Count #13:

Conspiracy to pay and receive kickbacks

Title 18, United States Code, Section 371

* **Max. Penalty:** Five (5) years' imprisonment
