

FILED

UNITED STATES DISTRICT COURT  
MIDDLE DISTRICT OF FLORIDA  
TAMPA DIVISION

2020 SEP 29 PM 3:10

CLERK, US DISTRICT COURT  
MIDDLE DISTRICT FLORIDA  
TAMPA, FLORIDA

UNITED STATES OF AMERICA

CASE NO. 8:20-cr-299T-02-SGF  
18 U.S.C. § 1349

v.

ADAM KOVACSIK

INFORMATION

The United States Attorney charges:

COUNT ONE  
(Conspiracy to Commit Health Care Fraud)

A. Introduction

At all times material to this Information:

The Conspirators and Their Enterprises

1. Adam Kovacsik was a resident of the Middle District of Florida and an owner, a manager, the registered agent, and the founder of A2B Insurance Solutions LLC ("A2B Insurance").
2. Christopher Ryan Helfrich was a resident of the Middle District of Florida, an owner of A2B Insurance, and the owner, registered agent, and founder of CRH Holdings, LLC ("CRH Holdings").
3. Individual 1 was a resident of the Middle District of Florida and an owner and manager of A2B Insurance.

4. A2B Insurance was a limited liability company located in Seminole County in the Middle District of Florida.

5. CRH Holdings was a limited liability company established in or about January 2016 in Hillsborough County in the Middle District of Florida.

6. Willie McNeal, IV was a resident of the Middle District of Florida and owner, president, founder, chief executive officer, and the registered agent of Integrated Support Plus, Inc. (“Integrated”).

7. Integrated was a purported telemedicine company located in in Hernando County in the Middle District of Florida.

#### The Medicare Program

8. The Medicare Program (“Medicare”) was a federal health insurance program that provided medical benefits, items, and services to beneficiaries:

- a. aged 65 and older,
- b. under 65 with certain disabilities, and
- c. of all ages with end-stage renal disease (permanent kidney failure requiring dialysis or a kidney transplant).

9. The Centers for Medicare and Medicaid Services (“CMS”) was an agency of the U.S. Department of Health and Human Services (“HHS”), and was the federal government body responsible for the administration of Medicare.

10. Medicare programs covered different types of benefits that were separated into different program parts. Medicare Part B covered, among other things, doctors’

services, outpatient care, and certain medical equipment that were medically necessary.

DME Claims Submitted under Medicare Part B

11. Durable medical equipment (“DME”) were reusable medical equipment such as orthotic devices, walkers, canes, or hospital beds. Orthotic devices were a type of DME that included knee braces, back braces, shoulder braces, and wrist braces (collectively, “braces”).

12. DME companies, physicians, and other health care providers that provided services to Medicare beneficiaries were referred to as Medicare providers. To participate in Medicare, providers were required to submit an application in which the providers agreed to comply with all Medicare-related laws, rules, and regulations. If Medicare approved a provider’s application, Medicare assigned the provider a Medicare “provider number.” A health care provider with a Medicare provider number could file claims with Medicare to obtain reimbursement for medically necessary items and services rendered to beneficiaries. Medicare providers were given access to Medicare manuals and service bulletins describing billing procedures, rules, and regulations.

13. Medicare reimbursed DME providers and other health care providers for medically necessary items and services rendered to beneficiaries. To receive payment from Medicare, providers submitted or caused the submission of claims to Medicare, either directly or through a billing company.

14. A Medicare claim for DME reimbursement was required to set forth,

among other information, the beneficiary's name and unique Medicare identification number, the equipment provided to the beneficiary, the date the equipment was provided, the cost of the equipment, and the name and unique physician identification number of the physician who prescribed or ordered the equipment.

15. Medicare would pay a claim for the provision of DME only if the equipment was medically necessary, ordered by a licensed provider, and actually provided to the beneficiary. Medicare claims were required to be properly documented in accordance with Medicare rules and regulations. Medicare would not reimburse providers for claims that were procured through the payment of kickbacks and bribes.

**B. The Conspiracy**

16. From in or about August 2018 through in or about October 2019, in the Middle District of Florida, and elsewhere, the defendant,

ADAM KOVACSIK

did knowingly and willfully combine, conspire, confederate, and agree with others, including Christopher Ryan Helfrich, Individual 1, Willie McNeal, IV, and others, to commit health care fraud, in violation of 18 U.S.C. § 1347.

**C. Purpose of the Conspiracy**

17. It was a purpose of the conspiracy for Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, Willie McNeal, IV, and others to unlawfully enrich themselves



by, among other things: (a) offering and paying kickbacks and bribes in exchange for signed doctors' orders for braces; (b) submitting and causing the submission of false and fraudulent claims to Medicare for braces that were ineligible for Medicare reimbursement and not medically necessary; (c) concealing and causing the concealment of kickbacks and bribes and false and fraudulent claims; and (d) diverting fraud proceeds for their personal use and benefit, the use and benefit of others, and to further the fraud.

**D. Manner and Means**

18. The manner and means by which the defendant and his conspirators sought to accomplish the purposes of the conspiracy included, among others, the following:

a. It was a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, and Individual 1 would and did own and control A2B Insurance.

b. It was further a part of the conspiracy that Christopher Ryan Helfrich would and did own and control CRH Holdings.

c. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, and others would and did obtain access to the personal identification information ("PII") and purported personal health information of thousands of Medicare beneficiaries.

d. It was further a part of the conspiracy that Christopher Ryan Helfrich, through CRH Holdings, would and did pay international call centers to obtain

Medicare beneficiaries' contact information, contact the Medicare beneficiaries using telemarketing, and induce the Medicare beneficiaries to accept braces regardless of medical necessity by touting the braces as paid for by insurance.

e. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, and others would and did purchase from CRH Holdings Medicare beneficiaries' PII and purported personal health information and recordings of the call center's calls to the Medicare beneficiaries.

f. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, and others would and did send the Medicare beneficiaries' PII and purported personal health information to Integrated and others.

g. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, and Individual 1 would and did pay illegal kickbacks and bribes to Integrated and others in exchange for arranging for medical providers to sign orders for DME regardless of medical necessity.

h. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, Willie McNeal, IV, and others would and did disguise the nature and source of these kickbacks and bribes by entering into sham contracts and by generating and causing the generation of fraudulent invoices that falsely identified the payments as for "BPO" (which is shorthand for "business process outsourcing").

i. It was further a part of the conspiracy that Integrated and others

would and did cause medical providers to sign DME orders for braces regardless of medical necessity, in the absence of a pre-existing relationship with the Medicare beneficiary, without a physical examination of the Medicare beneficiary, and without seeing, and in some cases even speaking to, the Medicare beneficiary.

j. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, and others would and did choose which braces medical providers would sign orders for DME based on which braces would be the most profitable and Medicare was least likely to question, not based on the medical need of the patients.

k. It was further a part of the conspiracy that in exchange for the referral of the brace orders, Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, and others would and did receive illegal kickbacks and bribes from conspirators at DME providers and conspirators acting as intermediaries for DME providers.

l. It was further a part of the conspiracy that Adam Kovacsik, Christopher Ryan Helfrich, Individual 1, and others would and did disguise the nature and source of these kickbacks and bribes from DME providers, and their intermediaries, by entering into sham contracts that falsely identified the payments as for a flat or hourly rate, when in reality the conspirators paid Kovacsik a set amount per brace order.

m. It was further a part of the conspiracy that the conspirators at DME providers would and did use these fraudulently obtained brace orders to support false



and fraudulent claims to Medicare.

n. It was further a part of the conspiracy that, from in or about August 2018 through in or about February 2019, Adam Kovacsik and his conspirators at A2B Insurance would and did pay, and cause to be paid, approximately \$310,790 to CRH Holdings in exchange for PII and purported personal health information and recordings of the call center's calls to the Medicare beneficiaries.

o. It was further a part of the conspiracy that, from in or about August 2018 through in or about October 2019, Adam Kovacsik, Christopher Ryan Helfrich, and Individual 1 would and did pay, and cause to be paid, to be paid approximately \$944,955 in illegal kickbacks and bribes in exchange for Medicare beneficiaries' PII and purported health information and in exchange for signed brace orders to their conspirators at Integrated and others.

p. It was further a part of the conspiracy that, from in or about August 2018 through in or about October 2019, Adam Kovacsik, Christopher Ryan Helfrich, and Individual 1 would and did receive approximately \$1,470,247 in illegal kickbacks and bribes in exchange for signed brace orders from their conspirators at DME providers and conspirators acting as intermediaries for DME providers.

All in violation of 18 U.S.C. § 1349.



### FORFEITURE

1. The allegations contained in Count One are re-alleged and incorporated by reference for the purpose of alleging forfeiture pursuant to 18 U.S.C. § 982(a)(7).

2. Upon conviction for the violations alleged in Count One, the defendant shall forfeit to the United States of America, pursuant to 18 U.S.C. § 982(a)(7), any and all property, real or personal, that constitutes or is derived, directly or indirectly, from the gross proceeds traceable to the commission of the offenses.

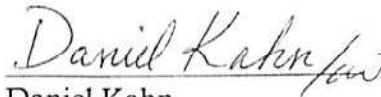
3. The property to be forfeited includes, but is not limited to, an order of forfeiture in the amount of at least \$482,367.43, which is the amount the defendant obtained as a result of the commission of the offense, and the following asset which constitutes proceeds traceable to the commission of the offense.

4. If any of the property described above, as a result of any act or omission of the defendant:

- 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 of America shall be entitled to forfeiture of substitute property under the provisions of 21 U.S.C. § 853(p), as incorporated by 18 U.S.C. § 982(b)(1).

MARIA CHAPA LOPEZ  
United States Attorney

A handwritten signature in cursive script, appearing to read "Daniel Kahn".

Daniel Kahn  
Acting Chief, Fraud Section  
U.S. Department of Justice

A handwritten signature in cursive script, appearing to read "Cath. W.". The signature is written over a horizontal line.

Catherine Wagner  
Trial Attorney  
Fraud Section, Criminal Division  
U.S. Department of Justice