

UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF NORTH CAROLINA  
WESTERN DIVISION

NO. 5:20-CR-399

UNITED STATES OF AMERICA	)	
	)	
v.	)	<u>CRIMINAL INFORMATION</u>
	)	
JIMMY GUESS	)	
_____	)	

The United States Attorney charges that:

**Introduction**

1. Beginning no later than in or around December 2018, and continuing until at least in or around February 2020, in the Eastern District of North Carolina and elsewhere, the defendant, JIMMY GUESS, and Furman Alexander Ford conspired with others, known and unknown to the United States Attorney, in a scheme to defraud the Medicare Program by submitting false claims for services that were never provided in order to obtain money that was not owed.

**The Medicare Program**

2. The Medicare Program (Medicare) is the federal healthcare program for the aged and disabled established by Congress in 1965, as Title XVIII of the Social Security Act and codified at 42 U.S.C. § 1395. Medicare is administered through the Centers for Medicare and Medicaid Services (CMS). CMS is a division of the United States Department of Health and Human Services. Individuals who receive benefits

under Medicare are referred to as Medicare “beneficiaries.” Medicare is a “health care benefit program” as defined by Title 18, United States Code, Section 24(b).

3. Medicare includes coverage under four primary components, hospital insurance (Part A); medical insurance (Part B), Medicare Advantage (Part C) and prescription drug benefits (Part D). Medicare Part B of the Medicare Program covers the cost of physicians’ services and other ancillary services not covered by Part A, including outpatient mental health services.

4. By becoming a participating provider in Medicare Part B, enrolled providers agree to abide by the policies and procedures, rules, and regulations governing reimbursement. In order to receive Medicare funds, enrolled providers, together with their authorized agents, employees, and contractors, are required to abide by all the provisions of the Social Security Act, the regulations promulgated under the Act, and applicable policies and procedures, rules, and regulations, issued by CMS and its authorized agents and contractors.

5. Upon certification, the medical provider, whether a group or an individual, is assigned a provider identification number for billing purposes (referred to as a PIN). When the medical provider renders a service, the provider submits a claim for reimbursement to the Medicare contractor/carrier that includes the PIN assigned to that medical provider. When an individual medical provider is associated with a group, Medicare Part B requires that the individual provider number

associated with the group be placed on the claim submitted to the Medicare contractor.

6. Health care providers are provided with online access to Medicare manuals and bulletins describing proper billing procedures and billing rules and regulations. Providers can only submit claims to Medicare for services they rendered and providers must maintain patient records to verify that the services were provided as described on the claim. The basic requirement for any claim to be payable by Medicare is that the service must be “reasonable and necessary for the diagnosis or treatment of illness or injury.” What is “reasonable and necessary” for certain conditions is defined based upon accepted practices in the medical community, as further defined by National Coverage Determinations issued by CMS and Local Coverage Determinations issued by the Medicare administrative contractor for the state of North Carolina.

#### **The Defendant and Relevant Entity**

7. The defendant, JIMMY GUESS, was a licensed clinical social worker who provided mental health services in North Carolina.

8. In or around August 2018, Furman Alexander Ford (“Ford”) hired JIMMY GUESS to be a consultant for his company, Integrated Alliance for Managed Healthcare, PLLC (“IAM Healthcare”), and to provide mental health services to the company’s patients primarily through a telehealth model.

9. On or about August 14, 2018, JIMMY GUESS and an individual named F.A. submitted an application for IAM Healthcare to become a Medicare Part B group provider. The application listed F.A. as the owner, GUESS as the managing employee, and Ford as the vice president of finance.

**The Health Care Fraud Conspiracy**

10. Beginning no later than in or around December 2018, and continuing until at least in or around February 2020, in the Eastern District of North Carolina and elsewhere, the defendant, JIMMY GUESS, and Furman Alexander Ford conspired with others, known and unknown to the United States Attorney, in a scheme to defraud Medicare by submitting false claims to Medicare for mental health services that were never provided to Medicare beneficiaries.

11. Specifically, JIMMY GUESS, Furman Alexander Ford, and others conspired to submit claims to Medicare, totaling approximately \$242,964.15, for mental health services allegedly provided to approximately 73 beneficiaries between in or around October 2018 and in or around February 2020, when the conspirators well knew and believed, the beneficiaries never received the billed services.

12. It was also part of the conspiracy that Ford and others known and unknown to the United States Attorney gathered the Medicare information of unsuspecting beneficiaries by marketing telehealth services and electronic records services to various entities, which often resulted in the exchange of Medicare

beneficiary information. Moreover, Ford, through the IAM Healthcare Foundation, also offered food in exchange for Medicare beneficiary numbers.

13. Medicare paid IAM Healthcare approximately \$163,271.74 as a result of the conspirators' fraudulent claim submissions.

14. Between in or around January 2020, and in or around June 2020, JIMMY GUESS, using the entity name Marvor Healthcare ("Marvor"), submitted numerous Medicare claims for services allegedly provided to approximately 24 of the Medicare beneficiaries billed under the IAM Healthcare scheme. The dates of the alleged services were between in or around December 2019 and in or around May 2020. Medicare paid Marvor approximately \$37,209.13 as a result of the fraudulent claim submissions.

#### COUNT ONE

15. The United States Attorney realleges and incorporates by reference herein all of the foregoing allegations of this Bill of Information and further alleges that beginning no later than in or around December 2018, and continuing until at least in or around February 2020, in the Eastern District of North Carolina and elsewhere, the defendant, JIMMY GUESS, and Furman Alexander Ford did knowingly combine, conspire, confederate, and agree with other persons, known and unknown to the United States Attorney, to commit an offense against the United States, that is, health care fraud, in violation of Title 18, United States Code, Section 1347.

### **Object of the Conspiracy**

16. It was a part and object of the conspiracy that JIMMY GUESS, Furman Alexander Ford, and others, known and unknown to the United States Attorney, having devised the above-described scheme and artifice to defraud, and to obtain by means of materially false and fraudulent pretenses, representations, and promises, any of the money owned by and under the custody and control of a health care benefit program, as defined in Title 18, United States Code, Section 24, in connection with the delivery of, and payment for, health care benefits, items, and services, by submitting and causing to be submitted false and fraudulent claims to the Medicare Program, in violation of Title 18, United States Code, Section 1347.

### **Manner and Means**

Among the manner and means used to effect and accomplish the purpose of the conspiracy included, but were not limited to, the following:

17. The conspirators, including JIMMY GUESS and Furman Alexander Ford, carried out the conspiracy through the manner and means described in the foregoing paragraphs of this Bill of Information, among others.

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

## FORFEITURE NOTICE

Upon conviction of the offense set forth in this Criminal Information, the defendant, JIMMY GUESS, shall forfeit to the United States, pursuant to Title 18, United States Code, Section 982(a)(7) and Title 18, United States Code, Section 981(a)(1)(C), as made applicable by Title 28, United States Code, Section 2461(c), any property, real or personal, which constitutes or is derived from proceeds traceable to said violation.

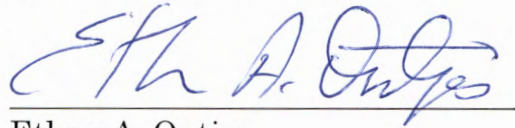
If any of the above-described forfeitable property, as a result of any act or omission of the defendant,

- (1) cannot be located upon the exercise of due diligence;
- (2) has been transferred or sold to, or deposited with, a third person;
- (3) has been placed beyond the jurisdiction of the court;
- (4) has been substantially diminished in value; or
- (5) has been commingled with other property which cannot be subdivided without difficulty;

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it is the intent of the United States, pursuant to Title 21, United States Code, Section 853(p), to seek forfeiture of any other property of said defendant up to the value of the above forfeitable property.

ROBERT J. HIGDON, JR.  
United States Attorney



Ethan A. Ontjes  
Assistant United States Attorney  
Criminal Division