



THE UNITED STATES ATTORNEY'S OFFICE
EASTERN DISTRICT *of* NEW YORK

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Department of Justice

U.S. Attorney's Office

Eastern District of New York

FOR IMMEDIATE RELEASE

Wednesday, September 30, 2020

Two Doctors, Two Licensed Physical Therapists, a Pharmacist, and Four Pharmacy Owners and Operators Among Those Charged in Brooklyn as Part of National Health Care Fraud Takedown

Fifteen individuals, including two doctors, two licensed physical therapists, a licensed clinical social worker, a pharmacist and four pharmacy owners and operators, have been charged for their participation in schemes that fraudulently billed the Medicare and Medicaid programs for more than \$15 million. The charges filed in federal court in Brooklyn, New York are part of a nationwide health care fraud takedown led by the Medicare Fraud Strike Force, which resulted in criminal charges against more than 300 individuals for their alleged participation in health care fraud schemes involving approximately \$6 billion in fraudulent claims.

The charges were announced by Seth D. DuCharme, Acting United States Attorney for the Eastern District of New York; Brian C. Rabbitt, Acting Assistant Attorney General of the Justice Department's Criminal Division; William F. Sweeney, Jr., Assistant Director-in-Charge, Federal Bureau of Investigation, New York Field Office (FBI); Scott Lampert, Special Agent-in-Charge, U.S. Department of Health and Human Services - Office of Inspector General, Office of Investigations, New York Regional Office (HHS-OIG); Ray Donovan, Special Agent-in-Charge, Drug Enforcement Administration, New York Division (DEA); Jonathan D. Larsen, Special Agent-in-Charge, Internal Revenue Service-Criminal Investigation, New York (IRS-CI), Acting Medicaid Inspector General Erin E. Ives of New York State Office of the Medicaid Inspector General (OMIG) and Dermot F. Shea, Commissioner New York City Police Department (NYPD).

The results of the nationwide takedown were announced today Acting Assistant Attorney General Rabbitt; Assistant Director Calvin Shivers of the FBI's Criminal Investigative Division; Deputy Inspector General Gary Cantrell of HHS-OIG; and Assistant Administrator Tim McDermott of the DEA.

“The defendants, many of them healthcare professionals, abused their positions by engaging in fraud in order to steal precious benefit funds that were meant to help the most vulnerable among us,” stated Acting United States Attorney DuCharme. “The U.S. Attorney’s Office for the Eastern District of New York is working arm-in-arm with our federal and local law enforcement partners to protect our community and our taxpayer-funded programs from the potential harm posed by corrupt healthcare professionals and those who aid them.”

“This nationwide enforcement operation is historic in both its size and scope, alleging billions of dollars in healthcare fraud across the country,” stated Acting Assistant Attorney General Rabbitt. “These cases hold accountable those medical professionals and others who have exploited health care benefit programs and patients for personal gain. The cooperative law enforcement actions announced today send a clear deterrent message and should leave no doubt about the department’s ongoing commitment to ensuring the safety of patients and the integrity of health care benefit programs, even amid a national health emergency.”

“As alleged today, the defendants took advantage of programs established for the benefit of those less fortunate, illegally profiting by ripping off the rest of the law abiding public,” stated FBI Assistant Director-in-Charge Sweeney. “This is not a victimless crime - health care fraud is a theft against all of us who contribute hard earned income and taxes into the system. While today’s charges are a victory for the public at large, and those who play by the rules, they also highlight a constant glaring problem. It is easy to illegally profit in the health care field, and the FBI’s New York office will continue to investigate and hold accountable those who break federal law while lining their own pockets.”

“Medical professionals who scheme to enrich themselves through health care fraud – such as Dr. Kalepu’s participation in a telefraud durable medical equipment scam -- undermine taxpayer-funded programs and drive up health care costs for everyone,” stated HHS-OIG Special Agent-in-Charge Lampert. “This takedown shows our commitment to collaborate with our law enforcement partners and effectively investigate such corrosive fraud schemes.”

“It is our duty to weed out those health care professionals who manipulate their position for profit,” stated DEA Special Agent-in-Charge Donovan. “DEA, and our law enforcement partners, are committed to safeguarding the integrity of our healthcare system and keeping Americans safe. I applaud all of our partners for their significant work in these investigations.”

“IRS-CI is proud to lend our financial expertise in this effort to uncover a wide web of criminal behavior that impacts our financial system and public trust,” stated IRS-CI Special Agent-in-Charge Larsen. “Both Diler and Hussnain are guilty of conspiring to participate in this broad scheme to steal from the United States taxpayers through both Medicare and Tax Fraud.”

“These arrests serve notice to those who attempt to exploit the Medicaid program for personal gain,” stated Acting Medicaid Inspector General Ives. “My office will continue to work closely with our law enforcement partners to root out fraud and hold wrongdoers fully accountable.”

“This sweeping set of federal charges highlights law enforcement’s combined efforts to protect innocent citizens and ensure integrity across our vital health systems,” stated NYPD Commissioner Shea. “I commend our NYPD investigators, and all of our partners, for their important work in these cases.”

Schemes charged in the Eastern District of New York, detailed in three indictments, five complaints and three criminal information, include the following:

United States v. Dalmacio Francisco and Michael Othman: The complaint charges Dr. Delmacio Francisco and Michael Othman with oxycodone distribution. The complaint alleges that Dr. Francisco, who operated two medical offices in Queens, provided large-quantity oxycodone scripts to “patients” – individuals he never actually evaluated – who were recruited by Othman in exchange for cash. Dr. Francisco also prescribed oxycodone in the names of two individuals who were incarcerated when the prescriptions were issued. During a search of Francisco’s home, DEA agents found \$150,000 in bundled cash in a hidden lock box. Both defendants made their initial appearance by video before United States Magistrate Judge Steven M. Gold on May 20, 2020. The case is being prosecuted by Assistant United States Attorneys James McDonald and Elizabeth Macchiaverna of the U.S. Attorney’s Office for the Eastern District of New York.

United States v. Anand Kalepu: The information charges Anand Kalepu, a medical doctor, with conspiracy to commit health care fraud. The charges stem from Dr. Kalepu’s work with a telemedicine company through which he allegedly caused the submission of false and fraudulent claims for durable medical equipment (“DME”) to Medicare. Between 2018 and 2019 the amount billed to Medicare for Dr. Kalepu’s DME prescriptions was in excess of \$1.3 million. Dr. Kalepu pleaded guilty to the information before United States District Judge Ann M. Donnelly at the federal courthouse in Brooklyn, and the guilty plea was unsealed on September 30, 2020. The case is being prosecuted by Trial Attorney Miriam Glaser Dauermann of the Criminal Division’s Fraud Section.

United States v. Mahmoud Elsanaa and Olga Popovych: The indictment charges Mahmoud Elsanaa, a licensed physical therapist and clinic owner, and Olga Popovych, the office manager of several physical therapy clinics controlled by Elsanaa, with one count of conspiracy to commit health care fraud (Elsanaa only) and one count of conspiracy to falsify medical records (Elsanaa and Popovych). The charges stem from the defendants’ alleged role in the operation of physical therapy clinics that billed Medicare and Medicaid for services that were unnecessary, procured by kickbacks, provided by unlicensed practitioners, or otherwise not provided as billed. Elsanaa and Popovych were arrested and arraigned before United States Magistrate Judge Lois Bloom on September 17, 2020. The case is being prosecuted by Trial Attorney Miriam Glaser Dauermann of the Criminal Division’s Fraud Section.

United States v. Mazen Abdel Magid: The complaint charges Mazen Abdel Magid, a licensed physical therapist and clinic owner and a business partner of Mahmoud Elsanaa, with one count of submitting false claims to Medicare. The charges stem from Abdel Magid’s alleged submission of claims to Medicare for physical therapy services purportedly provided at his physical therapy clinic when, in fact, he was overseas and could not have provided the services. Abdel Magid was arrested and made an initial appearance before United States Magistrate Judge Lois Bloom on September 17, 2020. The case is being prosecuted by Trial Attorney Miriam Glaser Dauermann of the Criminal Division’s Fraud Section.

United States v. Vladimir Geykhman: The indictment charges Vladimir Geykhman with one count of conspiracy to commit health care fraud and one count of conspiracy to commit money laundering. The charges stem from the defendant’s alleged role in falsifying physical evaluation

records in support of claims submitted through no-fault automobile insurance policies and laundering the proceeds therefrom. Between March 2019 and August 2019, Geykhman was paid by New York State automobile insurance providers a total of approximately \$1 million for claims that were based upon falsified patient records. Geykhman was arrested and arraigned before United States Magistrate Judge Lois Bloom on September 17, 2020. The case is being prosecuted by Miriam Glaser Dauermann of the Criminal Division's Fraud Section.

United States v. Xuan Di Huang: The complaint charges Xuan Di Huang, also known as "Wendy Huang," an owner and operator of Zhiqing Social Adult Day Care in Flushing, Queens, with aiding and abetting and a substantive violation of the Anti-Kickback Statute. The charges stem from a scheme in which Huang allegedly paid and offered to pay kickbacks to Medicaid beneficiaries for their attendance at Zhiqing Social Adult Day Care. Between August 2019 and March 2020, Huang, through Zhiqing Social Adult Day Care, billed approximately \$3.2 million dollars to long term managed care plans for Medicaid beneficiaries. Huang was arrested and arraigned on August 27, 2020 before United States Magistrate Judge Lois Bloom. The case is being prosecuted by Assistant United States Attorney Elizabeth Macchiaverna of the U.S. Attorney's Office for the Eastern District of New York.

United States v. Nisha Diler: The information charges Nisha Diler, a licensed pharmacist, with conspiracy to commit health care fraud and subscribing a false tax return. The charges stem from Diler's role in a scheme to hold herself out as the supervising pharmacist at New Moon Pharmacy, when in fact she did not work at the pharmacy. Diler was paid kickbacks by Hussnain for her role in the scheme, which she then under-reported on her taxes. Between 2016 and 2019, Medicare and Medicaid reimbursed the pharmacy approximately \$3 million for pharmaceutical claims submitted through New Moon Pharmacy. Diler pleaded guilty to the information before United States District Judge Rachel Kovner at the federal courthouse in Brooklyn on September 16, 2020. The case is being prosecuted by Trial Attorney Miriam Glaser Dauermann of the Criminal Division's Fraud Section.

United States v. Harris Hussnain: The information charges Harris Hussnain with conspiracy to commit health care fraud, narcotics distribution and unlawful financial transactions. The charges stem from Hussnain's ownership of a Queens pharmacy, New Moon Pharmacy, and dispensing of prescription medications, including large amounts of Oxycodone, when the pharmacy did not employ a full-time licensed pharmacist. Instead, Hussnain paid a co-conspirator, Nisha Diler, a licensed pharmacist, to hold herself out as the full-time pharmacist despite the fact that she visited the pharmacy only sporadically. Between 2016 and 2019 Medicare and Medicaid reimbursed New Moon Pharmacy approximately \$3 million for pharmaceutical claims. Hussnain pleaded guilty to the information before United States District Judge Rachel Kovner at the federal courthouse in Brooklyn on September 29, 2020. The case is being prosecuted by Trial Attorney Miriam Glaser Dauermann of the Criminal Division's Fraud Section.

United States v. Aleah Mohammed, Aripa Mohammed and Shejer El Maliki: A criminal complaint charges Aleah Mohammed, Aripa Mohammed and Shejer El Maliki, the owners and operators of the pharmacy Village Stardrugs Inc. in Queens, New York, with conspiracy to commit health care fraud. Additionally, Aleah Mohammed was charged with health care fraud and aggravated identity theft, and Aripa Mohammed and Shejer El Maliki were each charged with money laundering. The charges stem from their alleged roles in a scheme to submit claims through the

pharmacy for medications that were not in fact prescribed as claimed, including claims for purportedly dispensing medications when the pharmacy was no longer licensed by the State of New York. From March 2019 to March 2020, Medicare Part D plans reimbursed the pharmacy approximately \$1.5 million for pharmaceutical claims, \$1.4 million of which was reimbursed when the pharmacy was no longer licensed. Aleah Mohammed, Aripa Mohammed and Shejer El Maliki were arrested and arraigned before United States Magistrate Judge Roanne L. Mann on September 23, 2020. The case is being prosecuted by Trial Attorney Andrew Estes of the Criminal Division's Fraud Section.

United States v. Gorgi Naumovski: The indictment charges Naumovski, the owner and operator of a durable medical equipment company Life Source Medical, Inc., in Greensboro, North Carolina, with one count of conspiracy to commit health care fraud. The charge stems from Naumovski's alleged role in a scheme in which claims were submitted to Medicare for durable medical equipment, including orthotic braces, where the defendant and his co-conspirators paid bribes and kickbacks by purchasing doctors' orders for the equipment, including equipment that was not medically necessary. Between April 2016 and December 2018, Life Source Medical billed Medicare approximately \$4.1 million for claims for orthotics-related equipment and was paid approximately \$1.8 million on those claims. Naumovski was arrested and arraigned before United States Magistrate Judge Reona J. Daly by video in Benton, Illinois on September 29, 2020. The case is being prosecuted by Trial Attorney Andrew Estes of the Criminal Division's Fraud Section.

The charges are allegations and the defendants are presumed innocent unless and until proven guilty.

The Defendants:

NISHA DILER

Age: 40

Hicksville, NY

E.D.N.Y. Docket No.: 20-CR-279 (RPK)

HARRIS HUSSNAIN

Age: 40

Queens, NY

E.D.N.Y. Docket No. 20-CR-280 (RPK)

VLADIMIR GEYKHMAN

Age: 43

BROOKLYN, NY

E.D.N.Y. Docket No.: 20-CR-371 (AMD)

MAHMOUD ELSANAA

Age: 36

Wayne, NJ

POPOVYCH, OLGA

Age: 37

Brooklyn, NY

E.D.N.Y. Docket No.: 20-CR-373 (LDH)

MAGID, MAZEN ABDEL

Age: 37

Brooklyn, NY

E.D.N.Y. Docket No.: 20-MJ- 812

DR. ANAND KALEPU

Age: 70

Cleveland, OH

E.D.N.Y. Docket No. 19-CR-602

DR. DALMACIO FRANCISCO

Age: 75

Queens, NY

MICHAEL OTHMAN

Age: 48

Queens, NY

E.D.N.Y. Docket No.: 20-MJ-380

XUAN DI HUANG

Age: 59

Queens, NY

E.D.N.Y. Docket No. 20-MJ-733

GORGI NAUMOVSKI

Age: 52

DuQuoin, IL.

E.D.N.Y. Docket No.: 20-CR-384 (WFK)

ALEAH MOHAMMED (also known as "Abby")

Age: 35

Queens, NY

ARIPHA MOHAMMED

Age: 33

Queens, NY

SHEJER EL MALIKI (also known as “Shaggy”)

Age: 33

Queens, NY

E.D.N.Y. Docket No. 20-MJ-851

Topic(s):

Health Care Fraud

Component(s):

USAO - New York, Eastern

Contact:

John

Marzulli United States Attorney's Office (718)

254-6323

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