

United States Courts
Southern District of Texas
FILED

June 09, 2025

Nathan Ochsner, Clerk of Court

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

UNITED STATES OF AMERICA

v.

DAPHNE JOHNSON,
Defendant

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CRIMINAL NO.: 4:25-cr-

4:25-cr-300

INFORMATION

THE UNITED STATES ATTORNEY CHARGES THAT:

At all times material to this Information:

COUNT ONE
Health Care Fraud
(18 U.S.C. § 1347)

General Allegations

1. The Medicaid Program (“Medicaid”) was a state-administered health insurance program funded by the United States government and by the State of Texas. Medicaid helped pay for reasonable and necessary medical procedures, services, and items provided by qualified health care professionals to individuals who were deemed eligible under state low-income programs. Individuals who received benefits under Medicaid were assigned unique Patient Control Numbers (“PCNs”). Medicaid was a “health care benefit program,” as defined by Title 18, United States Code, Section 24(b).

2. The Texas Health and Human Services Commission (“HHSC”) was the state governmental agency responsible for the administration of Medicaid in Texas.

3. HHSC contracted with Managed Care Organizations (“MCOs”) to administer

program benefits to Medicaid recipients. MCO plans were operated by private companies approved by Medicaid.

4. Defendant Daphne Johnson was a resident of Stafford, Texas and a professional counselor licensed to provide mental health therapy services in Texas.

5. Wise Counsel Behavioral Health Agency (“Wise Counsel”) was a provider of mental health therapy services located in Houston, Texas. Daphne Johnson was the owner of Wise Counsel.

The Scheme to Defraud

6. Beginning in or about 2019 and continuing through in or about August 2022, in the Southern District of Texas and elsewhere, Daphne Johnson engaged in a scheme and artifice to defraud Medicaid by submitting, and causing to be submitted, through MCOs, false and fraudulent claims for mental health therapy services to Medicaid beneficiaries that were never provided. Over the course of the scheme, Daphne Johnson fraudulently billed Medicaid approximately \$793,804 of which \$331,112 were paid.

Execution of the Scheme to Defraud

7. On or about September 24, 2020, in the Southern District of Texas, in connection with the delivery of, and payment for, health care benefits, items, and services, the defendant,

DAAPHNE JOHNSON,

did knowingly and willfully execute, and attempt to execute the aforementioned scheme and artifice to defraud a health care benefit program affecting interstate commerce as defined in Title 18, United States Code, Section 24(b), that is Medicaid, 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 Medicaid, all in violation of Title 18, United States Code, Section 1347.

8. On or about September 24, 2020, the defendant, Daphne Johnson, for the purpose of executing the scheme and artifice to defraud, caused the transmission of the following claim to Medicaid, which was for the patient and the amount listed below.

Date of Service	Description of Services	Patient	Amount Billed to Medicaid	Amount Paid by Medicaid
September 20, 2020	Psychotherapy	T.V.	\$100	\$49.71

All in violation of Title 18, United States Code, Section 1347.

NICHOLAS J. GANJEI
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Southern District of Texas

By: Alexander Alum
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