

AFFIDAVIT IN SUPPORT OF CRIMINAL COMPLAINT

I, Jamon Raley, being duly sworn, hereby depose and state the following:

Affiant Background

1. I am a Special Agent with the Department of Health and Human Services Office of Inspector General (“HHSOIG”). I have been a Special Agent for over eight years and I am currently assigned to the Tampa Field Office charged with investigating health care crimes. I have received specialized training in health care fraud at HHSOIG Special Agent Basic Training.

2. I have conducted numerous criminal investigations and testified in judicial proceedings. I have worked with other federal, state, and local agencies in conducting these investigations. I have participated in all aspects of health care fraud investigations, including the execution of search warrants; interviews and debriefing of defendants, witnesses, and confidential informants; the use of undercover officers and informants; and conducting surveillance.

3. With HHSOIG, I conduct criminal and civil investigations regarding violations of health care laws, including investigations of physicians, pharmacists, durable medical equipment (“DME”) companies, and other medical related businesses.

4. This investigation in the Middle District of Florida began with a hotline complaint coupled with data analyses of Medicare billing records. The investigation to date has revealed conspirators were defrauding Medicare by submitting false and fraudulent claims for DME.

5. The facts set forth herein are based upon my personal observation, training, experience, and information from other law enforcement agents and analysts, as well as oversight representatives affiliated with the Medicare program, documents and records collected during the course of the investigation, witness interviews, and reports prepared by individuals familiar with the subject of this Affidavit.

6. This Affidavit is intended to show merely that there is sufficient probable cause for the requested warrant and does not set forth all of my knowledge about this matter. Based on my training, experience and the facts of this Affidavit there is probable cause to believe **RUSTAM ABDAEV**, individually and through the business entity Sunny and Recovery Inc., has committed health care fraud, in violation of 18 U.S.C. § 1347

The Medicare Program

7. Medicare is a “health care benefit program” as defined by 18 U.S.C. § 24. Medicare is a federally funded program that provides free or below-cost health care benefits to certain individuals, primarily the elderly, blind, and disabled. The benefits available under Medicare are governed by federal statutes and regulations.

The HHS, through its agency, the Centers for Medicare and Medicaid Services (“CMS”), oversees and administers Medicare. Individuals who receive benefits under Medicare are commonly referred to as Medicare “beneficiaries.”

8. Medicare covers different types of benefits and is separated into different program “parts.” Part C, also known as “Medicare Advantage,” provides Medicare beneficiaries with the option to receive their Medicare benefits through a wide variety of private managed care plans, including health maintenance organizations (“HMOs”), provider sponsored organizations (“PSOs”), preferred provider organizations (“PPOs”), and private fee-for-service plans (“PFFS”). Private health insurance companies offering Part C plans are required to provide Medicare beneficiaries with the same services and supplies offered under other Medicare plans. A number of companies, including Humana Insurance Company (“Humana”), Molina Health Inc. (“Molina”), and Evernorth Health Services (“Evernorth”) contract with CMS to provide managed care to Medicare beneficiaries. As such, these companies are “health care benefit programs,” as defined by 18 U.S.C. § 24(b).

9. These companies, through their respective Medicare plans, often make payments directly to providers, rather than to the Medicare beneficiaries that receive the health care benefits, items, and services. This occurs when the provider accepts assignment of the right to payment from the beneficiary.

10. To obtain payment for services or treatment provided to a beneficiary enrolled in a Part C plan, providers have to submit itemized claim forms to the beneficiary's Part C plan (i.e. Humana, Molina, and Evernorth). The claim forms are typically submitted electronically via interstate wire. When a provider submits a claim form to a Part C plan, the provider certifies that the contents of the form are true, correct, complete, and that the form was prepared in compliance with the laws and regulations governing Medicare. The provider also certifies that the services being billed were medically necessary and were in fact provided as billed.

RUSTAM ABDAEV and the Entity

11. Sunny and Recovery Inc. was registered as a Florida Corporation on or about December 6, 2024, according to the Florida Division of Corporations. Sunny and Recovery Inc.'s tax identification number shows an "Active" status and its principal place of business is 8270 Woodland Center Blvd., Ste. 127, Tampa, Florida 33614 ("Subject Premises"). **RUSTAM ABDAEV** is the corporation's president.

12. **RUSTAM ABDAEV** is a Russian national currently residing in Tampa, Florida, who holds an employment authorization card that expires in or around December 2028.

13. **RUSTAM ABDAEV** had a personal checking account at Financial Institution #1 ending in -7069. **RUSTAM ABDAEV** was also the sole authorized signer on Sunny and Recovery Inc.'s business checking accounts at Financial Institution #1 ending in -5684 and -5650. The Sunny and Recovery Inc. business

checking account ending in -5684 was linked to **RUSTAM ABDAEV**'s personal checking account ending in -7069. When **RUSTAM ABDAEV** opened the Sunny and Recovery Inc. business checking account ending in -5684, he authorized Financial Institution #1 to use the balance from his personal checking account ending in -7069 to maintain the balance requirement on the business checking account ending in -5684.

14. To bill Medicare or a Part C provider, a DME supplier is required to obtain a National Provider Identifier ("NPI") number through the National Plan and Provider Enumeration System ("NPES"). Upon approval, the healthcare provider acquires a unique 10-digit NPI. After an NPI is provided, NPES publicly publishes certain parts of the NPI record to include the provider's name, specialty, taxonomy, and practice address.

15. According to the NPES NPI Registry public record, Sunny and Recovery Inc. has an enumeration date of December 12, 2024, and shows an "Active" status with the NPI number of 1073320115. The record shows the president of the corporation is **RUSTAM ABDAEV**, and the corporation's mailing address as the Subject Premises.

16. CMS was contacted to obtain the full NPES NPI original application submitted on behalf of Sunny and Recovery Inc. The application listed the authorized official for the organization as **RUSTAM ABDAEV**, President of Sunny and Recovery Inc. The email address listed for the point of contact was

admin@sunnyandrecovery.com. The business mailing address was the Subject Premises. The username created with NPES on December 12, 2024 was Sunnyrec24.

Summary of Fraudulent Billings

17. The investigation has revealed that beginning on an unknown date, but no later than December 2024 through the present, Sunny and Recovery Inc., **RUSTAM ABDAYEV**, and other co-conspirators defrauded the Medicare Part C Program by submitting false and fraudulent claims for DME. Based on my training and experience, the claims are fraudulent for various reasons, including that the beneficiaries did not ask for nor consent to receiving the DME.

18. In April 2025, I reviewed the claims history and Medicare Provider Profile Report for Sunny and Recovery Inc.¹ further detailed below. Billing began in or around December 2024, with a drastic spike in approximately February 2025 to present. From my training and experience, this billing pattern is consistent with other fraudulent schemes where providers illegally obtain beneficiary lists and personal information to fraudulently bill Medicare Part C Program providers.

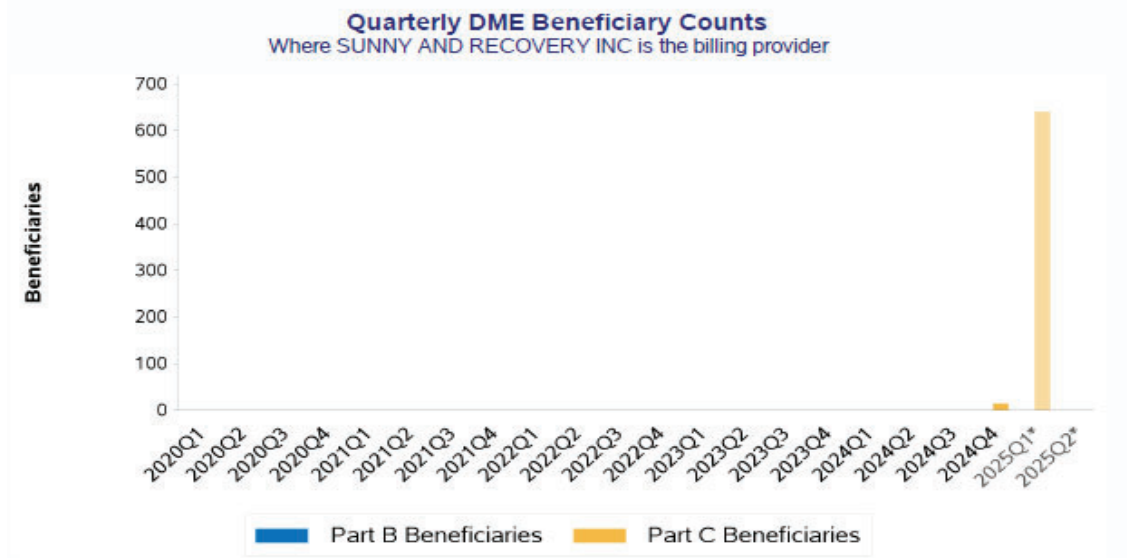
19. Specifically, according to the HHSOIG DME Provider Profile, Sunny and Recovery Inc., has billed Medicare Part C for an approximate amount of \$10,736,588 with a total paid amount of approximately \$343,970, as detailed below.

¹ Sunny and Recovery Inc. was an eligible provider of DME as of on or about December 12, 2024.

Summary of Part C DME Services Billed By SUNNY AND RECOVERY INC
(January 1, 2021 to April 15, 2025)

| Claim Lines | Benes | Total Billed | Total MAO Reported Paid Amount | # of Referring Providers | % of Benes with Multiple HCPCS (over entire period) | Avg Unique HCPCS Per Bene (over entire period) |
|-------------|-------|--------------|--------------------------------|--------------------------|---|--|
| 2,913 | 652 | \$10,736,588 | \$343,970 | 88 | 98% | 2.7 |

20. This spike is identified in the DME Provider Profile as significant billing, which began the first quarter of 2025, just four months ago, as detailed below.



21. In or around March 2025, the Part C Plan Molina began to suspend payments to Sunny and Recovery Inc. based on credible allegations of fraud, including that Sunny and Recovery Inc. misrepresented services billed to the Medicare Part C Program. Beneficiary complaints received to Molina revealed beneficiaries were being billed for DME they did not request nor receive.

22. On April 14, 2025, Molina provided HHSOIG billing information regarding Sunny and Recovery Inc. According to this record, Molina Part C

Program plan was billed approximately \$16.5 million during the first quarter of 2025. As a result of the fraudulent claims, Sunny and Recovery Inc. received approximately \$1.7 million from Molina.

23. Molina provided a spreadsheet of their beneficiaries who have filed complaints against Sunny and Recovery Inc. These complaints are from February 24, 2025 through April 3, 2025, and account for approximately \$353,488 of the billed amount.

Beneficiary Interviews Confirming Fraud

24. On or about February 24, 2025, Sunny and Recovery Inc. billed Medicare Part C participant Humana approximately \$15,750 for DME reportedly prescribed for and provided to B.O., a Medicare beneficiary residing in Kentucky. The referring provider for these charges was Dr. M.K., who also denied providing these services to B.O.

25. On or about February 28, 2025, B.O., was interviewed by law enforcement agents about the claim. B.O. did not request any DME, nor did she receive any DME. B.O. had not met with or been treated by the prescribing physician for the DME. Further, B.O. was not familiar with Sunny and Recovery Inc. Based on my training, experience, and the investigations thus far, Sunny and Recovery Inc. submitted a false and fraudulent Medicare Part C claim by billing Humana for DME for this beneficiary.

26. On or about February 24, 2025, Sunny and Recovery Inc. billed Medicare Part C participant Humana approximately \$15,750 for DME reportedly prescribed for and provided to J.D., a Medicare beneficiary residing in Wisconsin.

27. On or about February 28, 2025, J.D., was interviewed by law enforcement agents about the claim. J.D. did not request any DME, nor did she receive any DME. J.D. stated she does not want or need any orthotic equipment. J.D. had not met with or been treated by the prescribing physician for the DME. Based on my training, experience, and the investigations thus far, Sunny and Recovery Inc. submitted a false and fraudulent Medicare Part C claim by billing Humana for two knee braces, two wrist braces, and a back brace for this beneficiary.

28. On or about February 20, 2025, Sunny and Recovery Inc. billed Medicare Part C participant Humana approximately \$15,750 for DME reportedly prescribed for and provided to J.J., a Medicare beneficiary residing in North Carolina.

29. On or about February 28, 2025, J.J. was interviewed by law enforcement agents about the claim. J.J. did not request any DME, nor did she receive any DME. J.J. stated she does not want or need any orthotic equipment. J.J. had not met with or been treated by the prescribing physician for the DME. Based on my training, experience, and the investigations thus far, Sunny and Recovery Inc. submitted a false and fraudulent Medicare Part C claim by billing Humana for two knee braces, two wrist braces, and a back brace for this beneficiary.

30. On or about February 20, 2025, Sunny and Recovery Inc. billed Medicare Part C participant Molina Healthcare of Texas approximately \$15,750 for DME reportedly prescribed for and provided to H.N., a Medicare beneficiary residing in Texas.

31. On or about March 3, 2025, H.N. was interviewed by law enforcement agents about the claim. H.N. did not request any DME, nor did he receive any DME. H.N. stated he does not want or need any orthotic equipment. H.N. had not met with or been treated by the prescribing physician for the DME. Based on my training, experience, and the investigations thus far, Sunny and Recovery Inc. submitted a false and fraudulent Medicare Part C claim by billing Molina Healthcare of Texas for two knee braces, two wrist braces, and a back brace for this beneficiary.

Doctor Attestations Confirming Fraud

32. On or about March 4, 2025, Dr. R.S. was identified as the referring provider for 12 Medicare Part C beneficiaries at Sunny and Recovery Inc. Dr. R.S.'s practice manager reviewed the patient list and confirmed that Dr. R.S. was not the referring provider for any of the patients that listed Dr. R. S. as such.

33. On March 4, 2025, Dr. C.Z. was identified as the referring provider for 10 Medicare Part C beneficiaries at Sunny and Recovery Inc. Dr. C.Z.'s clinic supervisor reviewed the patient list and confirmed that Dr. C. Z. was not the referring provider for any of the patients that listed Dr. C.Z. as such.

34. On or about March 27, 2025, Dr. M.K., was identified as a referring provider for 12 Medicare Part C beneficiaries at Sunny and Recovery Inc. Dr. M.K. denied being the prescribing physician for all 12 beneficiaries of Sunny and Recovery Inc.

35. On or about May 6, 2025, Dr. M.H., was identified as a referring provider for seven Medicare Part C beneficiaries at Sunny and Recovery Inc. Dr. M.H. denied being the prescribing physician for all seven beneficiaries of Sunny and Recovery Inc.

Summary of Financial Records

36. Echo Health is a third party payment processor, which interacts directly with claim systems and issues payments through banking partners on the behalf of Medicare Part C plans. Sometimes these payments are issued through checks, other times the payments are issued through virtual card (“VCard”) payments.

37. VCard payments use a virtual card that functions just like physical credit cards. VCards include unique, digitally generated credit card numbers that are created specifically for individual transactions. Upon issuance of a VCard, it is assigned a specific dollar amount, expiration date, and merchant category code, ensuring that it can only be used for its intended purpose. When a healthcare organization, like the Part C Providers, need to make a payment, they request a VCard number from their issuing payment partner, bank, or fintech provider. Once the request is approved, a unique, 16-digit virtual card number is generated for the

specific transaction. This number is then provided to the payee, who processes the payment as they would with a traditional credit card.

38. In or around April 2025, Echo Health provided agents with eight checks that were issued to Sunny and Recovery Inc. on behalf of Medicare Part C Providers totaling approximately \$313,836. Additionally, Echo Health provided a list of VCard payments to Sunny and Recovery Inc. on behalf of the Medicare Part C Providers totaling approximately \$2,425,332.82.²

39. Agents reviewed bank account statements for Sunny and Recovery Inc.'s Financial Institution #1 business checking accounts ending in -5684 and -5650, which, as previously mentioned, are controlled by **RUSTAM ABDAEV**. On or about February 20, 2025, six checks were deposited into Sunny and Recovery Inc.'s business checking account ending in -5684 totaling approximately \$160,940.39. Five of the checks were from Humana and one of the checks was from Cigna (previously known as Evernorth).

The Molina Special Investigations Unit ("SIU") Site Visit

40. On or about April 16, 2025, a manager with the Molina SIU conducted an unannounced site visit of Sunny and Recovery Inc. at the Subject Premises to view the premises and to deliver a request for records to any employee on site.

² Some of these payments were voided by the Medicare Part C Providers. As a result, Sunny and Recovery Inc. received approximately \$651,000 of the \$2,425,332.82.

Sunny and Recovery Inc. was not listed as an occupying company on the building's directory nor was any signage posted. Two representatives of Sunny and Recovery Inc. were present and introduced themselves to the Molina manager as "Cyn" and "Lea." The Molina manager entered the Subject Premises and made note of several postal boxes, stacks of paperwork, several open laptops, tablets, and fax/copy machines. The Molina manager took photos of the Subject Premises (See below). Based on my training, experience, and the investigation thus far, Sunny and Recovery Inc. is using the Subject Premises as a façade for a legitimate company, but, is in fact, submitting false and fraudulent Medicare Part C claims for DME.



Conclusion

41. Based on the foregoing, there is probable cause to believe that **RUSTAM ABDAEV**, through the business entity Sunny and Recovery Inc., submitted and caused the submission of false and fraudulent claims to Medicare Part C Plan providers thereby causing them to send fraudulently obtained funds to accounts he controlled.

42. Accordingly, I respectfully submit there is probable cause to believe that within the Middle District of Florida, and elsewhere, **RUSTAM ABDAEV** has committed health care fraud, in violation of 18 U.S.C. § 1347.



Jamon Raley
Special Agent
Health and Human Services
Office of Inspector General

Affidavit attested to me as true and accurate by telephone or other reliable electronic means consistent with Fed. R. Crim. P. 41(d)(3) before me this 14th day of May, 2025.



Lindsay S. Griffin
United States Magistrate Judge