

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA**

UNITED STATES OF AMERICA

v.

SELETHIA BLAKE,

Defendant.

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Criminal No.

VIOLATION:

**Count One: 18 U.S.C. § 1349
(Conspiracy to Commit Health
Care Fraud)**

**18 U.S.C. § 982(a)(2)(A) and 28
U.S.C. § 2461(c) (Criminal
Forfeiture)**

INFORMATION

The United States Attorney for the District of Columbia charges that:

Background

At all times relevant to this Information, on or about the dates and times stated herein:

Relevant Individuals and Entities

1. Defendant Selethia Blake was a resident of Maryland and was employed as an Interlock Operator by the Washington Metropolitan Area Transit Authority (“WMATA”) that operated in the District of Columbia and elsewhere.
2. Co-conspirator 1 was employed as a Train Operator by WMATA that operated in the District of Columbia and elsewhere.
3. Person 1 was Blake’s primary care physician.
4. Person 2 was a physician.
5. Person 3 was a physician.
6. WMATA was created by an interstate compact in 1967 to plan, develop, build, finance, and operate a balanced regional transportation system in the District of Columbia area.

WMATA operated and maintained metro train and bus services in and around the District of Columbia area.

7. American Family Life Assurance Company (“AFLAC”) was an insurance company based in Georgia. AFLAC provided health care insurance services to WMATA and its employees, including for medical and disability insurance. AFLAC was a “health care benefit program” as defined in 18 U.S.C. § 24(b).

Disability Claim Process

8. When filing an AFLAC disability claim, a policy holder submitted several forms, including, but not limited to, an “Initial Disability Claim Form” or a “Continuing Disability Claim Form.” These forms were filled out with policy holder/patient information (e.g., name, DOB, address) and descriptive information about the disability (e.g., date of occurrence, how it occurred). Another necessary form was an “Initial Disability Claim Form – Physician’s Statement.” This form included similar policy holder/patient information and other specifics that were filled out by the patient’s physician and/or the physician’s office (e.g., diagnosis information, date/details about the injury, date the patient was first seen by the physician). At the bottom of this form was also a signature line to be completed by the patient’s physician.

COUNT ONE

(18 U.S.C. § 1349 – Conspiracy to Commit Health Care Fraud)

9. Paragraphs 1 through 8 are hereby realleged.

10. Between on or about July 7, 2020, and on or about March 29, 2023, in the District of Columbia and elsewhere, the defendant,

SELETHIA BLAKE,

and Co-conspirator 1, did knowingly and willfully conspire, combine, confederate, and agree to commit health care fraud, by executing and attempting to execute a scheme and artifice to defraud a health care benefit program, that is, AFLAC, and to obtain, by means of false or fraudulent pretenses,

representations, or promises, money or property owned by, or under the custody or control of, said health care benefit program, in connection with the delivery of or payment for health care benefits, items, or services.

Object of the Conspiracy

11. It was the object of the conspiracy for the defendant and Co-conspirator 1 to enrich themselves, and each other, by obtaining health care and disability benefits under false and fraudulent pretenses, by submitting false and fraudulent claims to AFLAC.

Manner and Means of the Conspiracy and Scheme to Defraud

12. The manner and means by which the defendant and Co-conspirator 1 sought to accomplish the goal of the conspiracy included, among others, the following:

13. Blake provided Co-conspirator 1 with the information needed to submit disability claims to AFLAC, including, but not limited to, Blake's name, date of birth, and address, the name and contact information of Person 1, copies of Blake's WMATA paystubs, and Blake's AFLAC insurance policy information.

14. On or about July 7, 2020, with Blake's permission, Co-conspirator 1 submitted a disability claim to AFLAC on Blake's behalf. Blake knew that she was not disabled and that the disability claim was fraudulent.

15. AFLAC assigned the claim with claim number 023985144.

16. Claim number 023985144 included an Initial Disability Claim Form stating that, on March 19, 2020, Blake was injured and suffered lower back pain.

17. The Initial Disability Claim Form also included an "Employer's Statement" stating that Blake had not returned to work since the alleged injury, and indicating an expected return to work date of July 31, 2020. The Employer's Statement was allegedly signed by Blake, but was actually signed by Co-conspirator 1.

18. The Initial Disability Claim Form also included a “Physician’s Statement” stating that Blake had been injured and become disabled as of March 19, 2020, that Blake was last treated on June 24, 2020, that Blake was not cleared to return to work, and that Blake’s expected return to work date was July 31, 2020. The Physician’s Statement was purportedly signed by Person 1.

19. Person 1 did not complete or sign the Physician’s Statement. The Physician’s statement was actually completed and signed by Co-conspirator 1.

20. Claim number 023985144 also included one of more “Doctor Notes” claiming that Blake was under Person 1’s care and was not cleared to work due to a back injury. Each Doctor Note was purportedly signed by Person 1.

21. Person 1 did not provide or sign any of the Doctor Notes. The Doctor Notes were actually created and signed by Co-conspirator 1.

22. The claim and its supporting documents were fraudulent insofar as none of the documents were completed or signed by Person 1, Blake was not injured on the date indicated, Blake continued to work for WMATA and collected her regular paychecks during the period she was purportedly disabled, and Blake was not treated by Person 1 on the dates indicated.

23. On or about September 10, 2020, AFLAC approved claim number 023985144 and paid \$8,466.67 to Blake. Blake accepted this payment even though she knew that it was for a disability benefit to which she was not entitled.

24. On or about September 14, 2020, Blake paid \$1,500 of the claim proceeds to Co-conspirator 1, fulfilling her agreement to kick back a portion of the claim proceeds to Co-conspirator 1 in exchange for Co-conspirator 1’s assistance in preparing and submitting the fraudulent disability claim.

25. On or about August 9, 2021, with Blake’s permission, Co-conspirator 1 submitted a second disability claim to AFLAC on Blake’s behalf. Blake knew that she was not disabled and that the disability claim was fraudulent.

26. AFLAC assigned the claim with claim number 030086719.

27. Like the first claim, the claim included an Initial Disability Claim Form, Employer's Statement, Physician's Statement, and Doctor Notes, this time claiming that Blake had been injured on December 30, 2020, while lifting, was under Person 2's care, and was not cleared to return to work until September 2, 2021.

28. The Physician's Statement and Doctor Notes were purportedly completed and signed by Person 2. Person 2 did not complete or sign those documents. In reality, they were completed and signed by Co-conspirator 1.

29. The claim and its supporting documents were fraudulent insofar as none of the documents were completed or signed by Person 2, Blake was not injured on the date indicated, Blake continued to work for WMATA and collected her regular paychecks during the period she was purportedly disabled, and Blake was not treated by Person 2 on the dates indicated.

30. On or about August 16, 2022, AFLAC approved claim number 030086719 and paid \$16,666.67 to Blake. Blake accepted this payment even though she knew that it was for a disability benefit to which she was not entitled.

31. On or about August 17, 2021, Blake paid \$2,400 of the claim proceeds to Co-conspirator 1, fulfilling her agreement to kick back a portion of the claim proceeds to Co-conspirator 1 in exchange for Co-conspirator 1's assistance in preparing and submitting the fraudulent disability claim.

32. On or about January 30, 2022, with Blake's permission, Co-conspirator 1 submitted a third disability claim to AFLAC on Blake's behalf. Blake knew that she was not disabled and that the disability claim was fraudulent.

33. AFLAC assigned the claim with claim number 032983302.

34. Like the other claims, the claim included an Initial Disability Claim Form, Employer's Statement, Physician's Statement, and Doctor Notes, this time claiming that Blake had been injured

on October 4, 2021, while carrying a crate / tote of food in the house, was under Person 3's care, and was not cleared to return to work until March 9, 2022.

35. The Physician's Statement and Doctor Notes were purportedly completed and signed by Person 3. Person 3 did not complete or sign those documents. In reality, they were completed and signed by Co-conspirator 1.

36. The claim and its supporting documents were fraudulent insofar as none of the documents were completed or signed by Person 3, Blake was not injured on the date indicated, Blake continued to work for WMATA and collected her regular paychecks during the period she was purportedly disabled, and Blake was not treated by Person 3 on the dates indicated.

37. On or about February 8, 2022, AFLAC approved claim number 032983302 and paid \$10,625 to Blake. Blake accepted this payment even though she knew that it was for a disability benefit to which she was not entitled.

38. On or about February 9, 2022, Blake paid \$2,400 of the claim proceeds to Co-conspirator 1, fulfilling her agreement to kick back a portion of the claim proceeds to Co-conspirator 1 in exchange for Co-conspirator 1's assistance in preparing and submitting the fraudulent disability claim.

39. On or about May 20, 2022, with Blake's permission, Co-conspirator 1 submitted a fourth disability claim to AFLAC on Blake's behalf. Blake knew that she was not disabled and that the disability claim was fraudulent.

40. AFLAC assigned the claim with claim number 034698455.

41. Like the other claims, the claim included an Initial Disability Claim Form, Employer's Statement, Physician's Statement, and Doctor Notes, this time claiming that Blake had been injured on March 30, 2022, with hypertension, gastric, hernia repair, was under Person 2's care, and was not cleared to return to work until July 27, 2022.

42. The Physician's Statement and Doctor Notes were purportedly completed and signed by Person 2. Person 2 did not complete or sign those documents. In reality, they were completed and signed by Co-conspirator 1.

43. The claim and its supporting documents were fraudulent insofar as none of the documents were completed or signed by Person 2, Blake was not injured on the date indicated, Blake continued to work for WMATA and collected her regular paychecks during the period she was purportedly disabled, and Blake was not treated by Person 2 on the dates indicated.

44. On or about May 25, 2022, and June 28, 2022, AFLAC approved claim number 034698455 and paid \$3,726.67 to Blake. Blake accepted this payment even though she knew that it was for a disability benefit to which she was not entitled.

45. On or about June 29, 2022, Blake paid \$1,200 of the claim proceeds to Co-conspirator 1, fulfilling her agreement to kick back a portion of the claim proceeds to Co-conspirator 1 in exchange for Co-conspirator 1's assistance in preparing and submitting the fraudulent disability claim.

46. On or about March 5, 2023, with Blake's permission, Co-conspirator 1 submitted a fifth disability claim to AFLAC on Blake's behalf. Blake knew that she was not disabled and that the disability claim was fraudulent.

47. AFLAC assigned the claim with claim number 040056683.

48. Like the other claims, the claim included an Initial Disability Claim Form, Employer's Statement, Physician's Statement, and Doctor Notes, this time claiming that Blake had been injured on October 17, 2022, after falling out of a chair, was under Person 1's care, and was not cleared to return to work until March 27, 2023.

49. The Physician's Statement and Doctor Notes were purportedly completed and signed by Person 1. Person 1 did not complete or sign those documents. In reality, they were completed and signed by Co-conspirator 1.

50. The claim and its supporting documents were fraudulent insofar as none of the documents were completed or signed by Person 1, Blake was not injured on the date indicated, Blake continued to work for WMATA and collected her regular paychecks during the period she was purportedly disabled, and Blake was not treated by Person 1 on the dates indicated.

51. On or about March 10, 2023, and March 28, 2023, AFLAC approved claim number 040056683 and paid \$11,213.33 to Blake. Blake accepted this payment even though she knew that it was for a disability benefit to which she was not entitled.

52. On or about March 29, 2023, Blake paid \$2,000 of the claim proceeds to Co-conspirator 1, fulfilling her agreement to kick back a portion of the claim proceeds to Co-conspirator 1 in exchange for Co-conspirator 1's assistance in preparing and submitting the fraudulent disability claim.

(In violation of Title 18, United States Code, Section 1349)

NOTICE OF FORFEITURE
(18 U.S.C. § 982(a)(2)(A) and 28 U.S.C. § 2461(c))

The allegations contained in Count One of this Information are hereby realleged and incorporated by reference for the purpose of alleging forfeitures pursuant to Title 18, United States Code, Sections 982(a)(2)(A).

Upon conviction of the offense of conspiracy to commit bank fraud in violation of Title 18, United States Code, Section 1349, the defendant,

SELETHIA BLAKE,

shall forfeit to the United States of America, pursuant to Title 18, United States Code, Section 982(a)(2)(A), any property constituting, or derived from, proceeds obtained, directly or indirectly, as a result of such violation.

MONEY JUDGMENT

Upon conviction, the United States may seek a money judgment.

SUBSTITUTE ASSETS

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 pursuant to Title 21, United States Code, Section 853(p), as incorporated by Title 28, United States Code, Section 2461(c).

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