

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA
25-CR-20276-WILLIAMS/GOODMAN

Case No. _____

18 U.S.C. § 371

18 U.S.C. § 982(a)(7)

UNITED STATES OF AMERICA

vs.

SERGIO DE LA NOVAL,

Defendant.

FILED BY BM D.C.

Jun 12, 2025

ANGELA E. NOBLE
CLERK U.S. DIST. CT.
S. D. OF FLA. - MIAMI

INDICTMENT

The Grand Jury charges that:

GENERAL ALLEGATIONS

At all times material to this Indictment:

The Florida Medicaid Program

1. The Florida Medicaid Program (“Medicaid”) was a partnership between the state of Florida and the federal government that provided health care benefits to certain low-income individuals in Florida. The benefits available under Medicaid were governed by federal and state statutes and regulations. Medicaid was administered by the Centers for Medicare and Medicaid Services (CMS) and the Agency for Health Care Administration (“AHCA”). Individuals who received benefits under Medicaid were commonly referred to as Medicaid “recipients.”

2. Medicaid was financed with both federal and state funds and was a “health care benefit program,” as defined by Title 18, United States Code, Section 24(b).

3. Health care providers seeking to bill Medicaid for the cost of related benefits, items, and services were required to apply for and receive a “provider number.” The provider number allowed a health care provider to submit bills, known as “claims,” to Medicaid to obtain

reimbursement for the cost of health care benefits, items, and services provided to Medicaid recipients.

4. Medicaid permitted these providers to submit claim forms electronically. The health insurance claim forms required the provider to provide certain important information, including: (a) the Medicaid recipient's name and identification number; (b) the identification number of the doctor or other qualified health care provider who ordered or provided the health care benefit, item, or service that was the subject of the claim; (c) the health care benefit, item, or service that was provided or supplied to the beneficiary; (d) the billing codes for the benefit, item, or service; and (e) the date upon which the benefit, item, or service was provided to or supplied to the recipient.

5. When a claim was submitted to Medicaid, the provider certified that the contents of the form were true, correct, complete, and that the form was prepared in compliance with the laws and regulations governing the Medicaid program. The provider further certified that the services and health care items being billed were medically necessary and were in fact provided as billed.

6. Medicaid generally paid a substantial portion of the cost of the health care benefits, items, and services that were medically necessary and ordered by licensed doctors or other licensed, qualified health care providers. Payments were typically made directly to the health care provider rather than to the Medicaid recipient.

7. Medicaid reimbursed for mental health treatment including "psychosocial rehabilitation services." Psychosocial rehabilitation ("PSR") services consisted of mental health counseling in a group setting to improve a person with a mental disorder's ability to perform the

activities of daily living or to improve their ability to perform a job. The mental disorders treated in this manner included depression and social anxiety disorder. Medicaid allowed providers to bill for PSR provided in a group setting.

8. Medicaid would reimburse the providers of PSR, called “community behavioral health services providers” for performing an initial mental health evaluation, developing a treatment plan, and providing up to 480 hours of PSR to a Medicaid recipient per fiscal year.

The Defendant, Related Individuals and Related Companies

9. Florida Behavior Health, Incorporated (“Florida Behavior”) was a Florida corporation, located at 2099 West 76th Street, Hialeah, Florida, that purported to provide medically necessary PSR to Medicaid recipients.

10. Defendant **SERGIO DE LA NOVAL** was a resident of Miami-Dade County and a beneficial owner of Florida Behavior.

11. Ernesto Davila was a resident of Miami-Dade County and the listed owner and president of Florida Behavior.

12. Jose Davila Nunez was a resident of Miami-Dade County, Florida and a beneficial owner of Florida Behavior.

13. Patient 1, a resident of Miami-Dade County, Florida, was a Medicare recipient.

14. Patient 2, a resident of Miami-Dade County, Florida, was a Medicare recipient.

**Conspiracy to Offer and Pay Health Care Kickbacks
(18 .S.C. § 371)**

15. From in or around March 2019, through in or around June 2021, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendant,

SERGIO DE LA NOVAL,

did willfully, that is, with the intent to further the object of the conspiracy, and knowingly, combine, conspire, confederate, and agree with Jose Davila Nunez, Ernesto Davila, and with others known and unknown to the Grand Jury, to commit an offense against the United States, that is, to violate Title 42, United States Code, Section 1320a-7b(b)(2)(B), by knowingly and willfully offering and paying remuneration, including kickbacks and bribes, directly and indirectly, overtly and covertly, in cash and in kind, to a person to induce such person to order and arrange for any service and item that could be paid for, in whole and in part, by a Federal health care program, that is, Medicaid.

Purpose of the Conspiracy

16. It was a purpose of the conspiracy for the defendant and his co-conspirators to unlawfully enrich themselves by, among other things: (a) offering and paying kickbacks and bribes to Medicaid recipients to induce them to serve as patients at Florida Behavior; (b) submitting and causing the submission of claims to Medicaid for PSR services that Florida Behavior purportedly provided to Medicaid recipients; (c) causing Medicaid to make payments to Florida Behavior as a result of such claims; (e) concealing the payment of the kickbacks; and (f) diverting the proceeds of the scheme for the defendant and his co-conspirators' personal use and benefit, the use and benefit of others, and to further the conspiracy.

Manner and Means of the Conspiracy

The manner and means by which the defendant and his co-conspirators sought to accomplish the object and purpose of the conspiracy included, among other things, the following:

17. **SERGIO DE LA NOVAL** and other co-conspirators offered and paid kickbacks and bribes to Medicaid recipients for serving as patients at Florida Behavior.

18. **SERGIO DE LA NOVAL**, Jose Davila Nunez, Ernesto Davila, and other co-conspirators caused Florida Behavior to submit approximately \$1,264,974 in claims to Medicaid for PSR that Florida Behavior purportedly provided to the recruited Medicaid recipients who were paid kickbacks and bribes.

19. **SERGIO DE LA NOVAL**, Jose Davila Nunez, Ernesto Davila, and other co-conspirators used the proceeds from the scheme for their personal use and benefit, the use and benefit of others, and to further the conspiracy.

Overt Acts

In furtherance of the conspiracy, and to accomplish its object and purpose, at least one co-conspirator committed and caused to be committed, in the Southern District of Florida, at least one of the following overt acts, among others:

1. On or about March 13, 2019, Ernesto Davila added himself as President of Florida Behavior in the corporate records in the State of Florida.

2. On or about December 5, 2019, Ernesto Davila signed the enrollment documents that were submitted to Medicaid for Florida Behavior.

3. On or about October 26, 2020, a co-conspirator submitted a PSR claim to Medicaid on behalf of Florida Behavior for Patient 1, whom **SERGIO DE LA NOVAL** had paid a cash kickback in order to induce the patient to receive such treatment.

4. On or about November 7, 2020, a co-conspirator submitted a PSR claim to Medicaid on behalf of Florida Behavior for Patient 2, whom **SERGIO DE LA NOVAL** had paid a cash kickback in order to induce the patient to receive such treatment.

5. On or about November 23, 2020, **SERGIO DE LA NOVAL** negotiated Check No. 5581, drawn on Florida Behavior's J.P. Morgan Chase account ending 2665, made payable to him in the approximate amount of \$5,866.

6. On or about December 11, 2020, **SERGIO DE LA NOVAL** negotiated Check No. 5625, drawn on Florida Behavior's J.P. Morgan Chase account ending 2665, made payable to him in the approximate amount of \$4,923.

7. On or about December 17, 2020, **SERGIO DE LA NOVAL** negotiated Check No. 5640, drawn on Florida Behavior's J.P. Morgan Chase account ending 2665, made payable to him in the approximate amount of \$8,185.

All in violation of Title 18, United States Code, Section 371.

FORFEITURE ALLEGATIONS
(18 U.S.C. § 982(a)(7))

1. The allegations of this Indictment are hereby re-alleged and by this reference fully incorporated herein for the purpose of alleging forfeiture to the United States of America of certain property in which the defendant, **SERGIO DE LA NOVAL**, has an interest.

2. Upon conviction of Title 18, United States Code, Section 371, as alleged in this Indictment, the defendant shall forfeit to the United States any property, real or personal, that

constitutes or is derived, directly or indirectly, from gross proceeds traceable to the commission of such violation, pursuant to Title 18, United States Code, Section 982(a)(7).

3. The property subject to forfeiture as a result of the alleged offense includes, but is not limited to a sum which represents the gross proceeds traceable to the commission of the federal health care offense alleged in this Indictment and which may be sought as a forfeiture money judgment.

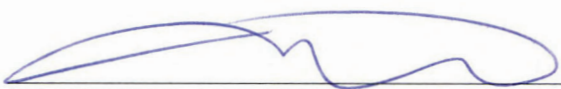
All pursuant to Title 18, United States Code, Section 982(a)(7), and the procedures set forth in Title 21, United States Code, Section 853, as made applicable by Title 18, United States Code, Section 982(b)(1).

A TRUE BILL

FOREPERSON



HAYDEN P. O'BYRNE
UNITED STATES ATTORNEY



TIMOTHY J. ABRAHAM
ASSISTANT UNITED STATES ATTORNEY