UNITED STATES DISTRICT COURT

FOR THE CENTRAL DISTRICT OF CALIFORNIA

February 2026 Grand Jury

UNITED STATES OF AMERICA,

Plaintiff,

v.

OREN DAVID SHACHAR,
aka "David O. Shachar,"
aka "Shachar Oren David,"
aka "Shachar D. Oren,"
aka "David Oren Shachar,"
aka "Oran D. Shahcar,"
aka "Oren David,"
aka "Oren D. Shacahar,"
aka "Shachar David,"
aka "OShachar David," and
aka "Oran Shachar,
JEANNIE CHOI,
aka "Jeannie Im," and
ABRAHAM SHIN,

Defendants.

CR 2:26-cr-00393-SB

I N D I C T M E N T

[18 U.S.C. § 1349: Conspiracy to Commit Health Care Fraud; 18 U.S.C. § 1347: Health Care Fraud; 18 U.S.C. § 1028A(a)(1): Aggravated Identity Theft; 18 U.S.C. § 1957: Monetary Transaction in Criminally Derived Property over $10,000; 42 U.S.C. §§ 1320a-7b(b)(2),(4): Anti-Kickback Statute; 18 U.S.C. §§ 981(a)(1)(C), 982(a)(1), (7) and 28 U.S.C. § 2461(c): Criminal Forfeiture]

The Grand Jury charges:

COUNT ONE

[18 U.S.C. § 1349]

[All Defendants]

At times relevant to this Indictment:

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A. INTRODUCTORY ALLEGATIONS

Individuals

1. Defendant OREN DAVID SHACHAR, also known as ("aka") "David O. Shachar," "Shachar Oren David," "Shachar D. Oren," "David Oren Shachar," "Oran D. Shahcar," "Oren David," "Oren D. Shacahar," "Shachar David," "OShachar David," and "Oran Shachar," was a resident of Los Angeles, California. Beginning as early as October 2019, defendant SHACHAR owned, controlled, and operated several health care businesses in Los Angeles, California, including at least the four hospices described below.

2. Defendant JEANNIE CHOI, aka "Jeannie Im," was a resident of Torrance, California.

3. Defendant ABRAHAM SHIN was a resident of Corona, California.

4. Physicians 1 and 2 were each medical doctors licensed to practice in California.

Entities

5. Gentle Touch Hospice Care, Inc. ("Gentle Touch Hospice") was an outpatient hospice company located at 6338 Coldwater Canyon Avenue, Valley Glen, California. Defendant SHACHAR owned, controlled, and operated Gentle Touch Hospice beginning in or around February 2021, according to California Secretary of State and Medicare records.

6. Oxford Hospice Care Inc. ("Oxford Hospice") was an outpatient hospice company located at 4650 Arrow Highway, Ste. F3, Montclair, California. Defendant SHACHAR owned, controlled, and operated Oxford Hospice beginning in or around December

2020, according to California Secretary of State and Medicare records.

7. Art of Hospice, Inc. ("Art of Hospice") was an outpatient hospice company located at 6345 Balboa Boulevard, Suite 195, Encino, California. Defendant SHACHAR owned, controlled, and operated Art of Hospice beginning in or around October 2019, according to a Share Purchase Agreement. According to a Medicare enrollment application filed in or around March 2023, defendant SHACHAR had been a 5% or greater owner of Art of Hospice since May 2022.

8. Holly Trinity Hospice, Inc. ("Holly Trinity Hospice") was an outpatient hospice company located at 1101 East Broadway, Suite 108, Glendale, California. Holly Trinity Hospice's second business location was 6340 Coldwater Canyon Avenue, Suite 203, Valley Glen, California, according to an April 2025 filing with the California Secretary of State. Defendant SHACHAR owned, controlled, and operated Holly Trinity Hospice beginning in or around April 2023, according to California Secretary of State and Medicare records. Holly Trinity Hospice maintained a bank account at JPMorgan Chase ending in 8003.

9. Gentle Touch Hospice, Oxford Hospice, Art of Hospice, and Holly Trinity Hospice are collectively referred to herein as the "SHACHAR Hospices."

10. Business 1 was a California-licensed funeral home with locations in the Los Angeles, California, area. Since at least 2025, defendant CHOI was an employee of Business 1.

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The Medicare Program

11. Medicare was a federal health care program that provided benefits to individuals who were 65 years and older or disabled. Medicare was administered by the Centers for Medicare and Medicaid Services ("CMS"), a federal agency under the United States Department of Health and Human Services. Medicare was a "health care benefit program" as defined by Title 18, United States Code, Section 24(b), and a "Federal health care program" as defined by Title 42, United States Code, Section 1320a-7b(f).

12. Individuals who qualified for Medicare benefits were referred to as Medicare "beneficiaries." Each beneficiary was given a unique health insurance claim number.

13. Hospices, home health agencies, physicians, and other health care providers that provided services to beneficiaries that were reimbursed by Medicare were referred to as Medicare "providers."

14. To participate in Medicare, Medicare required prospective providers to be licensed by a state or local agency. After obtaining the applicable license, Medicare required prospective hospice and home health providers to submit an application (called a CMS Form 855) in which the prospective provider agreed to: (a) comply with all Medicare-related laws and regulations, including the Anti-Kickback Statute, Title 42, United States Code, Section 1320a-7b(b), which prohibits the offering, paying, soliciting, and receiving of any remuneration for the referral of Medicare beneficiaries; and (b) not submit claims for payment to Medicare knowing they were false or fraudulent or with deliberate ignorance or reckless disregard of

their truth or falsity. If Medicare approved a provider's application, Medicare assigned a "provider number," which was used for the processing and payment of claims submitted by the provider.

15. A health care provider with a Medicare provider number could submit claims to Medicare to obtain reimbursement for services rendered to Medicare beneficiaries.

Hospice Services

16. Hospice was end-of-life care for people with illnesses that could not be cured.

17. Medicare coverage for hospice services was limited to situations in which: (1) a physician certified that the beneficiary was terminally ill by signing a Certification of Terminal Illness ("CTI"); and (2) the beneficiary signed an election form choosing hospice care instead of other Medicare benefits. Medicare considered a beneficiary to be "terminally ill" if the beneficiary's life expectancy was six months or less if the beneficiary's illness ran its normal course.

18. Hospice services reimbursed by Medicare were palliative in nature (also referred to as "comfort care") and included, but were not limited to, nursing care, medical equipment, drugs to manage pain and symptoms, medical social services, dietary counseling, physical, occupational and speech therapy, and spiritual counseling.

19. Once a beneficiary chose to receive hospice care, Medicare would not cover treatment intended to cure the beneficiary's terminal illness. The beneficiary had to sign and date an election form documenting this choice. The election

form had to include an acknowledgement that the beneficiary had been given a full understanding of hospice care, particularly the palliative rather than curative nature of treatment, and an acknowledgement that the beneficiary understood that certain Medicare services were waived by the election. The election form also identified the attending physician for the beneficiary, which was the qualified medical provider deemed to have the most significant role in the determination and delivery of the beneficiary's medical care in hospice.

20. A beneficiary could elect to receive hospice benefits for two periods of 90 days and, thereafter, additional service for periods of 60 days each.

21. After the second 90-day period, and for each additional 60-day period, Medicare required that a physician re-certify that the beneficiary was terminally ill and include clinical findings or other documentation supporting the diagnosis of terminal illness. For re-certifications, Medicare required a hospice physician or nurse practitioner to meet with the beneficiary in person and conduct a face-to-face evaluation before signing a CTI.

22. To obtain payment from Medicare for hospice services, the hospice provider was required to submit a claim for payment. Generally, such claims were required to set forth, among other things: the beneficiary's name and unique Medicare identification number; the type of services provided to the beneficiary; the date(s) that the services were provided; and the name and National Provider Identifier or Unique Physician Identification Number of the attending physician. Most

providers submitted their claims electronically pursuant to an agreement with Medicare that they would submit claims that were accurate, complete, and truthful.

B. OBJECT OF THE CONSPIRACY

23. Beginning no later than in or around February 2021, and continuing through at least March 2026, in Los Angeles County, within the Central District of California, and elsewhere, defendant SHACHAR knowingly conspired with others known and unknown to the Grand Jury, including defendant SHIN beginning no later than March 2025, and defendant CHOI beginning no later than May 2025 and continuing to at least November 2025, to commit health care fraud, in violation of Title 18, United States Code, Section 1347.

C. MANNER AND MEANS OF THE CONSPIRACY

24. The object of the conspiracy was carried out, and was to be carried out, in substance as follows:

a. Defendant SHACHAR submitted at least 11 CMS-855A enrollment applications for the SHACHAR Hospices in which he certified that he would submit claims only for those services that were medically necessary and provided as represented, and that were not based on the payment of kickbacks and bribes.

b. Defendant SHACHAR would pay illegal kickbacks and bribes on a per-patient basis to patient marketers in exchange for patient referrals for hospice.

c. Defendant SHACHAR would obtain access to vulnerable patients by personally meeting with Medicare beneficiaries who he knew were not terminally ill to convince them to enroll in the SHACHAR Hospices. Defendant SHACHAR would falsely represent that he provided care that focused on quality-of-life improvements as opposed to end-of-life care.

d. Defendant SHACHAR and others working for him would conceal and disguise from prospective and enrolled beneficiaries that a physician needed to certify them as terminally ill, and that accepting services from his hospices would adversely affect beneficiaries' ability to receive Medicare benefits in connection with services furnished by other providers, including their primary care physicians, and limit their entitlement to benefits for curative health care.

e. Defendant SHACHAR, directly and through marketers, would pay beneficiaries illegal kickbacks and bribes of up to $400 per month in cash if they remained enrolled in the SHACHAR HOSPICES. In addition to cash, defendant SHACHAR would also provide beneficiaries with other illegal inducements, including groceries, alcohol, personal care supplies, medical equipment, televisions, massages, and furniture, such as reclining armchairs.

f. Defendant SHACHAR would offer to pay, and would pay, beneficiaries illegal kickbacks and bribes in the form of $100 or $200 per patient that the beneficiary referred to defendant SHACHAR to enroll in hospice.

g. Defendant SHACHAR, defendant SHIN, and others, would enroll and cause to be enrolled in the SHACHAR Hospices Medicare beneficiaries whom they knew were not terminally ill, and submit and cause to be submitted to Medicare false and fraudulent claims for hospice services purportedly provided to these ineligible beneficiaries.

h. Defendant SHACHAR would pay illegal kickbacks and bribes to patient recruiters and marketers, including defendants SHIN and CHOI, in exchange for the referral of Medicare beneficiaries to the SHACHAR Hospices. Defendant SHACHAR sometimes would pay marketers approximately $700 per beneficiary referral, *i.e.*, the referral of a live patient, for each month that the beneficiary was billed to Medicare for purported hospice services.

i. In order to conceal and disguise the scheme, and to avoid detection by Medicare, its contractors, or law enforcement for having a high live discharge rate (i.e., enrolling too many patients who did not pass away while on hospice), and also to offset the effect of Medicare's annual per-patient spending limit, Defendant SHACHAR and others would falsely claim to have provided hospice services to deceased individuals before their time of death, thereby making it falsely appear that the SHACHAR hospices enrolled Medicare beneficiaries with a bona fide need for hospice services.

j. Defendant SHACHAR would purchase means of identification of deceased Medicare beneficiaries from defendants SHIN and CHOI. These means of identification included names, Social Security numbers, dates of birth, and Medicare identification numbers. Defendant CHOI obtained access to the means of identification through her work at Business 1. Defendants CHOI and SHIN would provide defendant SHACHAR the means of identification by way of text and WhatsApp messages that included pictures of identification documents and other information, including the deceased beneficiaries' date and time of death and the names of their primary care physician and next of kin.

k. If defendant SHACHAR determined that a deceased beneficiary had been enrolled in Medicare and could have received coverage for hospice services while the beneficiary was alive, defendant SHACHAR, a nurse working for defendant SHACHAR, and/or defendant CHOI would meet with the beneficiary's surviving relatives at Business 1 or contact them on the phone and collect personal health information of the deceased beneficiary. Defendant SHACHAR's office employees would also request medical records from the deceased beneficiary's recent hospital visits.

l. Defendant SHACHAR would direct a nurse, Physician 2, and others to use deceased beneficiaries' means of identification to create false, backdated electronic medical records stating that a nurse had seen and evaluated the beneficiaries while they were still alive and that a physician, including Physician 2, had certified them as terminally ill.

m. Defendant SHACHAR would pay defendants CHOI and SHIN between at least $1,000 to $3,000 per deceased beneficiary referral that he enrolled in hospice.

n. Defendant SHACHAR would implement certain rules with patient marketers when enrolling deceased beneficiaries into the SHACHAR Hospices to avoid scrutiny from Medicare, which included only accepting patients who: died at home, not a hospital or other facility; died within five days of the patient marketer making contact with defendant SHACHAR; and had not been receiving hospice from another provider at the time of their death. Defendant SHACHAR would also insist that Business 1 keep accurate records of the patient's date and time of death so defendant SHACHAR could prepare his own records and arrange for a meeting with the deceased's next of kin to sign hospice enrollment paperwork.

25. In total, Defendant SHACHAR and others submitted and caused the submission, through the SHACHAR Hospices, of approximately $27,731,000 in false and fraudulent claims to Medicare for hospice services that were medically unnecessary, ineligible for reimbursement, not provided as represented, and procured through illegal kickbacks and bribes. Medicare paid the SHACHAR Hospices approximately $26,908,000 based on these false and fraudulent claims.

COUNTS TWO THROUGH NINE

[18 U.S.C. §§ 1347, 2]

[All Defendants]

26. The Grand Jury re-alleges paragraphs 1 through 22, 24 and 25 of this Indictment here.

A. THE SCHEME TO DEFRAUD

27. Beginning no later than in or around February 2021, and continuing through at least in or around March 2026, in Los Angeles County, within the Central District of California, and elsewhere, defendant SHACHAR, and defendant SHIN beginning no later than March 2025, and defendant CHOI beginning no later than May 2025 and continuing to at least November 2025, each aiding and abetting one another, together with others known and unknown to the Grand Jury, knowingly, willfully, and with intent to defraud, executed and willfully caused to be executed a scheme and artifice: (a) to defraud Medicare, a health care benefit program, as to material matters in connection with the delivery of and payment for health care benefits, items, and services; and (b) to obtain money from Medicare, a health care benefit program, by means of materially false and fraudulent pretenses, representations, and promises and the concealment of material facts, in connection with the delivery of and payment for health care benefits, items, and services.

28. The fraudulent scheme operated, in substance, as described in paragraphs 24 and 25.

B. EXECUTIONS OF THE SCHEME TO DEFRAUD

29. On or about the dates set forth below, in Los Angeles County, within the Central District of California, and

elsewhere, defendants SHACHAR, CHOI, and SHIN, as set forth below as to each count, each aiding and abetting one another, together with others known and unknown to the Grand Jury, knowingly and willfully executed and caused to be executed the fraudulent scheme described above by submitting and causing to be submitted to Medicare the following false and fraudulent claims for payment for purported hospice services:

COUNT	DEFEN-DANTS	DATE	HOSPICE	BENEFI-CIARY	CLAIM NUMBER	APPROX. AMOUNT BILLED
TWO	SHACHAR	8/1/2023	Gentle Touch Hospice	G.D.	223213 006529 04CAR	$6,200
THREE	SHACHAR	5/2/2024	Oxford Hospice	B.B.	224123 001525 04CAR	$6,070
FOUR	SHACHAR	7/3/2024	Art of Hospice	B.J.	224185 000172 04CAR	$6,060
FIVE	SHACHAR	9/1/2024	Holly Trinity Hospice	V.N.	224245 000521 04CAR	$6,270
SIX	SHACHAR	3/10/2025	Holly Trinity Hospice	M.R.	225069 000007 08CAR	$6,270
SEVEN	SHACHAR, CHOI, SHIN	9/1/2025	Art of Hospice	Kw.K.	225244 000770 04CAR	$420
EIGHT	SHACHAR, CHOI, SHIN	9/1/2025	Holly Trinity Hospice	Ku.K.	225244 000614 04CAR	$220
NINE	SHACHAR, CHOI, SHIN	11/3/2025	Gentle Touch Hospice	H.R.	225307 000463 04CAR	$850

COUNTS TEN THROUGH TWELVE

[18 U.S.C. §§ 1028A(a)(1), 2]

[All Defendants]

30. The Grand Jury re-alleges paragraphs 1 through 22, 24, 25, 28 and 29 of this Indictment here.

31. On or about the dates set forth below, in Los Angeles County, within the Central District of California, and elsewhere, defendants SHACHAR, CHOI, and SHIN, each aiding and abetting one another, together with others known and unknown to the Grand Jury, knowingly transferred, possessed, and used, and willfully caused to be transferred, possessed, and used, without lawful authority, a means of identification of another person that defendants SHACHAR, CHOI, and SHIN knew belonged to another person, as identified below, during and in relation to a felony violation of Title 18, United States Code, Section 1347, as charged in the Counts of this Indictment identified below:

COUNT	**DATE**	**MEANS OF IDENTIFICATION**	**FELONY VIOLATION**
TEN	8/14/2025	Name, Social Security number, and Medicare identification number for Kw.K.	Count 7
ELEVEN	8/25/2025	Name, Social Security number, and Medicare identification number for Ku.K.	Count 8
TWELVE	11/3/2025	Name, Social Security number, and Medicare identification number for H.R.	Count 9

COUNT THIRTEEN

[18 U.S.C. §§ 1957, 2(b)]

[Defendant SHACHAR]

32. The Grand Jury re-alleges paragraphs 1 through 22, 24, 25, 28 and 29 of this Indictment here.

33. On or about the September 20, 2024, in Los Angeles County, within the Central District of California, and elsewhere, defendant SHACHAR, knowing that the property involved represented the proceeds of some form of unlawful activity, knowingly engaged in, and willfully caused others to engage in, a monetary transaction affecting interstate commerce in criminally derived property of a value greater than $10,000, namely, the transfer of $15,000 from the Holly Trinity Hospice's J.P. Morgan Chase Bank account x8003 by means of a wire to a Wells Fargo Bank account bearing account number x0248 as a partial payment for the downpayment on lease-to-own for a Rolls Royce Phantom, which property was in fact, derived from specified unlawful activity, namely, health care fraud, in violation of Title 18, United States Code, Section 1347.

COUNTS FOURTEEN AND FIFTEEN

[42 U.S.C. § 1320a-7b(b)(2)]

[Defendant SHACHAR]

34. The Grand Jury re-alleges paragraphs 1 through 22, 24, 25, 28 and 29 of this Indictment here.

35. On or about the dates set forth below, in Los Angeles County, within the Central District of California, and elsewhere, defendant SHACHAR knowingly and willfully offered and paid remuneration directly and indirectly, overtly and covertly, in cash and in kind, to a person to induce such person to refer a beneficiary for the furnishing and arranging for the furnishing of an item and service, namely, hospice services billed through a SHACHAR Hospice, for which payment may be made in whole and in part under Medicare, a federal health care program:

COUNT	BENEFICIARY REFERRAL	DATE	APPROXIMATE AMOUNT
FOURTEEN	H.L.	9/16/2025	$300 offered and paid to Jeannie Choi
FIFTEEN	R.D.	1/29/2026	$300 offered and paid to Abraham Shin

COUNT SIXTEEN

[42 U.S.C. § 1320a-7b(b)(4)]

[Defendant SHACHAR]

36. The Grand Jury re-alleges paragraphs 1 through 22, 24, 25, 28 and 29 of this Indictment here.

37. On or about March 6, 2025, in Los Angeles County, within the Central District of California, and elsewhere, defendant SHACHAR knowingly and willfully, and without lawful authority, sold, arranged for the sale, and distributed to Physician 1 for $12,500, the beneficiary identification number and unique health identifier for a health care provider under subchapter XVIII (Medicare), namely, the Medicare identification numbers of beneficiaries Yu.L., S.L., I.L., Yo.L., E.U., S.A., A.T., V.T., and D.D.

FORFEITURE ALLEGATION ONE

[18 U.S.C. § 981(a)(1)(C) and 28 U.S.C. § 2461(c)]

1. Pursuant to Rule 32.2 of the Federal Rules of Criminal Procedure, notice is hereby given that the United States of America will seek forfeiture as part of any sentence, pursuant to Title 18, United States Code, Section 981(a)(1)(C) and Title 28, United States Code, Section 2461(c), in the event of any defendant's conviction of the offense set forth in Count One of this Indictment.

2. Any defendant so convicted shall forfeit to the United States of America the following:

(a) all right, title, and interest in any and all property, real or personal, constituting, or derived from, any proceeds traceable to the offense; and

(b) To the extent such property is not available for forfeiture, a sum of money equal to the total value of the property described in subparagraph (a).

3. Pursuant to Title 21, United States Code, Section 853(p), as incorporated by Title 28, United States Code, Section 2461(c) any defendant so convicted shall forfeit substitute property, up to the value of the property described in the preceding paragraph if, as the result of any act or omission of said defendant, the property described in the preceding paragraph or any portion thereof: (a) cannot be located upon the exercise of due diligence; (b) has been transferred, 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 that cannot be divided without difficulty.

FORFEITURE ALLEGATION TWO

[18 U.S.C. § 982(a)(7)]

1. Pursuant to Rule 32.2(a), Fed. R. Crim. P., notice is hereby given that the United States will seek forfeiture as part of any sentence, pursuant to Title 18, United States Code, Section 982(a)(7), in the event of any defendant's conviction of the offenses set forth in any of Counts Two through Twelve and Fourteen through Fifteen of this Indictment.

2. Any defendant so convicted shall forfeit to the United States of America the following:

(a) All right, title, and interest in any and all property, real or personal, that constitutes or is derived, directly or indirectly, from the gross proceeds traceable to the commission of any offense of conviction; and

(b) To the extent such property is not available for forfeiture, a sum of money equal to the total value of the property described in subparagraph (a).

3. Pursuant to Title 21, United States Code, Section 853(p), as incorporated by Title 18, United States Code, Section 982(b), any defendant so convicted shall forfeit substitute property, up to the total value of the property described in the preceding paragraph if, as a result of any act or omission of said defendant, the property described in the preceding paragraph, or any portion thereof: (a) cannot be located upon the exercise of due diligence; (b) has been transferred, 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 that cannot be divided without difficulty.

FORFEITURE ALLEGATION THREE

[18 U.S.C. § 982 (a)(1)]

1. Pursuant to Rule 32.2(a) of the Federal Rules of Criminal Procedure, notice is hereby given that the United States will seek forfeiture as part of any sentence, pursuant to Title 18, United States Code, Section 982(a)(1), in the event of the defendant's conviction of the offense set forth in Count Thirteen of this Indictment.

2. The defendant, if so convicted, shall forfeit to the United States of America the following:

(a) Any property, real or personal, involved in such offense, and any property traceable to such property; and

(b) To the extent such property is not available for forfeiture, a sum of money equal to the total value of the property described in subparagraph (a).

3. Pursuant to Title 21, United States Code, Section 853(p), as incorporated by Title 18, United States Code, Section 982(b)(1), and Title 18, United States Code, Section 982(b)(2), the defendant, if so convicted, shall forfeit substitute property, if, by any act or omission of the defendant, the property described in the preceding paragraph, or any portion thereof: (a) cannot be located upon the exercise of due diligence; (b) has been transferred, 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 that cannot be divided without difficulty. Substitution of assets shall not be ordered, however, where the convicted defendant acted merely as

an intermediary who handled but did not retain the property in the course of the money laundering offense unless the defendant, in committing the offense or offenses giving rise to the forfeiture, conducted three or more separate transactions involving a total of $100,000.00 or more in any twelve-month period.

A TRUE BILL

/S/

Foreperson

TODD BLANCHE
Acting Attorney General

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