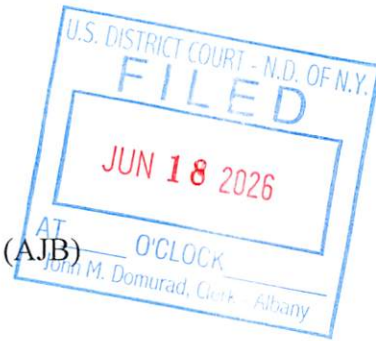


IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF NEW YORK



UNITED STATES OF AMERICA

v.

JOSEPH CARL and
RANDOLPH EKSTROM, a/k/a
"Randy,"

Defendants.

) Criminal No. 1:26-CR-195 (AJB)
)
) **Superseding Indictment**
)
) Violations: 18 U.S.C. § 1349
) [Conspiracy to commit wire
) fraud and health care fraud]
)
) 18 U.S.C. § 371
) [Conspiracy to pay health care
) kickbacks]
)
) 2 Counts and 1 Forfeiture Allegation
)
) Counties of Offenses: Albany, Columbia,
) Rensselaer, Saratoga,
) Schenectady, Warren,
) and Washington

THE GRAND JURY CHARGES:

INTRODUCTION

At times relevant to this Indictment, unless otherwise indicated:

A. The Medicaid Program

1. The New York State Medicaid program ("Medicaid") was a federal and state health care program providing benefits to low-income individuals and families who met specified financial and other eligibility requirements. The Centers for Medicare & Medicaid Services ("CMS"), a federal agency under the United States Department of Health and Human Services ("HHS"), was responsible for overseeing the Medicaid program in participating states, including New York. The New York State Department of Health administered the Medicaid program in New York State. Individuals who received benefits under Medicaid were referred to as "recipients."

2. Medicaid covered the costs of various medical services and products ranging from routine preventive medical care for children to institutional care for the elderly and disabled. Among the specific medical services covered by Medicaid were transportation services, which provided recipients with transportation to access medical care in non-emergency situations, including medical appointments.

3. To bill Medicaid, providers were required regularly to certify, among other things, that the claimed services were provided in accordance with applicable federal and state laws and regulations, that no material information had been omitted, and that the provider understood that payment of the claims were from federal, state, and local public funds.

4. Medical providers and service providers were authorized to submit claims to Medicaid only for services that were medically necessary, were provided by an authorized provider, and were not induced by payment of a kickback, among other requirements.

5. As with other Medicaid providers, to submit claims for reimbursement to Medicaid, transportation providers were required to apply for enrollment, to be enrolled, and to periodically revalidate that enrollment.

6. In New York State, recipients who sought transportation to and from medical appointments paid for by Medicaid could request such rides through Company-1, a third-party company that brokered transportation service for Medicaid in New York State. Recipients also had standing orders for recurring medical appointments, including methadone maintenance therapy.

7. Recipients could request that a particular transportation provider through Company-1, which would then connect with the requested provider to schedule the trip through

an internet-based application. If no provider was requested by a recipient, Company-1 would assign a provider.

8. To obtain Medicaid reimbursement for a trip, the provider would certify the details of the trip, including the name of the patient, the address the recipient was picked up from, the address of the medical appointment, and the address where the patient was returned. This information was submitted to the New York State Department of Health, which processed Medicaid reimbursements for New York State through servers located in Rensselaer County, New York. Where providers were reimbursed by Automated Clearing House (“ACH”) transfers, the claims process involved the sending of wire communications to Key Bank, N.A., which caused transmission of interstate wires through the processing of ACH transfers processed on servers located outside New York State.

9. Transportation providers were reimbursed for eligible trips by Medicaid with payment of a flat fee per recipient plus mileage. For group rides, transportation providers were reimbursed a flat fee for each recipient plus mileage for the recipient who was picked up and dropped off farthest from the provider. Transportation providers were not entitled to obtain mileage for each passenger in a group ride, and reimbursement was typically lower for group rides than for individual rides involving the same number of people in the group.

10. The Medicaid program was a “health care benefit program,” as defined by 18 U.S.C. § 24(b), and a “Federal health care program,” as defined by 42 U.S.C. § 1320a-7b(f).

B. The Defendants and Relevant Entities

11. Carl’s Cab was the name of a “doing business as” (“DBA”) entity registered by **JOSEPH CARL** in Saratoga County in July 2016. From at least January 1, 2020 through March

31, 2025, Carl's Cab was enrolled as a New York State Medicaid provider to provide transportation services to Medicaid recipients for medical appointments.

12. **JOSEPH CARL** owned and operated Carl's Cab and was the sole signatory to its operating account at Pioneer Bank.

13. **RANDOLPH EKSTROM, a/k/a "Randy,"** worked for Carl's Cab and assisted in managing the company.

COUNT 1
[Conspiracy to Commit Wire Fraud and Health Care Fraud]

14. The allegations contained in paragraphs 1 through 13 are realleged and incorporated as if fully set forth herein.

15. Between at least January 1, 2020 and March 31, 2025, in Albany, Columbia, Rensselaer, Saratoga, Schenectady, Warren, and Washington Counties in the Northern District of New York, and elsewhere, the defendants, **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a "Randy,"** together with others known and unknown, conspired to execute a scheme and artifice to defraud Medicaid, a health care benefit program, and to obtain money and property owned by, and under the custody and control of, Medicaid, a health care benefit program, by means of materially false and fraudulent pretenses, representations, and promises, in connection with the delivery of and payment for health care benefits, items, and services, and transmitted and caused to be transmitted by means of wire communication in interstate and foreign commerce writings, signs, signals, pictures, and sounds for the purpose of executing such scheme and artifice.

Objects of the Conspiracy

16. It was a part and object of the conspiracy that **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a "Randy,"** together with others known and unknown,

knowingly and willfully, having devised and intending to devise a scheme and artifice to defraud, and for obtaining money and property from Medicaid, a health care benefit program, by means of materially false and fraudulent pretenses, representations, and promises, would and did transmit and cause to be transmitted by means of wire, radio, and television communication in interstate and foreign commerce, writings, signs, signals, pictures, and sounds for the purpose of executing such scheme and artifice, in violation of 18 U.S.C. § 1343.

17. It was further a part and object of the conspiracy that **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a “Randy,”** together with others known and unknown, knowingly and willfully, would and did execute, and attempt to execute, a scheme and artifice to defraud Medicaid, a health care benefit program, 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, a health care benefit program, in connection with the delivery of and payment for health care benefits, items, and services, in violation of 18 U.S.C. § 1347.

Manner and Means

18. **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a “Randy,”** together with other known and unknown coconspirators, provided Medicaid recipients with cash and other things of value in exchange for using Carl’s Cab as their Medicaid transportation provider.

19. **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a “Randy,”** together with other coconspirators, submitted and caused to be submitted claims for payment to Medicaid through the New York State Department of Health that contained materially false information designed to fraudulently obtain Medicaid payments to Carl’s Cab. The materially false claims included:

- a. Seeking payment to Carl's Cab for "ghost rides," where a recipient was not actually transported to a provider for medical care;
- b. Seeking payment to Carl's Cab for trips where a recipient was not actually seen by the provider; and
- c. Seeking payment to Carl's Cab for individual trips on behalf of multiple recipients who were driven together in a group ride.

20. In the course of the conspiracy, the defendants and other coconspirators fraudulently obtained at least \$4,296,374.02 in Medicaid reimbursements paid to Carl's Cab.

All in violation of 18 U.S.C. § 1349.

COUNT 2
[Conspiracy to Pay Health Care Kickbacks]

21. The allegations contained in paragraphs 1 through 20 are realleged and incorporated as if fully set forth herein.

22. Between at least January 1, 2020 and March 31, 2025, in Albany, Columbia, and Saratoga Counties in the Northern District of New York, and elsewhere, the defendants **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a "Randy,"** together others known and unknown, did knowingly and willfully conspire to commit certain offenses against the United States, that is, to offer and pay remuneration, including kickbacks and bribes, directly and indirectly, overtly and covertly, in cash and in kind, to one or more recipients to induce those recipients to request transportation services for which payment may have been made in whole and in part under Medicaid, which was a Federal health care program, in violation of 42 U.S.C. § 1320a-7b(b)(2)(B).

Overt Acts

23. In furtherance of the conspiracy and to effect its objects, the following overt acts, among others, were committed in the Northern District of New York, and elsewhere:

- a. Between July 13, 2023 and July 14, 2023, **JOSEPH CARL** provided and caused to be provided remunerations to recipients with initials C.M., B.P., and M.B. in exchange for using Carl's Cab for medical transportation trips billed to Medicaid.
- b. On August 17, 2023, **JOSEPH CARL** prepared cash payments to recipients in exchange for using Carl's Cab for medical transportation trips billed to Medicaid. He messaged an acquaintance, "I'm stuffing envelopes!!!!\$23,500!!!" and attached an unredacted version of the photograph in Fig. 1 showing the money used for the bribes:



Fig. 1.

- c. On November 2, 2023, **JOSEPH CARL** prepared cash payments to recipients in exchange for using Carl's Cab for medical transportation trips billed to Medicaid. He messaged an acquaintance, "Getting ready to stuff. \$27,000 in envelopes for the junkies" and attached the photograph in Fig. 2 showing the money used for the bribes:



Fig. 2.

All in violation of 18 U.S.C. § 371.

FORFEITURE ALLEGATION

The allegations contained in Count 1 of this Indictment are hereby realleged and incorporated by reference for the purpose of alleging forfeiture pursuant to 18 U.S.C. § 982(a)(2).

Upon conviction of conspiracy to commit health care fraud and wire fraud, as charged in Count 1 of the Indictment, in violation of 18 U.S.C. § 1349, the defendants, **JOSEPH CARL** and **RANDOLPH EKSTROM, a/k/a "Randy,"** shall forfeit to the United States of America, pursuant to 18 U.S.C. § 982(a)(2)(A), any property constituting, and derived from, proceeds obtained directly and indirectly, as the result of such violations. The property to be forfeited includes, but is not limited to, the following:

1. A money judgment in an amount to be determined.

Dated: June 18, 2026

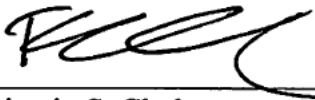
A TRUE BILL, *Name Redacted


Grand Jury Foreperson

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