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FILED

CLERK, U.S. DISTRICT COURT

06/21/2026

CENTRAL DISTRICT OF CALIFORNIA

BY: _____ DVE _____ DEPUTY

UNITED STATES DISTRICT COURT

FOR THE CENTRAL DISTRICT OF CALIFORNIA

UNITED STATES OF AMERICA,

Plaintiff,

v.

LYNN GALBRAITH,

Defendant.

No. 8:26-cr-00089-JAK

I N F O R M A T I O N

[18 U.S.C. § 1347: Health Care
Fraud]

The United States of America charges:

[18 U.S.C. §§ 1347, 2]

A. INTRODUCTORY ALLEGATIONS

At times relevant to this Information:

1. Defendant LYNN GALBRAITH was a resident of Orange County, California. Defendant GALBRAITH was a co-owner and operator of Azure Hospice Care, Inc. ("Azure"), a hospice care provider located in Garden Grove, California, from September 2019 until approximately July 2022, after which she became the sole owner and operator through February 29, 2024.

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1 The Medicare Program

2 2. Medicare was a federal health care benefit program,
3 affecting commerce, that provided benefits to individuals who were
4 65 years and older or disabled. Medicare was administered by the
5 Centers for Medicare and Medicaid Services, a federal agency under
6 the United States Department of Health and Human Services. Medicare
7 was a "health care benefit program" as defined by Title 18, United
8 States Code, Section 24(b).

9 3. Individuals who qualified for Medicare benefits were
10 referred to as Medicare "beneficiaries."

11 4. Hospices, physicians, and other health care providers who
12 provided services to beneficiaries that were reimbursed by Medicare
13 were referred to as "providers."

14 5. To become eligible to participate in Medicare, Medicare
15 required prospective providers to be licensed by a state or local
16 agency. After obtaining the applicable license, Medicare required
17 prospective hospice providers to submit an application in which the
18 prospective provider agreed to: (a) comply with all Medicare-related
19 laws and regulations; and (b) not submit claims for payment to
20 Medicare knowing they were false or fraudulent or with deliberate
21 ignorance or reckless disregard of their truth or falsity. If
22 Medicare approved the application, Medicare assigned the provider an
23 identifying number, which enabled the provider to submit claims to
24 Medicare for reimbursement for services provided to Medicare
25 beneficiaries.

26 Hospice Services

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

1 7. To qualify for reimbursement for hospice services, Medicare
2 required: (1) a physician to certify that the beneficiary was
3 terminally ill, meaning a life expectancy of six months or less if
4 the beneficiary's illness ran its normal course; and (2) the
5 beneficiary to sign an election form statement choosing hospice care
6 instead of other Medicare benefits. Hospice services reimbursed by
7 Medicare were palliative in nature and included, but were not limited
8 to, medications to manage pain symptoms, necessary medical equipment,
9 and bereavement services to surviving family members. Once a
10 beneficiary chose hospice care, Medicare would not cover treatment
11 intended to cure the beneficiary's terminal illness. The election
12 form was required to include an acknowledgement that the beneficiary
13 had been given a full understanding of hospice care, including the
14 palliative rather than curative nature of treatment, and an
15 acknowledgement that the beneficiary understood that certain Medicare
16 services were waived by the election.

17 8. If the beneficiary had a primary care physician ("PCP"),
18 Medicare required the PCP and a physician at a hospice to certify in
19 writing that the beneficiary was terminally ill.

20 9. Medicare was divided into different program "parts": Part
21 A, Part B, Part C, and Part D. Medicare covered hospice services for
22 those beneficiaries who were eligible for Medicare Part A (hospital-
23 related services). When a Medicare beneficiary elected hospice
24 coverage, the beneficiary waived all rights to Medicare Part B
25 (outpatient physician services and procedures) coverage of services
26 to treat or reverse the beneficiary's terminal illness while the
27 beneficiary was on hospice.

1 10. A beneficiary could elect to receive hospice benefits for
2 two periods of 90 days and, thereafter, additional service for
3 periods of 60 days per period.

4 11. For the beneficiary to continue to receive hospice benefits
5 after the second 90-day period, Medicare required that a physician
6 re-certify that the beneficiary was terminally ill and include clinic
7 findings or other documentation supporting the diagnosis of terminal
8 illness. For re-certifications, Medicare required a hospice
9 physician or nurse practitioner to meet with the beneficiary in
10 person and conduct a face-to-face evaluation before signing a
11 certification of terminal illness.

12 12. Most providers, including Azure, submitted their claims
13 electronically pursuant to an agreement with Medicare that they would
14 submit claims that were accurate, complete, and truthful.

15 13. Azure received payments on Medicare claims via electronic
16 funds transfer to a JPMorgan Chase bank account, on which defendant
17 was a signatory.

18 B. THE SCHEME TO DEFRAUD

19 14. Beginning no later than in or about April 1, 2021, and
20 continuing through about February 29, 2024, in Orange County, within
21 the Central District of California, and elsewhere, defendant
22 GALBRAITH, together with others known and unknown to the United
23 States of America, knowingly, willfully, and with intent to defraud,
24 executed, and willfully caused to be executed, a scheme and artifice:
25 (a) to defraud Medicare, a health care benefit program, as to
26 material matters in connection with the delivery of and payment for
27 health care benefits, items, and services; and (b) to obtain money
28 from Medicare by means of material false and fraudulent pretenses,

1 representations, and promises, and the concealment of material facts
2 in connection with the delivery of and payment for health care
3 benefits, items, and services.

4 C. MEANS TO ACCOMPLISH THE SCHEME TO DEFRAUD

5 15. The fraudulent scheme operated, in substance, as follows:

6 a. Defendant GALBRAITH submitted and caused Azure to
7 submit false and fraudulent claims to Medicare for reimbursement of
8 hospice services for beneficiaries who defendant GALBRAITH knew did
9 not have a terminal illness with a life expectancy of six months or
10 less if the illness ran its normal course.

11 b. Defendant GALBRAITH knew the beneficiaries named in
12 the claims were not eligible for hospice care and knew that they did
13 not have sufficient medical records supporting a diagnosis and
14 prognosis that qualified them for hospice benefits.

15 16. Between in or around April 1, 2021 and February 29, 2024,
16 as part of the fraudulent scheme, defendant GALBRAITH submitted and
17 caused the submission of approximately \$2,266,694.88 in fraudulent
18 claims to Medicare for hospice services, resulting in Medicare
19 payments of approximately \$2,140,606.07.

20 D. EXECUTION OF THE FRAUDULENT SCHEME

21 17. On or about November 30, 2022, in Orange County, within the
22 Central District of California, and elsewhere, defendant GALBRAITH,
23 together with others known and unknown to the Grand Jury, knowingly
24 and willfully executed, and willfully caused the execution of, the
25 fraudulent scheme described above by submitting and causing to be
26 submitted to Medicare a false and fraudulent claim to Medicare in the

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1 amount of \$6,600, for reimbursement of hospice services for
2 beneficiary L.G.H.

3 TODD BLANCHE
4 Acting Attorney General

5 BILAL A. ESSAYLI
6 First Assistant United States
7 Attorney

8 

9 JENNIFER L. WAIER
10 Chief Assistant United States
11 Attorney &
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13 MARK P. TAKLA
14 Assistant United States Attorney
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16 JEHAN P. KIM
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