

THE STATE OF IOWA

Plaintiff,

vs.

ERICA SUE BOVEE

Defendant.

CASE NUMBER: _____

COMPLAINT AND AFFIDAVIT

The Defendant is accused of **Tampering With Records**, in that, **Erica Sue Bovee**, on or about 7/20/24 through 9/8/24 and 2/10/25 through 2/26/25, in the County of Marshall and the State of Iowa, in violation of Iowa Code section(s) 715A.5, knowing that the person had no privilege to do so, falsified, destroyed, removed or concealed a writing or record, with the intent to deceive or injure anyone or conceal any wrongdoing; **to wit:** Bovee's daughter receives respite and supported community living (SCL) services through the Consumer Choices Option (CCO) paid for by Iowa Medicaid. Bovee's husband and mother-in-law are the providers of these services to Bovee's daughter. Bovee admitted that she completed and submitted documentation indicating that her mother-in-law and husband were providing these services to her daughter during the aforementioned time frames while her daughter was in the hospital, during which time any respite and SCL services were not allowed to be billed to Iowa Medicaid. Bovee's claims for 225 hours of services resulted in a total loss to Iowa Medicaid of \$5,306.87. (Aggravated Misdemeanor).

State of Iowa, Medicaid Fraud Control Unit
Department of Inspections, Appeals, & Licensing

AFFIDAVIT

STATE OF IOWA, COUNTY OF POLK

I, the undersigned, being duly sworn, state that the following facts known by me or told to me by other reliable persons form the basis for my belief that the Defendant committed this crime: On or about 7/20/24 through 9/8/24 and 2/10/25 through 2/26/25 in Marshall County, Iowa, the Defendant, admitted that she completed and submitted documentation indicating that her mother-in-law and husband were providing respite and supported community living (SCL) services to her daughter during the aforementioned time frames while her daughter was in the hospital, during which time any respite and SCL services were not allowed to be billed to Iowa Medicaid. Bovee's claims for 225 hours of services resulted in a total loss to Iowa Medicaid of \$5,306.87. This is an Aggravated Misdemeanor.

Signature of Affiant:

State of Iowa, Medicaid Fraud Control Unit
Department of Inspections, Appeals, &
Licensing

Subscribed and sworn to before me by the person signing this Complaint and Affidavit on this 18th day of June, 2026.

FILED 2026 JUN 19 4:20 PM MARSHALL, CLERK OF DISTRICT COURT



- ☒ Request that the Court find probable cause to allow the filing of this Complaint.
- ☒ Summons Requested. Initial appearance set for 7/6/26 at 8:30am

THE STATE OF IOWA

Plaintiff,

vs.

ERICA SUE BOVEE

Defendant.

CASE NUMBER: _____

COMPLAINT AND AFFIDAVIT

The Defendant is accused of **Fraudulent Practice-2nd Degree**, in that, **Erica Sue Bovee**, on or about 7/20/24 through 9/8/24 and 2/10/25 through 2/26/25, in the County of Marshall and the State of Iowa, in violation of Iowa Code section(s) 249A.51; 714.8(10); 714.10, knowingly made or caused to be made false statements or misrepresentations of material facts or knowingly failed to disclose material facts in application for payment of services or merchandise rendered or purportedly rendered by a provider in the medical assistance program, and the amount of money or value of property or services involved exceeds \$1,500 but does not exceed \$10,000; **to wit:** Bovee's daughter receives respite and supported community living (SCL) services through the Consumer Choices Option (CCO) paid for by Iowa Medicaid. Bovee's husband and mother-in-law are the providers of these services to Bovee's daughter. Bovee admitted that she completed and submitted documentation indicating that her mother-in-law and husband were providing these services to her daughter during the aforementioned time frames while her daughter was in the hospital, during which time any respite and SCL services were not allowed to be billed to Iowa Medicaid. Bovee's claims for 225 hours of services resulted in a total loss to Iowa Medicaid of \$5,306.87. (Class D Felony).

State of Iowa, Medicaid Fraud Control Unit
Department of Inspections, Appeals, & Licensing

AFFIDAVIT

STATE OF IOWA, COUNTY OF POLK

I, the undersigned, being duly sworn, state that the following facts known by me or told to me by other reliable persons form the basis for my belief that the Defendant committed this crime: On or about 7/20/24 through 9/8/24 and 2/10/25 through 2/26/25 in Marshall County, Iowa, the Defendant, admitted that she completed and submitted documentation indicating that her mother-in-law and husband were providing respite and supported community living (SCL) services to her daughter during the aforementioned time frames while her daughter was in the hospital, during which time any respite and SCL services were not allowed to be billed to Iowa Medicaid. Bovee's claims for 225 hours of services resulted in a total loss to Iowa Medicaid of \$5,306.87. This is a Class D Felony.

Signature of Affiant:

State of Iowa, Medicaid Fraud Control Unit
Department of Inspections, Appeals, &

Subscribed and sworn to before me by the person signing this Complaint and Affidavit on this 18th day of June, 2026.



X Request that the Court find probable cause to allow the filing of this Complaint.
X Summons Requested. Initial appearance set for 7/6/26 at 8:30am