COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: MONTGOMERY

Magisterial District Number: 38-1-01
MDJ: Hon. Marc Alfarano
Address: 160 W Germantown Pike
Norristown, PA 19401
Telephone: (610) 272-3029

POLICE CRIMINAL COMPLAINT
COMMONWEALTH OF PENNSYLVANIA
VS.

DEFENDANT: *(NAME and ADDRESS):*

Edward	A	Green	Sr.
First Name	*Middle Name*	*Last Name*	*Gen.*

[redacted]
Philadelphia, PA 19124

NCIC Extradition Code Type

- ☒ 1-Felony Full
- ☐ 2-Felony Ltd.
- ☐ 3-Felony Surrounding States
- ☐ 4-Felony No Ext.
- ☐ 5-Felony Pend.
- ☐ 6-Felony Pend. Extradition Determ.
- ☐ A-Misdemeanor Full
- ☐ B-Misdemeanor Limited
- ☐ C-Misdemeanor Surrounding States
- ☐ D-Misdemeanor No Extradition
- ☐ E-Misdemeanor Pending
- ☐ F-Misdemeanor Pending Extradition Determ.
- ☐ Distance: _____

DEFENDANT IDENTIFICATION INFORMATION

Docket Number	Date Filed	OTN/LiveScan Number	Complaint Number	Incident Number	Request Lab Services?
CR-247-26	06/16/26	~~B102015E~~	MF1250150-116F		☐ YES ☒ NO

GENDER	DOB	POB	Add'l DOB	Co-Defendant(s)
☒ Male ☐ Female	[redacted]	5102003D-4	/ /	☐

First Name | Middle Name | Last Name | Gen.

AKA

RACE: ☐ White ☐ Asian ☒ Black ☐ Native American ☐ Unknown
ETHNICITY: ☐ Hispanic ☒ Non-Hispanic ☐ Unknown

HAIR COLOR: ☐ GRY (Gray) ☐ RED (Red/Aubn.) ☐ SDY (Sandy) ☐ BLU (Blue) ☐ PLE (Purple) ☐ BRO (Brown) ☒ BLK (Black) ☐ ONG (Orange) ☐ WHI (White) ☐ XXX (Unk./Bald) ☐ GRN (Green) ☐ PNK (Pink) ☐ BLN (Blonde / Strawberry)

EYE COLOR: ☐ BLK (Black) ☐ BLU (Blue) ☒ BRO (Brown) ☐ GRN (Green) ☐ GRY (Gray) ☐ HAZ (Hazel) ☐ MAR (Maroon) ☐ PNK (Pink) ☐ MUL (Multicolored) ☐ XXX (Unknown)

DNA	☐ YES ☐ NO	DNA Location		WEIGHT (lbs.)
FBI Number		MNU Number		
Defendant Fingerprinted	☐ YES ☐ NO			Ft. HEIGHT In.
Fingerprint Classification:				5 10

DEFENDANT VEHICLE INFORMATION

Plate #	State	Hazmat ☐	Registration Sticker (MM/YY) /	Comm'l Veh. Ind. ☐	School Veh. ☐	Oth. NCIC Veh. Code	Reg. same as Def. ☐
VIN	Year	Make	Model	Style	Color		

Office of the attorney for the Commonwealth ☐ Approved ☐ Disapproved because: _____

(The attorney for the Commonwealth may require that the complaint, arrest warrant affidavit, or both be approved by the attorney for the Commonwealth prior to filing. See Pa.R.Crim.P. 507).

AIC ERIC STRYD
(Name of the attorney for the Commonwealth)

(Signature of the attorney for the Commonwealth)

8/15/2026
(Date)

I, Chloe Prettyman
(Name of the Affiant)

BADGE 1011
(PSP/MPOETC -Assigned Affiant ID Number & Badge #)

of PENNSYLVANIA OFFICE OF ATTORNEY GENERAL
(Identify Department or Agency Represented and Political Subdivision)

PA00222400
(Police Agency ORI Number)

do hereby state: (check appropriate box)

1. ☒ I accuse the above named defendant who lives at the address set forth above
   ☐ I accuse the defendant whose name is unknown to me but who is described as _____

   ☐ I accuse the defendant whose name and popular designation or nickname are unknown to me and whom I have therefore designated as John Doe or Jane Doe
   with violating the penal laws of the Commonwealth of Pennsylvania at [202] (Subdivision Code) 2860 Dekalb Pike STE 100 (Place-Political Subdivision)
   East Norriton, PA 19401
   in ~~PHILADELPHIA~~ County [46] (County Code) on or about OCTOBER 25, 2024, THROUGH JANUARY 31, 2025 (Offense Date)

POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint Number MFI250150-116F	Incident Number
Defendant Name	First: Edward	Middle: A	Last: Green	

The acts committed by the accused are described below with each Act of Assembly or statute allegedly violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.
(Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinance(s) allegedly violated.)

Inchoate Offense	☐ Attempt *18 901 A*	☐ Solicitation *18 902 A*	☐ Conspiracy *18 903*	Number of Victims Age 60 or Older _____

Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☒	1	1407	A(1)	of the	62 P.S.	1	F-3	2699	110

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):
MEDICAID FRAUD - SUBMISSION OF FALSE INFORMATION

Acts of the accused associated with this Offense:
One continuous count of knowingly or intentionally submitting false information for the purpose of receiving greater compensation than entitled to receive under the Medical Assistance Program.

Inchoate Offense	☐ Attempt *18 901 A*	☐ Solicitation *18 902 A*	☐ Conspiracy *18 903*	Number of Victims Age 60 or Older _____

Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐	2	1407	A(4)	of the	62 P.S.	1	F-3	2699	110

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):
MEDICAID FRAUD - SERVICES NOT RENDERED

Acts of the accused associated with this Offense:
One continuous count of knowingly or intentionally submitting, or causing to be submitted, a claim for services which were not rendered to a recipient under the Medical Assistance Program.

Inchoate Offense	☐ Attempt *18 901 A*	☐ Solicitation *18 902 A*	☐ Conspiracy *18 903*	Number of Victims Age 60 or Older _____

Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐	3	1407	A(7)	of the	62 P.S.	1	F-3	2699	110

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):
MEDICAID FRAUD - MISREPRESENTATION

Acts of the accused associated with this Offense:
One continous count of knowingly or intentionally submitting, or causing to be submitted, a claim which misrepresented the description of services provided; the dates of services, the identity of the recipient or the actual provider under the Medical Assistance Program.

POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint Number MFI250150-116F	Incident Number
Defendant Name	First: Edward	Middle: A	Last: Green	

The acts committed by the accused are described below with each Act of Assembly or statute allegedly violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.
(Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinance(s) allegedly violated.)

Inchoate Offense	☐ Attempt 18 901 A	☐ Solicitation 18 902 A	☐ Conspiracy 18 903	Number of Victims Age 60 or Older ____

☐ Lead?	Offense#	Section	Subsection	of the	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐	4	1407	A(9)	of the	62 P.S.	1	F-3	2699	110

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):
MEDICAID FRAUD - SUBMIT CLAIMS FOR SERVICES NOT RENDERED

Acts of the accused associated with this Offense:
One continous count of submitting claims for a service or item which was not rendered by the provider.

Inchoate Offense	☐ Attempt 18 901 A	☐ Solicitation 18 902 A	☐ Conspiracy 18 903	Number of Victims Age 60 or Older ____

☐ Lead?	Offense#	Section	Subsection	of the	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐	5	3922	A(1)	of the	18 PA C.S.A.	1	F-3	2399	

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):
THEFT BY DECEPTION

Acts of the accused associated with this Offense:
One continuous count of intentionally obtaining or withholding property of another by creating or reinforcing a false impression, including false impressions as to law, value, intention, or other state of mind causing the theft of Medical Assistance funds of greater than $2,000.

Inchoate Offense	☐ Attempt 18 901 A	☐ Solicitation 18 902 A	☐ Conspiracy 18 903	Number of Victims Age 60 or Older ____

☐ Lead?	Offense#	Section	Subsection	of the	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐	6	4911	A(1)	of the	18 PA C.S.A.	1	F-3	2699	

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):
TAMPERING WITH PUBLIC RECORDS

Acts of the accused associated with this Offense:
One count of knowingly making a false entry in, of any record, document or thing belonging to, recevied by, or kept by, the Government.

POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed:	OTN/LiveScan Number	Complaint Number	Incident Number
	/ /		MFI250150-116F	

Defendant Name	First:	Middle:	Last:
	Edward	A	Green

The acts committed by the accused are described below with each Act of Assembly or statute allegedly violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.
(Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinance(s) allegedly violated.)

Inchoate Offense	☐ Attempt 18 901 A	☐ Solicitation 18 902 A	☐ Conspiracy 18 903	Number of Victims Age 60 or Older ____

Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐				of the					

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:

Inchoate Offense	☐ Attempt 18 901 A	☐ Solicitation 18 902 A	☐ Conspiracy 18 903	Number of Victims Age 60 or Older ____

Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐				of the					

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:

Inchoate Offense	☐ Attempt 18 901 A	☐ Solicitation 18 902 A	☐ Conspiracy 18 903	Number of Victims Age 60 or Older ____

Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
☐				of the					

PennDOT Data (if applicable)	Accident Number		☐ Interstate	☐ Safety Zone	☐ Work Zone

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:

POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed:	OTN/LiveScan Number	Complaint Number	Incident Number
	/ /		MFI250150-116F	

Defendant Name	First:	Middle:	Last:
	Edward	A	Green

2. I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.

3. I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Code (18 Pa.C.S. § 4904) relating to unsworn falsification to authorities.

4. This complaint consists of the preceding page(s) numbered 1 through 4.

5. I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

The acts committed by the accused, as listed and hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of the Assembly, or in violation of the statutes cited.
(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached.)

June 16 (Date) 2026 (Year) [signature] (Signature of Affiant)

AND NOW, on this date 6/16/26 I certify that the complaint has been properly completed and verified.

An affidavit of probable cause must be completed before a warrant can be issued.

38-1-16 (Magisterial District Court Number) [signature] (Issuing Authority)

SEAL

POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint Number MFI2501250116F	Incident Number MFI2501250116F
Defendant Name	First: Edward	Middle:	Last: Green	

AFFIDAVIT of PROBABLE CAUSE

Your Affiant, Chloe Prettyman, Badge# 1011, is a sworn Special Agent with the Pennsylvania Office of Attorney General, Bureau of Criminal Investigations, Medicaid Fraud Control Section, located at 1000 Madison Avenue, Suite 310, Norristown, PA 19403.

Your Affiant was assigned to investigate allegations of Medicaid Fraud committed by Direct Care Worker (DCW) Edward Green Sr. (Green) after UPMC reported Green submitted times for Medical Assistance (MA) recipient "TD" while TD was incarcerated.

TD was approved to receive personal assistance service (PAS) hours through the Pennsylvania Department of Human Services' Community Health Choices Waiver (CHC Waiver). The CHC Waiver allows MA recipients to remain in the community rather than being admitted into a Long-Term Care Facility. One of the services available through the waiver is a DCW, who assists with activities of daily living and other home-based tasks.

The CHC Waiver requires MA recipients to select a Managed Care Organization (MCO) to administer their benefits. DCWs submit timekeeping records of the services they provide to the agency with whom they are employed. Based on those records, the agency submits claims to the MCO and the respective MCO disperses payment to the agency utilizing MA funds. TD chose UPMC as his MCO, and True Care Home Care Services Inc. (True Care), located at 2860 Dekalb Pike, Suite 100, East Norriton, PA 19401, as the agency tasked with overseeing his PAS hours.

Your Affiant obtained records from True Care, which included the personnel file for Green and shift data submitted by Green in the form of time sheets and Electronic Visit Verification (EVV) entries. EVV is electronically collected time submissions made by DCWs to digitally record and submit the hours of services provided. A review of these records revealed Green became employed by True Care in 2022 and provided daily PAS to TD during the period of October 1, 2024, through January 31, 2025. Green used the mobile application "HHAeXchange" to make most of his time submissions. If an EVV entry was missed, a digital time sheet was collected with Green's signature to verify the hours in which PAS was provided. During this time frame, Green made daily time submissions generally indicating a shift from 7:00AM to 5:00PM, which caused True Care to bill UPMC between 9.25 and 10.75 hours for each day.

Your Affiant also obtained records from Lehigh County Department of Corrections and Luzerne County Prison. The records showed that TD was incarcerated at Lehigh County Jail from October 25, 2024, until January 15, 2025, and transferred to Luzerne County Prison on January 15, 2025, until July 17, 2025. During this period of October 25, 2024, through January 31, 2025, Green made EVV or time sheet submissions to True Care for 979.5 hours that he could not have performed because TD was incarcerated. Your Affiant received and reviewed claims data from UPMC and found the fraudulent submissions made by Green caused UPMC to pay at least $21,078.84 for services that could not be rendered. A review of payroll records provided by True Care found Green was compensated in accordance with his time submissions.

Your Affiant interviewed Green on May 14, 2026. During this interview, Green confirmed he was employed through True Care to provide PAS to TD. Green admitted that he had exclusive access to his HHAeXchange account information to make EVV entries. Green also confirmed receiving digital time sheets to review and

Docket Number:	Date Filed: 1/1	OTN/LiveScan Number	Complaint Number MFI2501250116F	Incident Number MFI2501250116F
Defendant Name	First: Edward	Middle:	Last: Green	

AFFIDAVIT of PROBABLE CAUSE

sign when there was an error in EVV submission. Green reported he became aware TD was incarcerated on November 27, 2024, and continued to submit time entries for services purportedly provided through the following January.

I CHLOE PRETTYMAN, BEING DULY SWORN ACCORDING TO THE LAW, DEPOSE AND SAY THAT THE FACTS SET FORTH IN THE FOREGOING AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

I CERTIFY THAT THIS FILING COMPLIES WITH THE PROVISIONS OF THE *CASE RECORDS PUBLIC ACCESS POLICY OF THE UNIFIED JUDICIAL SYSTEM OF PENNSYLVANIA* THAT REQUIRE FILING CONFIDENTIAL INFORMATION AND DOCUMENTS DIFFERENTLY THAN NON-CONFIDENTIAL INFORMATION AND DOCUMENTS.

(Signature of Affiant)

Sworn to me and subscribed before me this 16 day of June 2026

6/16/26 Date _____, Magisterial District Judge

My commission expires ~~first Monday of January,~~ Dec. 31, 2033.

SEAL