AO 91 (Rev. 11/11) Criminal Complaint

# UNITED STATES DISTRICT COURT

for the

	Central	District o	f Illinois		
United States of America v.		)	Case No. 18-m	)-306B	ED
Steve Robinson		)		JUN 1	8 2018
Defendant(s)  CRIMINA		AL CO	MPLAINT	CLERK OF THE U.S. DISTRIC	CT COURT
I, the complainant	in this case, state that the fo	llowing is	s true to the best of my	knowledge and belief	
On or about the date(s) of	August 3, 2015 - August 2	29, 2016	in the county of	Sangamon	in the
Central District	of Illinois	$_{_{-}}$ , the def	fendant(s) violated:		
Code Section			Offense Description	on	
18 U.S.C. § 1347	Health Care F	raud		įž.	
This criminal com See Attached Affidavit.	plaint is based on these facts	i:			
<b>♂</b> Continued on the	ne attached sheet.				
		ē	s/Timothy Minden  Complyinant's signature  Timothy Minden, Special Agent, HHS/OIG  Printed name and title		
Sworn to before me and sig	gned in my presence.				
Date: 6 18 2018			s/Tom Schar	zle-Haskins	
City and state:	Springfield, Illinois			laskins, U.S. Magistra inted name and title	ate Judge

#### **AFFIDAVIT**

Timothy Minden, being first duly sworn, states the following:

- I am a Special Agent with the US Department of Health & Human Services,
  Office of Inspector General (HHS/OIG). I have been so employed since April 2002. I am
  assigned to investigate criminal violations of federal laws, including, health care, mail, and wire
  fraud. I am also a participant in the "Central Illinois Health Care Fraud Task Force," which
  includes agents, investigators and attorneys for HHS/OIG, the FBI, Illinois State Police Medicaid
  Fraud Control Bureau (ISP), the Illinois Attorney General's Office (AGO), and the U.S.
  Attorney's Office (USAO). The following information is based upon my knowledge of the
  investigation and the investigation by other law enforcement and regulatory officials. Because I
  submit this document for the limited purpose of determining probable cause to support a criminal
  complaint, I have not included all the facts known to me concerning this investigation.
- 2) The evidence compiled to date shows that STEVE ROBINSON (ROBINSON) defrauded the government and committed multiple acts of health care fraud, violating Title 18, United States Code, § 1347. ROBINSON did so by executing a scheme to defraud the State of Illinois Medicaid Home Services Program (HSP) by falsely claiming and taking payment for personal assistant services not actually performed, as described in this affidavit.

#### Background

- 3) At all times material herein, the HSP was a "Medicaid Waiver" program in the State of Illinois administered by the Illinois Department of Human Services (DHS). Medicaid Waiver programs enable states to use both state and federal Medicaid funds to pay for services related to medical care that Medicaid would not ordinarily cover.
  - 4) The operational responsibility for the HSP, with minor exceptions, rested with the

Division of Rehabilitation Services (DORS), which is an agency within the DHS. At all times relevant, the Centers for Medicare and Medicaid Services, which is an agency within the United States Department of Health & Human Services, provided approximately half of the money funding this program.

- 5) Through the HSP, the State of Illinois provided funding for services to individuals with significant disabilities so that they could remain in their homes and live as independently as possible. The HSP refers to these individuals as "customers." The HSP provides such individuals with a "Personal Assistant," hereafter referred to as "PA." Through the HSP, a qualified individual can hire one or more PAs, who are to perform or assist those with disabilities in performing common tasks such as household tasks, shopping, personal care, incidental health care tasks, and monitoring to ensure the health and safety of the customer. PAs are to be hired by and report directly to the customer or the customer's family member, but they are paid by the State of Illinois with Medicaid funds.
- 6) To receive payment as a PA, the PA and the customer complete and submit time sheets twice monthly. These time sheets contain the dates and number of hours worked by the PA. Both the PA and the customer are required to certify the accuracy of the time sheets. The time sheets are then submitted to DORS, and if approved, the claims are paid through the Illinois Office of the Comptroller (the Comptroller) in Springfield, Illinois. Unless the PA has an appropriate direct deposit agreement approved by the State of Illinois, payment is made by check or "warrant" issued by the Comptroller in Springfield, Illinois, and sent by United States mail to the address listed by the PA. At all times relevant, the Comptroller paid ROBINSON by warrant.

### Fraud Committed by Steve Robinson

- One of the persons eligible for assistance through the HSP was "EW," the mother of ROBINSON, who is a resident of Decatur, Illinois. On or about May 1, 2000, ROBINSON applied with DORS to be the PA for "EW." On or about May 1, 2000, ROBINSON signed a "Customer/Provider Agreement" and submitted it to DORS. The document lists Robinson as the "Individual Provider" (another term used for a PA), and "EW" as the "Customer." The document contains the following provisions: The following statements appear above the signature block on the document:
  - The customer and the Personal Assistant (hereinafter called "provider") understand and agree to the following program provisions governing delivery of services and receipt of payment through Illinois Department of Human Services Office of Rehabilitation Services (DHS-ORS) the Home Services Program. Compliance with the program provisions described herein is required for participation in the Home Services Program, as they are necessary to ensure implementation of the service plan and proper use of state and federal funds.
  - Customer and provider agree to provide all information and documentation necessary to develop a service plan and to authorize services, assuring that such information is complete and accurate, and that all information learned or heard or contained in the service plan shall be held as confidential by the provider.
  - Provider agrees that services shall not be subcontracted to anyone else.
- 8) On or about May 4, 2016, DORS discovered that ROBINSON may have been working for Jackson Family Dealerships during the same time ROBINSON was working as a PA for "EW." DORS subsequently obtained employment records, including the dates and times worked by ROBINSON at Jackson Family Dealerships.
- 9) Individuals familiar with this investigation performed an analysis of ROBINSON's employment records from DORS and from Jackson Family Dealership, concluding the following. From on or about August 3, 2015 through on or about August 29, 2016, ROBINSON submitted time sheets to DORS that contained false information as follows.

On approximately 111 dates during the above referenced time, ROBINSON inflated the number of hours that he actually worked for "EW" by claiming that he was working for "EW" when he was in fact working at a second job at a car dealership. During this time, ROBINSON reported working approximately 308 hours for "EW" when he was actually clocked in at his second job. DORS paid ROBINSON approximately \$3,683 for these hours falsely reported for "EW."

- 10) The time sheets that ROBINSON signed and submitted to DORS during this time each contained a statement, labeled, "CUSTOMER/INDIVIDUAL PROVIDER CERTIFICATION FOR SERVICES RENDERED," which reads:
  - I certify that the above information is true and in accordance with the Individual Provider Payment Policies (IL488-2252). I understand that falsification of any information submitted on this form could lead to criminal prosecution.
- 11) On August 17, 2017, investigators interviewed "EW." "EW" reported her son, ROBINSON, is her PA and that the hours reported on the PA time sheets are accurate for the hours ROBINSON works. Investigators then confronted "EW" with the conflict existing between ROBINSON's DORS time sheets and his time sheets from Jackson Family Dealerships. "EW" then reported that ROBINSON worked all of the hours reported on the time sheets, just at different times than what was reported on the time sheets.
- 12) On August 17, 2017, investigators also interviewed ROBINSON. ROBINSON admitted that the times reported on the PA time sheets were incorrect. ROBINSON said he tried to provide the hours of service that were billed on the PA time sheets to "EW" by coming at different times than were reported on the time sheets, or by having family fill in to provide services. ROBINSON said he takes full responsibility for these actions and is willing to repay any monies he wrongly received.
  - 13) Based on the foregoing evidence to date, there is probable cause to believe that

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ROBINSON defrauded the United States, and committed multiple acts of Health Care Fraud, violating Title 18, United States Code, § 1347, by defrauding the State of Illinois Medicaid Home Services Program by falsely claiming and taking payments for PA services not actually performed.

FURTHER AFFIANT SAYETH NOT.

Respectfully submitted,

s/Timothy W. Minden

Timothy W. Minden, Special Agent HHS/OIG

Subscribed and sworn to before me

this 19thday of June, 2018.

s/Tom Schanzle-Haskins

TOM SCHANZLE-HASKINS UNITED STATES MAGISTRATE JUDGE