

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

UNITED STATES OF AMERICA

v.

D-1 BLANCA SMITH and
D-2 ANITA WRIGHT,

Case:2:16-cr-20434
Judge: Hood, Denise Page
MJ: Whalen, R. Steven
Filed: 06-16-2016 At 04:06 PM
INDI SEALED v SEALED (sk)

VIO.: 18 U.S.C. § 1349
18 U.S.C. § 1347 and 2

Defendants.

INDICTMENT

THE GRAND JURY CHARGES:

General Allegations

At all times relevant to this Indictment:

The Medicare Program

1. The Medicare program was a federal health care program providing benefits to persons who were over the age of 65 or disabled. Medicare was administered by the Centers for Medicare and Medicaid Services ("CMS"), a federal agency under the United States Department of Health and Human Services. Individuals who received benefits under Medicare were referred to as Medicare "beneficiaries."

2. Medicare was a “health care benefit program,” as defined by 18 U.S.C. § 24(b).

3. The Medicare program included coverage under two primary components, hospital insurance (Part A) and medical insurance (Part B). Part B of the Medicare program covered the costs of physicians’ services and other ancillary services not covered by Part A.

4. Physician services, physical therapy services, and psychotherapy services are provided in both an office and/or home setting and are covered by Medicare Part B. Under Medicare Part B, services must be medically necessary and provided by licensed physicians or otherwise qualified medical professionals.

5. The claims at issue in this Indictment were submitted under Part B of the Medicare program.

6. Wisconsin Physicians Service was the CMS contracted carrier for Medicare Part B in the State of Michigan. Cahaba Safeguard Administrators was the program integrity contractor for Medicare Part B in the State of Michigan until on or about April 10, 2015, when it was replaced by AdvanceMed.

7. By becoming a participating provider in Medicare, providers agree to abide by the policies and procedures, rules, and regulations governing Medicare reimbursement. To receive Medicare funds, enrolled providers, together with their authorized agents, employees, and contractors, are required to abide by all the

provisions of the Social Security Act, the regulations promulgated under the Act, and applicable policies and procedures, rules, and regulations, issued by CMS and its authorized agents and contractors.

8. Upon certification, the medical provider, whether a clinic or an individual, was assigned a provider identification number for billing purposes (referred to as a PIN). When the medical provider rendered a service, the provider submitted a claim for reimbursement to the Medicare contractor/carrier that included the PIN assigned to that medical provider. A Medicare claim was required to set forth, among other things, the beneficiary's name, the date the services were provided, the cost of the services, and the name and identification number of the physician or other health care provider who had ordered the services.

9. Health care providers were given and provided with online access to Medicare manuals and services bulletins describing proper billing procedures and billing rules and regulations.

10. Health care providers could only submit claims to Medicare for medically necessary services that they rendered. Medicare regulations required health care providers to maintain complete and accurate patient medical records to verify that the services were provided as described in the claim. These records

were required to be sufficient to permit Medicare, through its contractors, to review the appropriateness of Medicare payments made to the health care provider.

11. To receive reimbursement for a covered service from Medicare, a provider was required to submit a claim, either electronically or using a form, containing the required information appropriately identifying the provider, patient, and services rendered, among other information.

The Defendants, Relevant Entities, and Individuals

12. Advanced Billing Solutions, LLC (“ABS”) was a Medicare billing company located at 17200 West 10 Mile Road, Southfield, Michigan 48075.

13. Psych to Site Wellness Program Inc. (“PTS”) was an adult day center registered at the following address: 17200 West 10 Mile Road, Suite 204, Southfield, Michigan 48075.

14. Care Choice Adult Program, Inc. (“Care Choice”) was an adult day center registered at the following address: 17200 West 10 Mile Road, Suite 205, Southfield, Michigan 48075.

15. DBS Strategic Consulting Services, LLC (“DBS”) was a consulting business registered at the following address: 3303 Woodstock Drive, Detroit, Michigan 48221.

16. Defendant BLANCA SMITH, a resident of Douglas County, Georgia, was the owner and registered agent of ABS, and was the biller for services

purportedly provided by PTS and Care Choice. Defendant BIANCA SMITH was also the co-owner, co-incorporator, director, and secretary of PTS, and a co-incorporator of Care Choice.

17. Defendant ANITA WRIGHT, a resident of Oakland County, co-owned PTS, and was a co-incorporator and registered agent of Care Choice.

18. Co-conspirator A, a resident of Wayne County, was a licensed social worker in Michigan who was enrolled as a participating provider with Medicare and who owned DBS.

19. Kamitko Moore, was the owner and operator of Healthy Hearts, which operated at 28917 West 7 Mile Rd, Livonia, Michigan 48152. Kamitko Moore was also the owner and operator of New Beginning Adult Senior Care Center, which operated at 28915 West 7 Mile Rd, Livonia, Michigan 48152.

COUNT 1

Conspiracy to Commit Health Care Fraud and Wire Fraud

(18 U.S.C. § 1349)

D-1 BIANCA SMITH

D-2 ANITA WRIGHT

20. Paragraphs 1 through 19 of the General Allegations section of this Indictment are re-alleged and incorporated by reference as though fully set forth herein.

21. From at least in or around August 2013, and continuing through December 2015, the exact dates being unknown to the Grand Jury, in Wayne and

Oakland Counties, in the Eastern District of Michigan, and elsewhere, the defendants BIANCA SMITH and ANITA WRIGHT, and Moore, Co-conspirator A, and others, did willfully and knowingly combine, conspire, confederate and agree, to commit certain offenses against the United States, that is:

- (a) violate Title 18, United States Code, Section 1347, that is, to execute a scheme and artifice to defraud a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, Medicare, 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, said health care benefit program, in connection with the delivery of and payment for health care benefits, items, and services; and
- (b) to violate Title 18, United States Code, Section 1343, that is, to knowingly and with the intent to defraud, devise and intend to devise a scheme and artifice to defraud and to obtain money and property by means of materially false and fraudulent pretenses, representations, and promises, knowing that the pretenses, representations, and promises were false and fraudulent when made, and did knowingly transmit and cause to be transmitted, by means of wire communication in interstate commerce, writings, signs, signals,

pictures, and sounds for the purpose of executing such scheme and artifice.

Purpose of the Conspiracy

22. It was a purpose of the conspiracy for defendants BIANCA SMITH and ANITA WRIGHT, and others, to unlawfully enrich themselves by, among other things: (a) submitting, and causing the submission of, false and fraudulent claims to Medicare; (b) concealing, and causing the concealment of, the submission of false and fraudulent claims to Medicare and the receipt and transfer of the proceeds from the fraud; and (c) diverting proceeds of the fraud for the personal use and benefit of the defendants and their co-conspirators.

Manner and Means

The manner and means by which the defendants and their co-conspirators sought to accomplish the purpose of the conspiracy included, among others, the following:

23. In or around August 2013, BIANCA SMITH and ANITA WRIGHT, and others, would open, and file Articles of Incorporation in Michigan for, PTS.

24. In or around September 2013, ANITA WRIGHT, on behalf of PTS, would sign CMS form 855B, certifying that she would follow all Medicare laws and regulations.

25. In or around March 2015, BIANCA SMITH and ANITA WRIGHT, and others, would open, and file Articles of Incorporation in Michigan for, Care Choice.

26. ANITA WRIGHT would control the day-to-day operations of PTS and Care Choice.

27. BIANCA SMITH, ANITA WRIGHT, Moore, Co-conspirator A, and others would submit, and cause the submission of, through the use of interstate wires, false and fraudulent claims to Medicare for psychotherapy services that were purportedly provided at PTS and Care Choice, and that were medically unnecessary and/or not provided.

28. BIANCA SMITH and ANITA WRIGHT obtained and maintained signature authority over a PNC bank account ending in x7358 for PTS to transfer, disburse, and receive monies obtained through the submission of false and fraudulent claims to Medicare.

29. BIANCA SMITH obtained and maintained signature authority over JP Morgan bank accounts ending in x2258 and x8223 for Care Choice to transfer, disburse, and receive monies obtained through the submission of false and fraudulent claims to Medicare.

30. BIANCA SMITH, ANITA WRIGHT, Moore, Co-conspirator A, and others would transfer, disburse, and receive, and cause the transfer, disbursement,

and receipt of, monies obtained through the submission of false and fraudulent claims to Medicare.

31. BIANCA SMITH and ANITA WRIGHT, and other co-conspirators would falsify, fabricate, alter, and cause the falsification, fabrication, and alteration of, PTS and Care Choice medical records to support claims for psychotherapy services that were medically unnecessary and/or not provided.

32. BIANCA SMITH and ANITA WRIGHT, through the use of interstate wires, submitted and caused the submission of false and fraudulent claims to Medicare for psychotherapy services purportedly provided at PTS and Care Choice in an amount exceeding \$3,245,625.

All in violation of Title 18, United States Code, Section 1349.

COUNTS 2-4

**Health Care Fraud
(18 U.S.C. § 1347 and 2)
D-1 BIANCA SMITH
D-2 ANITA WRIGHT**

33. Paragraphs 1 through 19 of the General Allegations section of this Indictment are re-alleged and incorporated by reference as though fully set forth herein.

34. From at least in or around August 2013, and continuing through December 2015, the exact dates being unknown to the grand jury, in Wayne and Oakland County, in the Eastern District of Michigan, and elsewhere, the defendants

BIANCA SMITH and ANITA WRIGHT, in connection with the delivery of and payment for health care benefits, items, and services, did knowingly and willfully execute, and attempt to execute, a scheme and artifice to defraud a federal health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, Medicare, 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 Medicare, in connection with the delivery of and payment for health care benefits, item and services.

Purpose of Scheme or Artifice

35. It was a purpose of the scheme or artifice for BIANCA SMITH and ANITA WRIGHT to unlawfully enrich themselves through the submission of false and fraudulent Medicare claims for psychotherapy services that were not medically necessary and/or were not provided.

The Scheme and Artifice

36. Paragraphs 20 through 32 of Count One of this Indictment are re-alleged and incorporated by reference as though fully set forth herein as a description of the scheme and artifice.

Acts in Execution of the Scheme and Artifice

37. On or about the dates set forth below, in Wayne and Oakland Counties, in the Eastern District of Michigan, BIANCA SMITH and ANITA

WRIGHT, in connection with the delivery and payment for health care benefits, items, and services, did knowingly and willfully execute, or attempt to execute, the above described scheme and artifice by submitting or causing the submission of false and fraudulent claims seeking the identified dollar amounts and representing that DBS provided services to Medicare beneficiaries, including:

Counts	Medicare Beneficiary	Service	Provider	Submission Date	Date of Service	Billed Amt
2	I.A.	CPT 90837 - Psychotherapy	Co-conspirator A	12/27/2013	12/20/2013	\$145.00
3	J.C.	CPT 90837 - Psychotherapy	Co-conspirator A	12/27/2013	12/20/2013	\$145.00
4	W.C.	CPT 90837 - Psychotherapy	Co-conspirator A	9/24/2014	5/05/2014	\$145.00

All in violation of Title 18, United States Code, Sections 1347 and 2.

CRIMINAL FORFEITURE
(18 U.S.C. §§ 981, 982; 28 U.S.C. § 2461)
D-1 BIANCA SMITH
D-2 ANITA WRIGHT

38. The above allegations contained in this Indictment are incorporated by reference as if set forth fully herein for the purpose of alleging forfeiture pursuant to the provisions of Title 18, United States Code, Sections 981 and 982, and Title 28, United States Code, Section 2461.

39. As a result of the violation of Title 18, United States Code, Section 1349, as set forth in this Indictment, BIANCA SMITH and ANITA WRIGHT shall forfeit to the United States any property, real or personal, that constitutes or is

derived, directly or indirectly, from gross proceeds traceable to the commission of such violations, pursuant to 18 U.S.C. § 982(a)(7) and 18 U.S.C. § 981(a)(1)(C), as incorporated by 28 U.S.C. § 2461.

40. Substitute Assets: If the property described above as being subject to forfeiture, as a result of any act or omission of the defendant:

- a) cannot be located upon the exercise of due diligence;
- b) has been transferred or sold to, or deposited with, a third party;
- c) has been placed beyond the jurisdiction of the Court;
- d) has been substantially diminished in value; or
- e) has been commingled with other property that cannot be subdivided without difficulty;

it is the intent of the United States, pursuant to 21 U.S.C. § 853(p) as incorporated by 18 U.S.C. § 982(b) and/or 28 U.S.C. § 2461, to seek to forfeit any other property of defendant, up to the value of the forfeitable property described above.

41. Money Judgment: The government shall also seek a forfeiture money judgment from the defendants for a sum of money representing the total amount of proceeds obtained as a result of defendant's violations of 18 U.S.C. § 1349, as alleged in this Indictment.

THIS IS A TRUE BILL.

s/Grand Jury Foreperson
Grand Jury Foreperson

s/ Allan J. Medina
ALLAN J. MEDINA
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s/Thomas J. Tynan
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Dated: June 16, 2016

ORIGINAL

United States District Court Eastern District of Michigan	Criminal Case Cover
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NOTE: It is the responsibility of the Assistant U.S. Attorney signing this form to complete it accurately in all respects.

Reassignment/Recusal Information This matter was opened in the USAO prior to August 15, 2008 []

Companion Case Information	Companion Case Number:
This may be a companion case based upon LCrR 57.10 (b)(4) ¹ :	Judge Assigned:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	AUSA's Initials:

Case Title: USA v. Bianca Smith

County where offense occurred : Oakland and Wayne County

Check One: ☒ **Felony** ☐ **Misdemeanor** ☐ **Petty**

☐ Indictment/ ☐ Information --- no prior complaint.
☒ Indictment/ ☐ Information --- based upon prior complaint [Case number: 16-MJ-30062]
☐ Indictment/ ☐ Information --- based upon LCrR 57.10 (d) [Complete Superseding section below].

Superseding Case Information

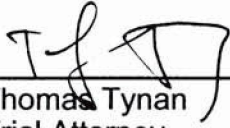
Superseding to Case No: _____ **Judge:** _____

- ☐ Original case was terminated; no additional charges or defendants.
☐ Corrects errors; no additional charges or defendants.
☐ Involves, for plea purposes, different charges or adds counts.
☐ Embraces same subject matter but adds the additional defendants or charges below:

<u>Defendant name</u>	<u>Charges</u>	<u>Prior Complaint (if applicable)</u>
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Please take notice that the below listed Assistant United States Attorney is the attorney of record for the above captioned case.

6/16/2016
 Date


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¹ Companion cases are matters in which it appears that (1) substantially similar evidence will be offered at trial, (2) the same or related parties are present, and the cases arise out of the same transaction or occurrence. Cases may be companion cases even though one of them may have already been terminated.