

SEALED

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF NEBRASKA

FILED  
U.S. DISTRICT COURT  
DISTRICT OF NEBRASKA

2017 JUN 21 PM 5:00

OFFICE OF THE CLERK

UNITED STATES OF AMERICA,

Plaintiff,

vs.

GREGORY L. GARRO, Jr.,

Defendant.

4:17CR 3065

INDICTMENT  
18 USC §1347

The Grand Jury charges that

**INTRODUCTION**

At all times material to this indictment:

1. Section 24(b) of Title 18, United States Code, defined a “health care benefit program” as “any public or private plan or contract, affecting commerce, under which any medical benefit, item or service is provided to any individual, and includes any individual or entity who is providing a medical benefit, item or service for which payment may be made under the plan or contract.” Health Care Benefit Programs (hereinafter “Programs”) include Medicare, Medicaid, and private insurers.

2. The Medicaid program is a health care benefit program designed primarily for the indigent. In Nebraska, the Nebraska Medical Assistance Program (Nebraska Medicaid or the Medicaid Program) is funded with a combination of federal and state funds, with approximately 53% of the total financial burden of the program paid through the United States Department of Health & Human Services, and the remaining 47% by the State of Nebraska.

3. GREGORY L. GARRO Jr. (GARRO) was a dentist licensed to practice dentistry in Nebraska who owned and operated a professional corporation, Gregory L. Garro, Jr., D.D.S., P.C. (hereinafter the Professional Corporation) which provided dental services. As the president,

secretary, treasurer, director and registered agent of the Professional corporation, GARRO executed Medical Assistance Provider Agreements with the Department of Health and Human Services, certifying his company to provide dental services to Nebraska's Medicaid population. GARRO provided the dental services rendered to patients of his Professional Corporation.

#### **HEALTH CARE FRAUD**

4. Paragraphs 1 through 3 of this Indictment are realleged and incorporated as if set forth fully herein.

5. From on or about February 12, 2013, and continuing until on or about January 22, 2016, in the District of Nebraska, defendant GREGORY L. GARRO Jr., did knowingly and willfully devise and intend to devise, execute and attempt to execute, a scheme and artifice to defraud a health care benefit program, and to obtain, by means of materially false and fraudulent pretenses, representations, and omissions of material fact, money and property owned by, or under the control of a health care benefit program, in connection with the delivery of and payment for health care benefits, items, and services.

6. The purpose of the scheme and artifice was for GARRO to unlawfully enrich himself by submitting and causing to be submitted, fraudulent claims to Nebraska Medicaid seeking reimbursement for dental services that GARRO did not perform.

7. In furtherance of the scheme and artifice, GARRO submitted and caused to be submitted to Nebraska Medicaid claims which he knew contained materially false and fraudulent pretenses and representations, and omissions of material fact, in that the claims sought payment for providing dental services when GARRO then well knew those services had not been provided. During the course of the scheme and artifice approximately 129 claims were submitted for services not provided resulting in reimbursement to Garro and his Professional Corporation of approximately \$82,544.19.

8. On or about the dates set forth below in the “Claim Receipt Date” column, in the District of Nebraska, GARRO knowingly executed and attempted to execute the scheme and artifice to defraud a health care benefit program in connection with the delivery of and payment for health care benefits, items and services, as set forth above, by submitting and causing to be submitted to the authorized agents and intermediaries for the Nebraska Medicaid program, claims which resulted in payment in amounts set forth below which the Defendant knew made materially false and fraudulent representations in that the claims represented dental services had been provided to the specified clients when the Defendant then well knew those services had not been provided to those clients.

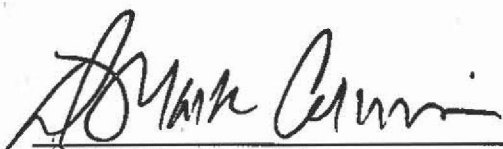
| <u>Count</u> | <u>Client Initials</u> | <u>Claim Receipt Date</u> | <u>Amount Paid</u> | <u>Service Claimed</u>   |
|--------------|------------------------|---------------------------|--------------------|--|
| 1            | C.H.                   | 1/22/16                   | \$170.71           | Oral evaluation, cleaning, x-ray when patient refused to be seen |
| 2            | B.C.                   | 9/6/13                    | \$93               | Oral evaluation, cleaning, x-ray when patient refused to be seen |
| 3            | B.C.                   | 2/20/14                   | \$907              | Full set dentures - not provided                                 |
| 4            | A.H.                   | 9/16/14                   | \$1200             | Full set dentures - not provided                                 |
| 5            | H.D.                   | 9/6/13                    | \$93               | Cleaning & x-ray when patient refused to be seen                 |
| 6            | H.D.                   | 2/4/14                    | \$907              | Full set dentures - not provided                                 |
| 7            | M.M.                   | 5/2/14                    | \$983              | Full set dentures - not provided                                 |
| 8            | L.V.B.                 | 5/2/14                    | \$983              | Full set dentures - not provided                                 |
| 9            | L.B.                   | 5/20/14                   | \$983              | Full set dentures - not provided                                 |
| 10           | H.A.                   | 2/4/14                    | \$983              | Full set dentures - not provided                                 |
| 11           | W.B.                   | 5/20/14                   | \$983              | Full set dentures - not provided                                 |
| 12           | C.S.                   | 10/8/13                   | \$907              | Full set dentures - not provided                                 |



|    |      |         |          |  |
|----|------|---------|----------|--|
| 13 | T.S. | 2/4/14  | \$983    | Full set dentures - not provided                             |
| 14 | T.S. | 2/25/15 | \$352    | Dentures relines/adjustments when patient refused to be seen |
| 15 | T.S. | 9/11/15 | \$373.44 | Dentures relines/adjustments when patient refused to be seen |
| 16 | D.L. | 7/7/15  | \$538    | Upper dentures - not provided                                |
| 17 | D.L. | 7/7/15  | \$647.78 | Lower dentures - not provided                                |
| 18 | K.T. | 6/18/14 | \$983    | Full set dentures - not provided                             |
| 19 | M.P. | 9/8/14  | \$851    | Full set dentures - not provided                             |
| 20 | J.T. | 6/17/13 | \$465    | Tooth extractions - not performed                            |
| 21 | R.P. | 1/9/15  | \$511.24 | Full set dentures - not provided                             |
| 22 | C.A. | 6/4/15  | \$979.12 | Full set dentures - not provided                             |
| 23 | C.A. | 8/18/15 | \$249.44 | Denture adjustment/reline within 6 months                    |
| 24 | R.S. | 8/26/13 | \$1000   | Full set dentures - not provided                             |

In violation of Title 18, United States Code, Section 1347.

A TRUE BILL.



D. MARK COLLINS  
Special Assistant United States Attorney  
District of Nebraska

FOREPERSON

The United States of America requests that trial of this case be held in Lincoln, Nebraska, pursuant to the rules of this Court.



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D. MARK COLLINS  
Special Assistant U.S. Attorney