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Feb 21, 2012
STEVEN M. LARIMORE
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UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA
12-20113-CR-COOKE/TURNOFF

Case No. _____
18 U.S.C. § 371
18 U.S.C. § 982

UNITED STATES OF AMERICA

vs.

GRICEL FONT
and
ISAURA BOU-MELENDEZ,

Defendants.

_____ /

INFORMATION

The United States Attorney charges that:

GENERAL ALLEGATIONS

At all times relevant to this Information:

The Medicare Program

1. The Medicare Program ("Medicare") was a federally funded program that provided free or below-cost health care benefits to certain individuals, primarily the elderly, blind, and disabled. The benefits available under Medicare were governed by federal statutes and regulations. The United States Department of Health and Human Services ("HHS"), through its agency, the Centers for Medicare and Medicaid Services ("CMS"), oversaw and administered Medicare. Individuals who received benefits under Medicare were commonly referred to as Medicare "beneficiaries."

2. Medicare was a "health care benefit program," as defined by Title 18, United States Code, Section 24(b).

3. Part A of the Medicare Program was a medical insurance program that covered, among other things, certain physician and outpatient services that were medically necessary and ordered by licensed medical doctors or other qualified health care providers. Part A of the Medicare Program also covered certain outpatient services, including physical therapy, rehabilitation and occupational therapy ("PT/OT") services, which were typically administered at Comprehensive Outpatient Rehabilitation Facilities ("CORFs") or by Outpatient Physical Therapy Providers ("OPTs"). Medicare Part A covered such services so long as they were ordered by a medical doctor or other qualified health care provider, and deemed medically necessary.

Medicare Billing and Payment Procedures

4. A CORF or OPT that sought to participate in Medicare Part A and bill Medicare for the cost of PT/OT services was required to apply for and receive a "supplier number" for Part A of the Medicare Program.

5. For Florida Medicare beneficiaries, Medicare Part A PT/OT benefits were administered by First Coast Service Options ("First Coast"), pursuant to a contract with HHS to receive, process and pay claims. First Coast received, adjudicated and paid the claims of authorized PT/OT providers that were seeking reimbursement for the cost of PT/OT services supplied or provided to Medicare beneficiaries.

6. To receive payment from Medicare, a CORF or OPT, using its Part A supplier number, would submit a health insurance claim form known as a CMS-1450. Medicare permitted CORF and OPT companies to submit CMS-1450's electronically or by way of a paper claim form. Each claim form required certain information, including: (a) the Medicare beneficiary's name and identification number; (b) the identification number of the doctor or other

qualified health care provider who ordered or furnished the health care benefit, item, or service that was the subject of the claim; (c) the health care benefit, item, or service that was provided or supplied to the beneficiary; (d) the billing codes for the benefit, item, or service; and (e) the date upon which the benefit, item, or service was provided or supplied to the beneficiary.

7. Medicare, through First Coast, would generally pay a substantial portion of the cost of the related health care benefits, items, and services that were medically necessary and ordered by licensed doctors or other qualified health care providers.

8. Payments under Medicare Part A were often made directly to the CORF or OPT company rather than to the patient/beneficiary. For this to occur, the beneficiary would assign the right of payment to the CORF or OPT company or other health care providers. Once such an assignment took place, the CORF or OPT company would assume the responsibility for submitting claims to, and receiving payments from, Medicare.

Font & Bou Associates Rehab, Inc.

9. Font & Bou Associates Rehab, Inc. (hereinafter "Font & Bou") was a Florida corporation incorporated on December 7, 2004, that was located in Miami-Dade County, purportedly providing PT/OT services to Medicare beneficiaries.

10. Font & Bou's principal place of business was located at 14100 Palmetto Frontage Road, #380, Miami Lakes, Florida.

The Defendants

11. Defendant **GRICEL FONT** was a resident of Broward County, in the Southern District of Florida. **FONT** was president and registered agent of Font & Bou

12. Defendant **ISAURA BOU-MELENDZ** was a resident of Broward County, in the Southern District of Florida. **BOU-MELENDZ** was vice-president of Font & Bou.

CONSPIRACY TO COMMIT HEALTH CARE FRAUD
(18 U.S.C. § 371)

13. Beginning on or about January 2, 2006, and continuing through on or about February 25, 2010, in Miami-Dade County, in the Southern District of Florida, and elsewhere, the defendants,

GRICEL FONT
and
ISAURA BOU MELENDEZ,

did willfully, that is, with the intent to further the object of the conspiracy, and knowingly combine, conspire, confederate and agree with each other and others known and unknown to the United States Attorney, to violate Title 18, United States Code, Section 1347, that is, to execute a scheme and artifice to defraud Medicare, a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), 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, items, and services.

PURPOSE OF THE CONSPIRACY

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

MANNER AND MEANS OF THE CONSPIRACY

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

15. **GRICEL FONT** and **ISAURA BOU-MELENDZ** owned and controlled Font & Bou.

16. Beginning on or about January 2, 2006, and continuing through on or about February 25, 2010, **GRICEL FONT**, **ISAURA BOU-MELENDZ**, and their co-conspirators submitted and caused Font & Bou to submit approximately \$6,908,986 in Medicare claims for PT/OT-related reimbursement, which claims falsely and fraudulently represented that PT/OT items and services were prescribed by a doctor and provided to Medicare beneficiaries.

17. As a result of such false and fraudulent claims, Medicare deposited approximately \$4,944,057 into Font & Bou's corporate accounts.

18. **GRICEL FONT**, **ISAURA BOU-MELENDZ** and their co-conspirators used the proceeds of the health care fraud for their personal benefit and to further the fraud.

OVERT ACTS

In furtherance of the conspiracy, and to accomplish its purpose and object, at least one of the co-conspirators committed, or cause to be committed, in the Southern District of Florida, and elsewhere, at least one of the following overt acts, among others:

1. On or about September 25, 2009, **GRICEL FONT** and **ISAURA BOU-MELENDZ**, through Font & Bou, submitted a claim on behalf of Medicare beneficiary I.C. for PT/OT services, when in fact no PT/OT services were provided to I.C. by Font & Bou.

2. On or about October 9, 2009, **GRICEL FONT** and **ISAURA BOU-MELENDZ**, through Font & Bou, submitted a claim on behalf of Medicare beneficiary B.V. for PT/OT services, when in fact no PT/OT services were provided to B.V. by Font & Bou.

3. On or about October 16, 2009, **GRICEL FONT** and **ISAURA BOU-MELENDZ**, through Font & Bou, submitted a claim on behalf of Medicare beneficiary T.R. for PT/OT services, when in fact no PT/OT services were provided to T.R. by Font & Bou.

All in violation of Title 18, United States Code, Section 371.

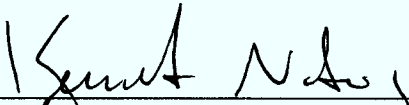
FORFEITURE
(18 U.S.C. § 982)

1. The allegations contained in this Information are realleged and incorporated by reference as though fully set forth herein for the purpose of alleging forfeiture to the United States of America of certain property in which the defendants, **GRICEL FONT** and **ISAURA BOU-MELENDZ**, have an interest.

2. Upon conviction of the violation as alleged in this Information, the defendants shall forfeit all of their right, title and interest to the United States of any property, real or personal, that constitutes or is derived, directly or indirectly, from gross proceeds traceable to the commission of such violation, pursuant to Title 18, United States Code, Section 982(a)(7).

3. The property subject to forfeiture includes, but is not limited to, the sum of \$4,944,057 in United States currency, which sum is equal to the gross proceeds traceable to the commission of the violation alleged in this Information, which the United States will seek as a forfeiture money judgment as part of the defendant's sentence.

All pursuant to Title 18, United States Code, Section 982(a)(7); and the procedures set forth at Title 21, United States Code, Section 853, as made applicable through Title 18, United States Code, Section 982(b)(1).



WIFREDO A. FERRER
UNITED STATES ATTORNEY



JON M. JUENGER
ASSISTANT UNITED STATES ATTORNEY