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IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF ILLINOIS

UNITED	STATES	OF AMERICA	
		Plaintiff,	
1 A	vs.		
BRYAN I	K. MILL	ER,	

Criminal No.

Title 18, United States Code, Section 1347

Defendant.

INDICTMENT

JUN 2 1 2017

FILED

CLERK, U.S. DISTRICT COURT SOUTHERN DISTRICT OF ILLINOIS EAST ST. LOUIS OFFICE

THE GRAND JURY CHARGES:

1. **BRYAN K. MILLER** defrauded the State of Illinois Medicaid Home Services Program by falsely claiming and taking payments for personal assistant services not actually performed. The State of Illinois pays a personal assistant hourly wages for performance of services for a qualified beneficiary. The qualified beneficiary and the personal assistant must sign an Individual Provider Payment Policies form. The qualified beneficiary must have a Service Plan listing all services to be provided. In order for the personal assistant to receive payment from the State of Illinois, the beneficiary must submit a Home Services Program Time Sheet form listing the hours worked by the personal assistant and signed by both the beneficiary and personal assistant.

2. The Home Services Program is a Medicaid Waiver Program designed to provide a disabled individual who, with assistance in performing daily living activities in the home, would not require similar care in a nursing home. The Illinois Department of Human Services, Division of Rehabilitation Services (DORS) administers the program.

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Medicaid Waiver programs enable states to use both state and federal Medicaid funds to pay for services related to medical care that would not ordinarily, be covered under Medicaid.

3. On March 22, 2016, MILLER signed an Individual Provider Standards form along with a qualified Medicaid beneficiary identified hereafter as P.G. On page 3 of this form titled Individual Provider Secondary Employment, MILLER failed to report any secondary employment. MILLER and P.G. signed this page on March 22, 2016 and MILLER initialed under the following printed information:

I have no other employment at this time

On March 22, 2016, MILLER and P.G. signed an Individual Provider
Payment Policies form. Among other things, the Individual Provider Payment Policies form
states the following:

- Individual Providers can only be paid for the hours they worked for the customer per the HSP Service Plan. Billing for hours not worked constitutes Medicaid fraud.
- Individual Providers can only be paid for hours and tasks performed in the customer's home unless the task must be completed outside the home such as laundry due to no facilities in the home, banking, and grocery shopping.
- Individual Providers cannot work if the customer is out of the home, i.e. in a nursing facility, hospitalized, on vacation, etc. However, there are some exceptions that are allowable, such as the counselor gives prior approval and the request meets the policy guidelines. Please contact the counselor to address any questions before risking non-payment of services provided.
- Individual Providers cannot charge HSP for the same hours worked when working another job. This includes working for other HSP customers or as a childcare provider

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paid through the Department of Human Services. This constitutes fraud and will be prosecuted as such.

5. From on or about March 16, 2016 through on or about July 15, 2016, in furtherance of a scheme to defraud the Medicaid Home Services Program for the State of Illinois, MILLER submitted Home Services Program Time Sheets on which he falsely claimed hours of personal assistant services on March 28, 29, 30, 31, 2016, April 2, 3, 4, 6, 7, 8, 11, 12, 13, 14, 16, 17, 21, 22, 23, 24, 25, 26, 27, 28, 30, 2016, May 2, 3, 5, 6, 7, 8, 10, 11, 12, 14, 16, 17, 18, 19, 23, 24, 26, 28, 29, 2016, June 1, 7, 11, 12, 13, 15, 16, 17, 20, 25, 26, 30, 2016, July 2, 3, 4, 5, 6, 9, 13, 14, 15, 2016, that were not performed on the dates and times reported on the Home Services Program Time Sheets because MILLER was working at secondary employment during the same dates and times claimed.

MILLER signed each time sheet under the following printed information:

I certify that the above information is true and in accordance with the Individual Provider Payment Policies (IL488-2252). I understand falsification of any information submitted on this form could lead to criminal prosecution.

COUNT 1

Healthcare Fraud

6. Paragraphs 1 through 5 are re-alleged and incorporated in Count I.

On various dates from March 16, 2016 through on or about July 15,
2016, in Madison County, within the Southern District of Illinois,

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BRYAN K. MILLER,

defendant, did knowingly and willfully execute a scheme to defraud a health care benefit program, affecting interstate commerce as defined in Title 18, United States Code, Section 24(b), namely Medicaid, in connection with the delivery of and payment for health care benefits and services by submitting time sheets and receiving payment for personal assistant services not performed, in violation of Title 18, United States Code, Section 1347.

A TRUE BILL

MICHAEL J. OUINLEY Assistant United States Attorney

DONALD S. BOYCE United States Attorney

Recommended Bond: \$10,000 unsecured.