

INDICTMENT

§ 853(p))

(T. 18, U.S.C., §§ 982(a)(7), 982(b)(1), 1347, 2 and 3551 et seq.; T. 21, U.S.C.,

WK/ABS:AE F. #2018R00272

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF NEW YORK

UNITED STATES OF AMERICA

- against -

ALEAH MOHAMMED, also known as "Aleah Haniff,"

Defendant.

POLLAK, M.J.

ALIANO , J.

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THE GRAND JURY CHARGES:

INTRODUCTION

At all times relevant to this Indictment, unless otherwise indicated:

I. Background

- A. <u>The Medicare and Medicaid Programs</u>
 - 1. The Medicare program ("Medicare") was a federal health care program

providing benefits to persons who were at least 65 years old 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 divided into multiple parts. Medicare Part D provided prescription drug coverage to persons who were eligible for Medicare.

3. Medicare beneficiaries obtained Part D benefits in two ways: (a) by joining a Prescription Drug Plan, which covered only prescription drugs, or (b) by joining a

Medicare Advantage Plan, which covered both prescription drugs and medical services (collectively, "Part D Plans"). These Part D Plans were operated by private companies approved by Medicare and were often referred to as drug plan "sponsors."

4. Medicare and Medicare drug plan sponsors were each a "health care benefit program," as defined by Title 18, United States Code, Section 24(b).

5. CMS assigned pharmacies a national provider identification number ("NPI"). A pharmacy dispensing medications to a beneficiary used its assigned NPI when submitting a claim for reimbursement under Medicare Part D. A pharmacy was permitted to submit claims for reimbursement under Part D only for medications actually dispensed and was required to maintain records verifying that it dispensed the medications.

6. A pharmacy could participate in the Medicare Part D program by entering into a retail network agreement: (a) directly with a Part D Plan; (b) with one or more Pharmacy Benefit Managers ("PBMs"); or (c) with a Pharmacy Services Administration Organization ("PSAO"). A PBM acted on behalf of one or more Part D Plans. Through a Part D Plan's PBM, a pharmacy could join a Part D Plan network. A PSAO contracted with PBMs on behalf of the pharmacy.

7. Typically, a Medicare beneficiary enrolled in a Part D Plan obtained prescription medications from a pharmacy authorized by the beneficiary's Part D Plan. After filling a beneficiary's prescription, the authorized pharmacy submitted the claim either directly to a Part D Plan or to a PBM that represented the Part D Plan. The pharmacy provided the beneficiary's identification number as well as the pharmacy's NPI with the claim. The Part D Plan or the PBM determined whether the pharmacy was entitled to payment for each claim.

Then, the Part D Plan or PBM, either directly or indirectly, reimbursed the pharmacy for the claim.

8. The Medicaid Program ("Medicaid") in New York State was a federally and state funded health care program providing benefits to individuals and families who met specified financial and other eligibility requirements, and certain other individuals who lacked adequate resources to pay for medical care. CMS was responsible for overseeing the Medicaid program in participating states, including New York. Individuals who received benefits under Medicaid, like those who received benefits under Medicare, were referred to as "beneficiaries."

9. In New York State, Medicaid provided prescription drug coverage to its beneficiaries. Medicaid beneficiaries could obtain their prescription drug benefits from pharmacies either through "fee-for-service" plans or through Medicaid Managed Care plans, which were administered by private insurance companies that were paid by Medicaid.

10. Medicaid and Medicaid Managed Care plans were each a "health care benefit program," as defined by Title 18, United States Code, Section 24(b).

B. <u>The Defendant and Relevant Entities</u>

11. The defendant ALEAH MOHAMMED, also known as "Aleah Haniff," together with others, owned and operated the following four companies, which were incorporated under New York State law (the "Scheme Pharmacies"):

(a) Superdrugs, Inc. ("Superdrugs"), which also operated under the name "Superdrugs Rx," was a New York corporation located at 127-04 Liberty Avenue, South Richmond Hill, New York, among other locations. Superdrugs was dissolved on or about November 10, 2017.

(b) Superdrugs I Inc. ("Superdrugs I") was a New York corporation located at 127-04 Liberty Avenue, South Richmond Hill, New York, among other locations.

(c) S&A Superdrugs II, Inc. ("S&A"), which also operated under the name "Superdrugs II Rx," was a New York corporation located at 138-10 Farmers Boulevard, Jamaica, New York, among other locations.

(d) Superdrugs II, Inc. ("Superdrugs II") was a New York corporation located at 138-10 Farmers Boulevard, Jamaica, New York, among other locations.

12. The defendant ALEAH MOHAMMED, also known as "Aleah Haniff," together with others, opened and controlled bank accounts in the names of the Scheme Pharmacies.

13. Superdrugs and S&A were registered with the New York State Office of the Professions as pharmacy establishments. Superdrugs was so registered for the period of approximately February 2015 through January 2018. S&A was so registered for the period of approximately September 2016 through August 2019.

II. <u>The Fraudulent Scheme</u>

14. From approximately May 2015 through June 2018, the defendant ALEAH MOHAMMED, also known as "Aleah Haniff," together with others, engaged in a fraudulent scheme in which she sought unlawfully to enrich herself by submitting and causing the submission of fraudulent claims for reimbursement to one or more Medicare Part D Plans and Medicaid for prescription drugs purportedly dispensed by the Scheme Pharmacies to beneficiaries that were not, in fact, (a) dispensed by the Scheme Pharmacies to such beneficiaries, (b) prescribed by the prescribing individuals specified therein, and (c) medically

necessary. These prescriptions included, but were not limited to, medications for the treatment of the human immunodeficiency virus.

15. Upon receiving reimbursement from Medicare Part D Plans and Medicaid, directly and indirectly, for fraudulent claims for prescription medications that had never been dispensed by the Scheme Pharmacies, the defendant ALEAH MOHAMMED, also known as "Aleah Haniff," together with others, deposited these funds into the Scheme Pharmacies' bank accounts. MOHAMMED, together with others, subsequently used funds from the Scheme Pharmacies' bank accounts to pay for personal expenses and to purchase luxury items, such as a Porsche and jewelry, and also transferred funds from those accounts to herself, her family and associates.

16. From approximately May 2015 through January 2018, the Scheme Pharmacies received approximately \$7.9 million in reimbursement for claims submitted to Medicare Part D Plans and Medicaid.

HEALTH CARE FRAUD

17. The allegations contained in paragraphs one through 16 are realleged and incorporated as if fully set forth in this paragraph.

18. In or about and between May 2015 and June 2018, both dates being approximate and inclusive, within the Eastern District of New York and elsewhere, the defendant ALEAH MOHAMMED, also known as "Aleah Haniff," together with others, did knowingly and willfully execute and attempt to execute a scheme and artifice to defraud one or more Medicare Part D Plans and Medicaid, all health care benefit programs, 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 Medicare Part D Plans and Medicaid, in connection with the delivery of and payment for health care benefits, items and services.

(Title 18, United States Code, Sections 1347, 2 and 3551 et seq.)

CRIMINAL FORFEITURE ALLEGATION

19. The United States hereby gives notice to the defendant that, upon her conviction of the offense charged herein, the government will seek forfeiture in accordance with Title 18, United States Code, Section 982(a)(7), which requires any person convicted of a federal health care offense to forfeit property, real or personal, that constitutes, or is derived directly or indirectly from, gross proceeds traceable to the commission of such offense.

20. If any of the above-described forfeitable property, 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 which cannot be divided

without difficulty;

it is the intent of the United States, pursuant to Title 21, United States Code, Section 853(p), as incorporated by Title 18, United States Code, Section 982(b)(1), to seek forfeiture of any other

property of the defendant up to the value of the forfeitable property described in this forfeiture allegation.

(Title 18, United States Code, Sections 982(a)(7) and 982(b)(1); Title 21, United

States Code, Section 853(p))

A TRUE BILL

FORE

ASE

SANDRA L. MOSER ACTING CHIEF, FRAUD SECTION CRIMINAL DIVISION U.S. DEPARTMENT OF JUSTICE

F. # 2018R00272

FORM DBD-34 JUN. 85

No.

UNITED STATES DISTRICT COURT

EASTERN District of NEW YORK

CRIMINAL DIVISION

THE UNITED STATES OF AMERICA

vs.

ALEAH MOHAMMED, also known as "Aleah Haniff,"

Defendant.

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INDICTMENT

A true bill.	Λ,	§ 853(p))	
	Genne	Styre_	Foreperson
Filed in open court this	V 	day,	
of	_ A.D. 20		
			Clerk

Andrew Estes, Trial Attorney (718) 254-6250