

UNITED STATES DISTRICT COURT

for the

Middle District of Florida

United States of America )

v. )

ROY M. ANTIGUA )

Case No. )

8:14 MJ 1366 AEP )

Defendant(s)

CRIMINAL COMPLAINT

I, the complainant in this case, state that the following is true to the best of my knowledge and belief.

On or about the date(s) of August 2011 and July 2012 in the county of Hillsborough in the Middle District of Florida, the defendant(s) violated:

Code Section

18 U.S.C. 1035 and 2

Offense Description

False statements relating to health care matters.

This criminal complaint is based on these facts:

See Attached Affidavit.

Continued on the attached sheet.

Complainant's signature

Raquel Garrido, Special Agent, HHS-OIG-CI

Printed name and title

Sworn to before me and signed in my presence.

Date: 05/09/2014

I certify the foregoing to be a true and correct copy of the original. SHERYL L. LOESCH, Clerk United States District Court Middle District of Florida

Judge's signature

City and state: Tampa, FL

ANTHONY E. PORCELLI, U.S. MAGISTRATE

By: Deputy Clerk

Printed name and title

## AFFIDAVIT

I, Raquel Garrido, being duly sworn, do hereby depose and state:

1. I am a Special Agent with the United States Department of Health and Human Services ("HHS"), Office of Inspector General ("OIG"), Office of Investigations and have been so employed in this capacity for the past 3 years. I am currently assigned to the Tampa Field Office and generally investigate "white collar crime" and fraud cases. I have 13 years of experience in healthcare to include Medicare Parts A, B, C, and D, medical coding, medical billing and claims auditing as well as health care fraud investigations – criminal, civil and administrative. Further, I am an investigative or law enforcement officer of the United States within the meaning of Section 2510(7) of Title 18 of the United States Code, in that I am empowered by law to conduct investigations and to make arrests. As part of my duties, I am specifically authorized to conduct investigations, audits and inspections in connection with the administration and enforcement of laws, regulations, contracts and programs in which the United States Department of Health and Human Services is, or may be, a party of interest, and perform other duties on behalf of the Secretary of the Department of Health and Human Services.

### A. PURPOSE

2. This affidavit is made in support of a criminal complaint charging Roy M. ANTIGUA, with false statements relating to health care matters in violation of Title 18, United States Code, Sections 1035 and 2.

3. Your affiant submits that this affidavit sets forth sufficient facts to establish probable cause to believe that Roy M. ANTIGUA has violated 18 U.S.C. §§ 1035 and 2 and, thus, supports the issuance of a warrant for the arrest of Roy M. ANTIGUA (hereinafter "ANTIGUA").

4. This affidavit does not include each and every fact concerning this investigation known to your affiant. Rather, it includes those facts your affiant submits are sufficient to establish probable cause to believe that ANTIGUA violated 18 U.S.C. § 1035. Said facts are based on your affiant's personal participation in this investigation, as well as information conveyed to your affiant by other law enforcement and federal government officials, interviews of other witnesses, and review of public and private records.

#### **B. THE INVESTIGATION**

5. ANTIGUA was a Florida-licensed Respiratory Therapist.

6. ANTIGUA used, presented, or otherwise uttered a forged Diploma representing that he had obtained a Master's Degree in Social Work from Boston University on or about February 27, 2004.

7. Beginning in, on or about August 2011, and continuing at least through July 2012, ANTIGUA was employed as a Medical Social Worker (MSW) by Interim Healthcare, located in New Port Ritchey, Florida. Interim HealthCare (IHC) is a health care provider and as such provides home care, hospice, and medical staffing services. Many of the patients for whom ANTIGUA was supposed to render services and care on behalf of IHC resided in Pasco County and other adjacent counties within the Middle District of Florida. IHC maintained employee records and records regarding the dates

and times ANTIGUA treated patients. IHC also maintained additional records including but not limited to insurance billing and payroll.

8. On or around May 23, 2013 Federal agents interviewed DC, who was the Human Resource Manager at IHC. DC reported that, during the hiring process, ANTIGUA provided documents, to include a Masters of Social Work (MSW) degree from Boston University, which made him a qualified candidate for a vacant medical social work position.

9. Beginning in, on or about November 2011, and continuing at least through April 2012, ANTIGUA was employed as an MSW by MediHome Health Care (MHHC), located in New Port Richey, Florida. MHHC is a health care provider and as such provides home care, hospice, home medical equipment, nutrition and sleep therapy services among others. Many of the patients for whom ANTIGUA was supposed to render services and care on behalf of MHHC resided in Pasco County and other adjacent counties within the Middle District of Florida. MHHC maintained employee records and records regarding the dates and times ANTIGUA treated patients. MHHC also maintained additional records including but not limited to insurance billing and payroll.

10. Patients of IHC and MHHC often relied upon Medicare to help pay the costs associated with the home health care they received. Medicare was a federally funded program that helped pay for health care for the aged, blind, and disabled. Medicare is a "health care benefit program" as defined by Title 18, United States Code §24(b).

11. Medicare is administered by the United States Department of Health and Human Services (HHS) through its agency, the Centers for Medicare and Medicaid Services (CMS). Individuals who received benefits under Medicare were collectively known as "beneficiaries."

12. Medicare had different types of benefits, separated into "parts." Part A of Medicare covered certain eligible home health care costs for medical services provided by a "home health agency," also known as a provider. The costs were covered if, among other things, (1) the person qualified for Medicare, (2) the person required home health services because of an illness or disability that caused them to be homebound, and (3) the services billed for were actually rendered.

13. IHC and MHHC are home health agencies. They both submitted claims to Medicare for services it claimed to have rendered to Medicare beneficiaries. The claims were required to state, among other things, the beneficiaries' name, Medicare information, the services that had been performed for the beneficiaries, the date the services were actually provided, the charge for the services, and the name and identification number of the physician or other health care provider who had ordered the services. The services should have actually been performed for a claim to be submitted.

14. As a result of ANTIGUA's misrepresentation, IHC and MHHC billed Medicare utilizing CPT code G0155 and/or revenue code 0560. Both codes are used to bill Medicare for Medical Social Services. IHC and MHHC submitted claims to Medicare

in accordance to CMS' Local Coverage Determination (LCD) guideline L31531; which states that Medical Social Services are a covered benefit under only Medicare when provided by a qualified MSW.

15. The information underlying the claims came, at least in part, from the visit notes, that were to disclose among other things, the date of the visit, information regarding the patient's condition, and the services rendered by the provider. The notes were to be filled out by the health care provider rendering the services and care. When IHC assigned patient referrals to Antigua they provided him with an intake form which, among other things, included the patients' insurance provider information. In the case of Medicare patients, the intake forms included the Medicare ID number and the letters MC or MCR. Upon completion of the visit, Antigua returned the notes and other related documents to the IHC office. The information obtained from the returned forms was used to document the patient file, for payroll purposes and to generate reports which were utilized to bill insurance plans such as Medicare.

16. ANTIGUA was required to report the visits to patients using notes. By submitting these notes to his employers, ANTIGUA caused claims to be submitted for payment for services and care purportedly rendered to Medicare beneficiaries.

**C. CONCLUSION**

17. I respectfully request that the Court issue a warrant for the arrest of Roy M. ANTIGUA for knowingly and willfully executing, and attempting to execute, a scheme or artifice to defraud a health care benefit program affecting commerce, that is, Medicare, and to obtain by means of false or fraudulent pretenses, representations, or promises, any of the money or property owned by, or under the custody or control of, any health care benefit program affecting commerce, that is, Medicare, in connection with the delivery of, or payment for, health care benefits, items, or services, in violation of Title 18, United States Code, Sections 1347 (Health Care Fraud).

This concludes my affidavit.



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Raquel Garrido, Special Agent  
U.S. Department of Health and Human Services  
Office of Inspector General  
Office of Investigations

Subscribed and sworn to before me  
this 9<sup>th</sup> day of May, 2014

  
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ANTHONEY E. PORCELLI  
United States Magistrate