

**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF LOUISIANA**

UNITED STATES OF AMERICA * **CRIMINAL NO: 13-014**¹⁰¹
VERSUS * **SECTION: "R" (3)**
NICOLE OLIVER *
* * *

FACTUAL BASIS

The defendant, **NICOLE OLIVER** (defendant or **OLIVER**) has agreed to plead guilty to Count One of the Superseding Indictment now pending against her. The Superseding Indictment charging her with violating Title 18, United States Code, Sections 1349 (Conspiracy to Commit Health Care Fraud) and 371 (Conspiracy to Pay Health Care Kickbacks). Both the Government and the defendant, **NICOLE OLIVER**, do hereby stipulate and agree that the following facts set forth a sufficient factual basis for the crimes to which the defendant is pleading guilty. The Government and **OLIVER** further stipulate that the Government would have proven, through the introduction of competent testimony and admissible evidence, the following facts beyond a reasonable doubt, to support the allegations in the Superseding Indictment now pending against the defendant:

Background

Agents with the Federal Bureau of Investigation (FBI), the United States Department of Health and Human Services, Office of Inspector General (HHS-OIG), and/or the Louisiana Department of Justice Medicare Fraud Control Unit (LAMFCU) would testify, and records from the Louisiana Secretary of State would be admitted to establish, that **OLIVER** was a resident of Louisiana and resided at 120 Vickie Street, Napoleonville, Louisiana 70128.

Documents in the custody of the FBI, HHS-OIG and LAMFCU would be admitted to show that Interlink Health Care Services, Inc. (Interlink) was a Louisiana company owned and operated by Mark Morad (Morad). These documents would show that Morad obtained a Medicare provider number for Interlink so to allow Interlink to submit claims to Medicare and receive payments on those claims

electronically. Bank records from Capitol One Bank (Capitol One) will be admitted to show that Morad established at Capitol One a bank account for Interlink numbered xxxxxx2401 (Interlink Account), of which he had signature authority. Bank records from Interlink would be admitted to show that Medicare made payments into Interlink's bank account as a result of claims Interlink submitted to Medicare.

Records from the Louisiana Secretary of State would be admitted to establish that Goldwell Investments, Inc. (Goldwell) was a Louisiana Company and that Morad was its owner and Chief Executive Officer. Bank records from Capitol One Bank (Capitol One) would be admitted to show that Morad established at Capitol One a bank account for Goldwell numbered xxxxxx1382 (Goldwell Account), of which he had signature authority.

Records from the Louisiana Secretary of State would be admitted to show that Medical Specialists of New Orleans (MSNO) was a Louisiana company owned and operated by Paige Okpalobi (Okpalobi). Bank records from J.P. Morgan Chase & Co. (JP Morgan) will be admitted to show that Okpalobi established at JP Morgan a bank account for MSNO numbered xxxxxx7381 (MSNO Account), of which she had signature authority.

Home Health Care Services

A witness with specialized knowledge of, and experience in, home health care in the Medicare system would testify regarding (1) Medicare's standards for reimbursement of home health care services, (2) the circumstances and conditions under which a Medicare beneficiary would be certified as homebound, and (3) the manner in which home health services would be rendered to a Medicare beneficiary.

Medicare billing data and documents of Interlink would be admitted to show that Interlink submitted to Medicare claims that it rendered home health care services to clients located in the Eastern District of Louisiana and elsewhere. These documents and data would further establish that the clients enrolled to receive home health services at Interlink were beneficiaries of various health care benefit programs, as defined in Title 18, United States Code, Section 24, including Medicare.

Testimony from Medicare beneficiaries and Special Agents of the FBI, HHS-OIG, and LAMFCU, documents in the custody of the FBI, HHS-OIG and LAMFCU, and Medicare billing records of Interlink and MSNO would be admitted to show that MSNO employed physicians who purportedly certified patients for home health care at Interlink.

Conspiracy to Defraud Medicare

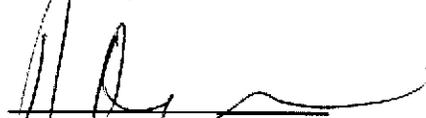
Testimony from Special Agents of the FBI, HHS-OIG and LAMFCU, Medicare beneficiaries, and documents in the possession of the FBI, HHS-OIG, would be admitted to establish that from in or around January 2005 through in or around May 2010, **OLIVER** agreed and conspired with others to recruit Medicare beneficiaries for the purpose of referring them to Interlink for home health services. This evidence would also show that, in furtherance of this conspiracy, **OLIVER** obtained and sold the Medicare numbers of hundreds of Medicare beneficiaries (Oliver Beneficiaries) to co-conspirators at Interlink knowing that these numbers would be used by Interlink to bill Medicare for purported home health services.

Testimony from witnesses and documents in the possession of the FBI, HHS-OIG and LAMFCU would be admitted to establish that from in or around January 2005 through in or around May 2010, **OLIVER** conspired with others to submit claims to Medicare for home health services that were not medically necessary and/or were not provided. Specifically, testimony from employees of Interlink and Oliver Beneficiaries would be admitted to show that **OLIVER** sold the Medicare information of Oliver Beneficiaries to Interlink knowing that (1) Oliver Beneficiaries were not homebound and did not qualify for home health services in the Medicare system; (2) Oliver Beneficiaries did not want and/or did not receive home health services; and (3) Interlink would use the Medicare numbers of Oliver Beneficiaries to submit claims to Medicare for home health services. This evidence would further demonstrate that **OLIVER** accompanied and assisted physicians from MSNO when these physicians visited Oliver Beneficiaries for the purpose of making home health certifications, knowing that these Oliver Beneficiaries were not homebound and did not qualify for home health services in the Medicare system.

Medicare billing data from Interlink would be admitted to show that Interlink used the Medicare numbers sold to it by OLIVER to submit claims to Medicare resulting in the payment of approximately \$1,166,667.00 for home health services purportedly rendered by Interlink to Oliver Beneficiaries. Documents in the possession of the FBI, HHS-OIG and LAMFCU, including bank records from Interlink, would be admitted to establish that Medicare made these payments into the bank accounts of Interlink.

Bank records from Interlink, Goldwell, and MSNO, witness testimony, and documents in the possession of the FBI, HHS-OIG and LAMFCU, would be admitted to show that OLIVER was paid from the Interlink Account, the Goldwell Account, and the MSNO Account, in the range of approximately \$300 to \$500, for each Medicare beneficiary number that was used by Interlink to bill Medicare.

The facts described above emerge from an investigation conducted by the FBI, HHS-OIG, and LAMFCU, and would be proven at trial by credible testimony from Special Agents from the FBI, HHS-OIG, and/or LAMFCU, Medicare beneficiaries and their physicians, employees of Interlink, MSNO, and Goldwell, Medicare billing records from Interlink and MSNO, business records from Interlink, MSNO and Goldwell, and documents and tangible exhibits in the custody of the FBI, HHS-OIG, and LAMFCU.



NICOLE OLIVER
Defendant

9-24-2014
DATE



ANTHONY MARSHALL
Counsel for Defendant

9-24-2014
DATE



WILLIAM G. KANELIS
Trial Attorney
Fraud Section, Criminal Division
United States Department of Justice

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