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APR 9 / 2013

IN THE DISTRICT COURT OF OKLAHOMA COUNTY STATE OF OKLAHOMA

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INFORMATION

CF - 2013 - 2437

In the name and by the authority for the State of Oklahoma, comes now E. SCOTT PRUITT, the duly elected, qualified, and acting Attorney General in and the State of Oklahoma, and on his official oath informs the District Court that:

COUNT 1:

MEDICAID FRAUD [56 O.S. §1005(A)(1)]

On or about the 1st day of January, 2011, A.D. through the 31st day of December, 2011 A.D. the crime of MEDICAID FRAUD was feloniously committed in Oklahoma County, Oklahoma, by **DEANNA LOUISE WILLIAMS** who, having the authority or responsibility to make claims for goods or services under the Oklahoma Medicaid Program, knowingly and willfully billed in duplicate or caused to be billed in duplicate, certain claims, knowing the claims to have been billed in duplicate, in whole or part, by commission or omission; and paid by the Oklahoma Medicaid Program through its fiscal agent, TO WIT: **DEANNA LOUISE WILLIAMS** submitted, or caused to be submitted, in excess of Five Hundred Forty-eight (548) duplicate claims for payment totaling \$28,278.92 from Fast Care Medical Clinic, located at 1605 N. Harrison, Shawnee, Oklahoma.

COUNT 2:

MEDICAID FRAUD [56 O.S. §1005(A)(1)]

On or about the 1st day of January, 2011, A.D. through the 31st day of December, 2011 A.D. the crime of MEDICAID FRAUD was feloniously committed in Oklahoma County, Oklahoma, by **DEANNA LOUISE WILLIAMS** who, having the authority or responsibility to make claims for goods or services under the Oklahoma Medicaid Program, knowingly and willfully billed in duplicate or caused to be billed in duplicate, certain claims, knowing the claims to have been billed in duplicate, in whole or part, by commission or omission; and paid by the Oklahoma Medicaid Program through its fiscal agent, TO WIT: **DEANNA LOUISE WILLIAMS** submitted, or caused to be submitted, in excess of Three Hundred Ninety-seven (397) duplicate claims for payment totaling \$32,969.59 from Fast Care Medical Clinic, located at 4335 S.E. 15th Street, Del City, Oklahoma.

Witnesses for the State of Oklahoma:

Misty Weatherford 1240 Pittsburgh Avenue, Oklahoma City, OK 405-215-3312

Kinyada Singleton 1129 S.W. 132nd Place, Oklahoma City, OK

Justin Etchienson 313 N.E. 21st Street, Oklahoma City, OK 405-522-0105

April Woodard 313 N.E. 21st Street, Oklahoma City, OK 405-522-5170

Fred Oraene, OHCA 2410 N.W. 23rd Street, Oklahoma City, OK 405-522-7300

Beth VanHorn, OHCA 2410 N.W. 23rd Street, Oklahoma City, OK 405-522-7300

Melody Anthony, OHCA 2410 N.W. 23rd Street, Oklahoma City, OK 405-522-7300

NOTICE OF OPEN PROSECUTION RECORD

COMES NOW the State of Oklahoma and hereby gives Notice to the Defendant and counsel that pursuant to 22 O.S. §258, all law enforcement reports in the possession of the Attorney General are available for inspection in the Office of the Attorney General during normal business hours and upon reasonable notice to the assigned Assistant Attorney General.

Dated this 24th day of April, 2013 E. SCOTT PRUITT OKLAHOMA ATTORNEY GENERAL James L. Hughes, Jr., OBA #13549 Assistant Attorney General 313 N.E. 21st Street Oklahoma City, OK 73105 (405) 522-2957 State of Oklahoma County of Oklahoma) ss. I, April Woodard, being duly sworn upon oath, state that I have read the above and foregoing Information and know the contents thereof, and that the facts stated herein are true. wil D Wooderd Investigator, Medicaid Fraud Control Unit Subscribed and sworn to before me this $\underline{24}$ day of April, 2013.

My Commission Expires: 12-20-14

STATE OF OKLAHOMA)	
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COUNTY OF OKLAHOMA)	

AFFIDAVIT OF PROBABLE CAUSE FOR ARREST WARRANT FOR

DEANNA LOUISE WILLIAMS

MEDICAID FRAUD 56 O.S. § 1005

April Woodard, being of lawful age and after having affirmed upon her oath to tell the truth, states as follows:

I am a certified Peace officer in Oklahoma, currently employed as an Investigator in the Oklahoma Attorney General's Office, Medicaid Fraud Control Unit. My duties include investigating allegations of fraud and abuse by providers and facilities receiving Medicaid funds.

On July 18, 2011, your affiant was assigned to investigate possible Medicaid fraud by Deanna Williams, owner and operator of Fast Care Medical Clinic with locations at 1605 N. Harrison, Shawnee, OK 74804 and 4335 S.E. 15th Street, Del City, OK 73115. Each Fast Care Medical Clinic location is contracted with the Oklahoma Health Care Authority (OHCA) to provide medical services to Medicaid recipients. OHCA conducted an audit at the Shawnee Fast Care Medical location. They found numerous duplicate claims for services that were submitted to and paid by OHCA. OHCA is the single state agency in Oklahoma responsible for administering Medicaid Funds to providers of health care services.

Your affiant requested provider reports for each Fast Care Medical Clinic location from Justin Etchieson, OHCA Audit Supervisor, from January 2011 through December 2011. After reviewing the provider report it was found that several claims had been billed two times each, for the same service, same patient, same date of service, with the only difference being the physician that provided the service. Each claim has been paid to Fast Care Medical Clinic. At that time none of the duplicate claims had been voided.

On January 10, 2012, On Demand subpoena's were served at both Shawnee and Del City Fast Care Medical Clinic locations. The subpoena served at the Shawnee location

was for sixty (60) patient files. The subpoena served at the Del City location was for seventy-eight (78) patient files. The subpoena's also requested the work schedules for all medical and administrative staff from January 1, 2011, through June 30, 2011. The information was provided by staff from each location that same day.

On January 20, 2013, a subpoena was served to NorthWest Medical Billing for all Superbills, for Medicaid patients only, from each Fast Care Medical Clinic location. The date range requested for the Superbills was January 1, 2011, through December 31, 2011. The information was provided to your affiant on February 3, 2012.

Your affiant reviewed each patient file, staff work schedule, and Superbill creating a spreadsheet containing the client name, date of service, type of service provided and billed, which physician provided the service, which physician signed the patient chart and Superbill, and which physician was scheduled to work each calendar day a bill was submitted for services. After your affiant entered all of the information and verified all payments and voided claims with OHCA for Fast Care Medical Clinics, there was a total \$28,278.92 of duplicate claims outstanding, not voided, and duplicate billing for services by two different physicians that did not provide the actual service at the Shawnee location and a total of \$32,969.59 of duplicate claims outstanding, not voided, and duplicate billing for services by two different physicians that did not provide the actual service at the Del City location.

On November 1, 2012, your affiant interviewed Misty Weatherford. Weatherford stated she worked for NorthWest Medical Billing, Inc. from October 27, 2011, through October 22, 2012. She was first hired to be a "Poster", the person who post payments. The longer she was there the more responsibility that she was given. Weatherford started billing for services, review claims, calling insurance companies/OHCA, verifying status of claims on the website, voiding claims, checking on "double payments", some billing, and contacting patients with questions about their insurance. She worked Monday through Thursday from 8:00am to 5:00pm. On Friday's she worked from 8:00am to 12:00pm. She never worked nights, weekends, or ever took work home with her. Weatherford said she was paid \$10 and hour and did not receive any bonuses.

Weatherford stated Williams and Singleton trained her on how to bill using the OHCA secure website and the Kareo billing system. She had no formal training and is not a Certified Medical Coder. Weatherford had no other experience with medical billing or coding. When Weatherford started working at NorthWest Medical Billing the only system in place to bill was the Kareo system. To sign into Kareo each user had their own unique user name and password. Weatherford was taught to bill OHCA directly using OHCA secure website. The NorthWest Medical Billing employee's used a universal, shared, user name and password to log into the OHCA site.

Weatherford stated that when billing for Medicaid on the Kareo system it took several screens to finally submit a claim for payment. The biller would have to back out of

the patient screen to a different screen to submit the claim. She billed for services from a "claim" form that was printed from the Kareo system that Williams provided her. Weatherford said she was not sure what the form was called. Every provider for each Fast Care Medical Clinic location was already in the Kareo system when she started working there. After she completed billing from the claim forms, the forms were shredded by Williams. All billing to OHCA was to be completed by Wednesday each week. She rarely billed Medicaid on the Kareo system because it took longer to receive the payments. Weatherford said she never billed using information from a Superbill.

Darlene Reed, employee at NorthWest Medical Billing, and Williams were the only two people who billed for each Fast Care Clinic. Williams did a majority of the billing according to Weatherford.

Weatherford said she started seeing "duplicate billing" when reconciling the December 2010 or January 2011 postings. She notified Williams of the duplicates and gave them to her. Williams asked her to start "tabbing" the duplicates and provide them to her. At one point she asked Williams what she was doing to clear the duplicates from the aging report so she could assist her. Williams explained to her she would take the total amount of the two payments from OHCA, merge them onto one line item as paid and write off, zero out, the balance that was not paid by OHCA. At some point Weatherford was provided a list by Williams and told to void the claims listed. She is not sure where the list came from. Weatherford stated she reviewed the Remittance Advice (RA) that OHCA provides to contracted providers. Weatherford stated she would review the RA's with Williams.

On November 8, 2012, your affiant interviewed Kinyada Singleton. Singleton worked for NorthWest Medical Billing, Inc., from November 2009 through March 2012. She was originally hired to be Deanna Williams assistant. Singleton worked Monday through Friday from 6 or 7:30am to when ever she got finished for the day. The ending time varied, but she was always available by phone. When she first started working for Williams she was paid \$11.00 an hour. By the time she left she was making \$14.00 an hour. Over time, her job duties expanded to include hiring for both NorthWest Medical Billing and Fast Care Medical Clinic's, billing for services, sales calls, training employee's, team meeting arrangements, Human Resources (HR) issues, Electronic Health Record (EHR) implementation, and day-to-day issues that came up with employee's from both companies. From the very beginning of her employment until she left, Williams was her direct supervisor.

Singleton stated that NorthWest Medical Billing's regular hours of operations were Monday through Thursday from 8:00am through 5:00pm. On Friday's the hours changed to 8:00am through 12:00pm. Singleton had no prior medical billing or coding training before coming to work for Williams. She attended training from OHCA 2 or 3 times while at NorthWest Medical Billing. The training was provided at the Moore-Norman Technology Center. OHCA staff also provided training onsite 2 times. Williams trained Singleton on the billing system that was in place when she started

there; the Mysis system. NorthWest Medical Billing switched from Mysis to the Kareo billing system while she was working there. The reason for the change was due to the cost of Mysis vs Kareo. Kareo charged a flat rate of \$200.00 per provider. Kareo provided online and conference call training. When NorthWest Medical Billing first set up the Kareo system Williams did not pay for each provider to be put in the system. Singleton thought it was only Dr. Fine and Dr. Hackney at first. The remaining providers were added sometime in mid 2011. They did not use Kareo to bill the OHCA for Medicaid claims at first. Everything was directly entered onto OHCA's secured website and submitted. The employee's at NorthWest Medical Billing all shared the same user name and password to access OHCA website to bill. When using Kareo to submit claims/billing, they would have to sign in using and individual user name and password.

Singleton stated she was taught to use the information provided on the individual Superbill for the patient when billing OHCA for services. She stated she never changed any of the level of service CPT codes that the attending physician marked on the Superbill. Singleton did not bill for Fast Care very often, only when Williams got behind. Usually Williams did the billing for all three Fast Care Clinics. The paper style Superbill would be filled out by the attending physician and turned in to the Medical Assistant (MA) after treating a patient. The MA would retain the Superbill until Williams would pick them up and take them to NorthWest Medical Billing. Once the service was billed by someone at NorthWest Medical Billing using the Superbill, the documents would be bundled up in chronological order and stored on a shelf.

Singleton advised that to keep a claim from being billed by Kareo, the biller would not enter a payer ID number on the claim. Then the claim would be in the "claims to be printed" area of Kareo. There was an option to mark each claim as printed, this would remove the claim out of the pending status. That would show the claim as submitted/billed. A 1500 claim form was generated after input of the charges from the Superbill. If someone did place a payer ID number on the claim form, it was possible that the claim could be submitted electronically. If the claim was already entered in Kareo and someone else attempted to enter the claim again a notice would pop up saying "you may be attempting to enter a duplicate claim".

Singleton stated when Kareo was implemented training was provided over the internet and online conference calls. Singleton and Williams attended the online training and also contacted Kareo directly when they had questions about the system. Singleton and Williams trained the other staff at NorthWest Medical Billing on how to use Kareo.

Singleton stated she did notice there was double payments being paid to Fast Care Medical Clinics by OHCA and notified Williams. She gave Williams the double payment information for her to void. Singleton never went back to see if Williams had voided the duplicate claims. Singleton made a push to have every claim billed through Kareo when she kept noticing the double payments from OHCA.

Singleton advised that she, Lauren Wilson, Misty Weatherford, and Williams would reconcile the payments from OHCA. Usually the remittance advise (RA) would be found in Williams office or in a box.

On November 15, 2012, your affiant interviewed Williams. Williams stated that she owns NorthWest Medical Billing, the company that does the billing for each Fast Care Medical Clinic locations. The operating hours at NorthWest Medical Billing are Monday through Friday from 8:00am to 5:00pm. Williams stated that she does not do most of the billing for the Fast Care Medical Clinic locations, Darleen Reed took care of that. Reed works at NorthWest Medical Billing 3 to 4 days a week as a biller. Williams said that NorthWest Medical Billing uses OHCA secure website to submit claims. Each Fast Care Medical Clinic has their own user name and password to log into the site. You can access the site from any computer as long as you have the user name and password. When submitting a claim to OHCA, the biller would use the information provided from the Superbill.

The Superbill is a form that is completed at the time of service by the physician. The physician will make a mark or circle next to the CPT code on the Superbill indicating the level and types of services that were provided to the patient. The Superbill then would be collected by the Medical Assistant (MA) and picked up at the end of the day by Williams. After the claims are entered on the OHCA secure website for billing, the Superbill would be put in a pile to be entered into Kareo, a web based billing system, by billing staff.

Williams was asked about the submission of claims to OHCA after NorthWest Medical Billing regular business hours. She stated that she would have done any billing after business hours; her staff does not work after regular business hours. Williams was asked if they always bill directly using the information on the Superbill and she said yes. After reviewing several claims where the Superbill CPT codes did not match what had been submitted to OHCA, Williams stated that she has changed some of the CPT codes. Williams said that Dr. Hackney, physician for Fast Care Medical Clinic's, usually "under coded" the services that he provides, so she has changed them to what she thought was the correct CPT code. Williams stated that she is a certified medical coder and received her certificate from DeMarge College. She is the only certified medical coder working at NorthWest Medical Billing.

Williams was asked about the duplicate billing that has been submitted to OHCA from Fast Care Medical Clinic's. Williams stated that NorthWest Medical Billing had changed billing systems in 2010. When Fast Care Medical Clinic first opened NorthWest Medical Billing was using the Misys system for billing claims. Due to the cost to use the Misys system she decided to change systems sometime in 2010 to Kareo. Kareo was less expensive, charging per provider, and more user friendly. When she initially set up her account with Kareo she only paid for two physicans; Dr. Hackney and Dr. Fine. Williams did not use Kareo to submit claims to OHCA when they first set up the system. She directed her staff to continue to use the OHCA secure

site. When entering information onto Kareo, since she had only two providers in the system, she would either use Fine or Hackney as the provider even though they did not provide the service. This was done so they could get the information entered into Kareo.

Williams stated that she had no idea that claims were being submitted by the Kareo system when information was being entered. Williams was asked if she ever reviewed the Remittance Advice (RA), statement sent to providers by OHCA of all claims submitted and their status, paid, rejected, denied, or voided. William said she has not reviewed a RA. Williams was asked if she had ever reviewed a RA from Kareo. She stated she had not and did not even know that was something they provided. Williams was asked what she did when her staff had brought it to her attention there were duplicate payments for services being paid by OHCA. Williams stated she told Kinyada Singleton, office manager for NorthWest Medical Billing and Fast Care Medical Clinic's, "no honey, it goes by the date of service". William was advised by at least two employee's about the duplicate payments/billings. Williams said she did not believe it was possible, it would reject the claim if it was the same patient being seen on the same day for services.

Williams was asked about the other providers/clients that she bills for at NorthWest Medical Bill, she stated she had several clients besides Fast Care Medical. Williams was asked how the claims were submitted for Opensided MRI during the change from Misys to Kareo. She stated that the claims were submitted on the OHCA secure website just like the ones for Fast Care Medical Clinic. Williams was advised there were no duplicate billing submitted for Opensided MRI, a client of NorthWest Medical Billing, to the OHCA. She could not explain how Opensided MRI did not have any duplicate billings since they billed the same as when billing for her Fast Care Medical Clinic locations.

Williams was asked why she called OHCA every week to see what the warrant amount was going to be for each provider she bills for. She stated that she called to find out so she would know how much money NorthWest Medical Billing was going to be paid by the client. Williams was asked since she called each week and knew the amounts of the checks how she could not have realized that she was being paid much more than the number of patients being actually seen at each Fast Care Medical locations. Williams stated she was unaware of being paid more, she was not paying attention to the Fast Care Medical Clinic locations warrant dollar amounts. Williams stated that her CPA took care of all the finances and she never knew how much money they were being paid. Once OHCA stopped payments Williams contacted OHCA and requested a list of double payments/duplicate claims submitted and paid to each Fast Care location. Williams received a list in December 2011 and started voiding claims.

Williams was advised on several occasions by her staff about the duplicate billing and payments from OHCA and chose to do nothing to either verify or correct the issue.

Williams was provided a RA each month from OHCA for her to review and verify the claims being paid, voided, denied, and any other issues with a claims that had been submitted. Williams chose to not review the RA to verify the information and claims. If she had reviewed the RA's Williams would have noticed the duplicate claims being submitted and paid by OHCA. Williams was provided a partial spreadsheet of duplicate payments from OHCA in December 2011. Williams voided some claims, the last batch of claims voided on the list was in July 2012, seven (7) months after the list was provide to Williams. Williams should have known that the list provided to her was only a partial list, but she chose to only deal with the limited list provided to her.

Williams was the only person that would have gained from the duplicate billing and payments from OHCA. Her staff was paid an hourly wage, not by percentage of what was billed. Williams submitted a large portion of the claims during non business hours to OHCA. Williams caused to be billed and paid by OHCA duplicate claims totaling \$20,714.64 from the Shawnee Fast Care Medical Clinic location and \$12,948.92 from the Del City Fast Care Medical Clinic location. Williams refuses to accept responsibility for her actions that caused the claims to be submitted to and paid by OHCA.

I request, upon probable cause, the court issue a warrant for the arrest of Deanna Louise Williams on the charge of Medicaid Fraud 56 O.S. § 1005(A)(1).

Further, your affiant sayeth not.

April D. Woodard

Subscribed and affirmed before me this 23 Day of April
Two Thousand Eleven.

My commission expires:

12-20-14

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PUBLIC

OF OKLINING

FINDING OF PROBABLE CAUSE

	day of	, 20_	, the above styled
and numbered	cause came on for hea	ring before me, the under	signed Judge of the
District Court, a	and upon the Affidavit o	\mathbf{f}_{-}	requesting that
a warrant of a	rrest be issued for the	within named Defendant,	that s/he might be
arrested and he	ld to answer for the off	ense of	<i>U</i>
	s that the offense of		has
been committe committed said	d and there is probable offense and that a war	cause to believe that the wrant of arrest should be iss	ithin Defendant has sued.
Dated this_	day of	. , 20	0
		PL	
		JUDGE OF THE DIST	RICT COURT