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12 *Attorneys for Plaintiff*

RS
JAN 22 2016
FILED
SUPERIOR COURT OF CALIFORNIA
COUNTY OF RIVERSIDE

JAN 13 2016



13 SUPERIOR COURT OF THE STATE OF CALIFORNIA
14 FOR THE COUNTY OF RIVERSIDE

15 PEOPLE OF THE STATE OF CALIFORNIA,

16 Plaintiff,

17 v.

18 (01) ANITA MARADIAGA,
19 [DOB: 09/07/1952]
20 (02) CANDELARIA VALDEZ, ✓
21 [DOB: 03/20/1966]

22 Defendants.

Case No. RIF1600240 ✓

FELONY COMPLAINT FOR
ARREST WARRANT

Count 1: Penal Code § 368(b)(1)
Elder or Dependent Adult Abuse

ENHANCEMENT

Penal Code § 368(b)(2)(B) (+5 years)
Proximate Cause of Death, Victim Over
Seventy (70) Years of Age

23 The People of the State of California hereby allege that in the County of Riverside, State
24 of California, and before the making or filing of the complaint, the above-mentioned defendants
25 did commit the following crime(s):

26 COUNT 1

27 ELDER OR DEPENDENT ADULT ABUSE

28 (Penal Code § 368(b)(1))

From on or about September 30, 2014, to October 7, 2014, in the County of Riverside,
ANITA MARADIAGA and CANDELARIA VALDEZ, under circumstances and conditions
likely to produce great bodily harm and death, did knowingly and willfully cause and permit
Bernard A., an elder and dependent adult, to suffer, and inflicted thereon, unjustifiable physical

1 permitted Bernard A., to be placed in a situation in which his health was endangered, and
2 reasonably knew and reasonably should have known that said person, Bernard A., was an elder
3 and dependent adult, in violation of California Penal Code section 368(b)(1), a felony.

4 It is further alleged, pursuant to section 368(b)(2)(B), that the victim, Bernard A., age 83
5 years, suffered great bodily injury.

6 Dated: January 6, 2016

Respectfully Submitted,

7 KAMALA D. HARRIS
8 Attorney General of California

9
10 

11 MELISSA BIEDERMAN ZUBI
12 Deputy Attorney General
13 Attorneys for People of the State of California

14 Preliminary Hearing Time Estimate: 1 hour

15 **REQUEST FOR ARREST WARRANT**

16 Based on this complaint and the accompanying declaration in support of arrest warrant, I
17 respectfully request that a warrant be issued for the arrest of the defendants pursuant to Penal
18 Code section 813 et seq.

19 **DECLARATION**

20 I declare under penalty of perjury under the laws of the State of California that the
21 foregoing is true and correct. Signed on the 7th day of January 2016.

22
23 

24 MELISSA BIEDERMAN ZUBI
25 Deputy Attorney General
26 Attorneys for People of the State of California

1 Agency: Bureau of Medi-Cal Fraud & Elder Abuse
2 California Department of Justice
3 Law Enforcement Agency No. 7293
ORI No. CA00199409 West Covina
BMFEA Docket No. WC2015103993

4 Arrest Warrants Requested

5 **ANITA MARADIAGA**

6 Recommended Bail: \$75,000

7 DOB: 9/7/1952
8 CII No. A29816337
9 CDL No. C0690298
10 SS No. 547-84-4205 or 647-84-4205

11 Sex: Female

12 Race: Caucasian

13 Hair: Brown

14 Eyes: Green

15 Height: 5'02"

16 Weight: 175

17 Last Known Address: 41196 Van Tu Lane, Temecula, CA 92591

18 **CANDELARIA VALDEZ**

19 Recommended Bail: \$75,000

20 DOB: 3/20/1966
21 CII No. A28218294
22 CDL No. D1576239
23 SS No. 612-29-7715

24 Sex: Female

25 Race: Hispanic

26 Hair: Brown

27 Eyes: Brown

28 Height: 5'05"

Weight: 180

Last Known Address: 165 N. Hamilton Ave #1, Hemet, CA 92543

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IT IS ORDERED that an arrest warrant shall issue for ANITA MARADIAGA , who is to be admitted to bail in the sum of \$ _____.

Date MAGISTRATE

IT IS ORDERED that an arrest warrant shall issue for CANDELARIA VALDEZ, who is to be admitted to bail in the sum of \$ _____.

Date MAGISTRATE

SEP 13 2016

K. Shepherd

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE
MISDEMEANOR PLEA FORM

People v. Candelaria Valdez Case Number: RIE 1600240

RIE 1600240

A. ADVISEMENT OF RIGHTS:

- Initials
- CV 1. I have the right to a speedy and public trial by a judge or jury.
 - CV 2. At my trial, I have the right to face and cross-examine any witnesses against me.
 - CV 3. I have the right to ask the court to compel witnesses to attend my trial at no expense to me.
 - CV 4. I have the right against self-incrimination. I cannot be forced to testify against myself, but I also have the right to testify in my own defense if I choose to do so.
 - CV 5. I have the right to be represented by a lawyer at all proceedings. If I cannot afford one, the court will appoint one to represent me at no cost to me.
 - CV 6. I have the right to have a court reporter at all proceedings. If I wish one, I will advise the court in advance. If I cannot afford to pay for the court reporter, the court will provide one at no cost to me.

AM
SEP 15 2016

B. CONSEQUENCES OF PLEA:

- CV 1. I will be ordered to pay restitution to the victim(s).
- CV 2. I agree that the amount of victim restitution is 0. If the parties do not agree, the probation department will determine the amount. If I disagree with the amount, I may request a hearing.
- CV 3. Charges and/or enhancements may have been dismissed as part of this negotiated disposition with the District Attorney's Office. I agree that I will be ordered to pay restitution to the victim(s) of the dismissed charges and/or enhancements.
- CV 4. I will be ordered to pay a restitution fine of at least \$150 and not more than \$1000. There are several other fines and fees that will be imposed as a result of this guilty plea.
- CV 5. If I am not a citizen of the United States, I understand that this conviction may have the consequences of deportation, exclusion from admission to the United States, or denial of naturalization pursuant to the laws of the United States.
- XX 6. Being under the influence of alcohol or drugs, or both, impairs your ability to safely operate a motor vehicle. Therefore, it is extremely dangerous to human life to drive while under the influence of alcohol or drugs, or both. If I drive while under the influence of alcohol or drugs, or both, and as a result of that driving, someone is killed, I can be charged with murder.
- XX 7. My driving privileges may be suspended or revoked by the Department of Motor Vehicles.
- XX 8. I may not be able to own or possess a firearm if I am convicted of a crime involving domestic violence, assault, or a firearm violation.
- XX 9. I understand that I will be ordered to register with law enforcement as a(n) _____ and that if I fail to register or to keep my registration current for any reason, new felony criminal charges may be filed against me. I understand that registration as a sex offender is a life long requirement.
- XX 10. I may be required to undergo AIDS testing if I am convicted of sex crimes or an assault.
- XX 11. I may be required to give a DNA sample.
- XX 12. Other _____

C. DEFENDANT'S STATEMENT:

- CV 1. All the promises made to me are written on this form, or stated in open court.
- CV 2. No one has made any threats to me or anyone close to me, or placed any pressure of any kind on me in order to make me plead guilty.
- CV 3. I understand that if I violate any of my probation terms, I could be sentenced to the maximum custody term possible under these charges as set forth under "Plea Agreement", Item 3.
- CV 4. If there are any dismissed charges, they may be considered in determining restitution and the appropriate sentence.
- CV 5. As part of this plea, I (circle one) do / do not waive any right to appeal that I may have.
- CV 6. Factual Basis: I agree that I did the things that are stated in the charges that I am admitting.

D. PLEA AGREEMENT:

1. Defendant in Pro Per: I will plead guilty to the complaint as charged.
2. Per agreement with the District Attorney, I will plead guilty to the following charges:
Added count 2 242 PC
3. Defendant represented by an Attorney: The terms of the disposition are:
35P, 90 hrs community service
4. The maximum possible custody commitment for the admitted charges may be; 1 year, 6 months, or 90 days, depending on the charge. These are per count.
5. My guilty pleas are conditional on receiving the following considerations as to sentence:
 - a) Probation will be granted. The terms are in the Sentencing Memorandum Form which is incorporated into this Plea Form.
 - b) Probation will be denied. The terms are in the Sentencing Memorandum Form which is incorporated into this Plea Form.

E. SIGNATURES:

General
District Attorney: The above is a correct statement of the Plea Agreement between defense and prosecution.

9/12/16 Melissa Zubi [Signature]
 (DATE) (PRINT NAME) (SIGNATURE)

Defendant: I have read and understand this entire document. I waive and give up all of the rights that I have initiated. I accept this Plea Agreement. An Attorney acting as a Judge Pro Tem or a Commissioner may act as a Judge in this case.

X 9-13-16 Candelaria Valdez [Signature]
 (DATE) (PRINT NAME) (SIGNATURE)

Defense Attorney: I am the attorney for the defendant. I am satisfied that (1) the defendant understands his/her constitutional rights and understand that a guilty plea would be a waiver of these rights; (2) the defendant has had an adequate opportunity to discuss his/her case with me, including any defenses he/she may have to the charges; and (3) the defendant understands the consequences of his/her guilty plea. I join in the decision of the defendant to enter a guilty plea.

9-13-16 Miles Clark [Signature]
 (DATE) (PRINT NAME) (SIGNATURE)

Interpreter: Having been duly sworn, I have translated this form to the defendant in the Spanish language. The defendant has stated that he/she fully understood the contents of the form prior to signing.

9-13-16 Mylena Yanco [Signature]
 (DATE) (PRINT NAME) (SIGNATURE)

Original

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE
SENTENCING MEMORANDUM

Page 1 of 1
People v. CANDELARIA VALDEZ

THE FOLLOWING TERMS AND CONDITIONS
ARE ORDERED BY THE COURT



Case Number RIF1600240

MISDEMEANOR FELONY

FILED
SUPERIOR COURT OF CALIFORNIA
COUNTY OF RIVERSIDE

SEP 13 2016

K. Shephard

SEP 15 2016

Proceedings are suspended. **(PAS)**
Summary probation granted for 36 months. **(SPG)**
Obey all laws, ordinances, and court orders. **(T1)**

Charges admitted: II: PC 242

CUSTODY / WORK PROGRAMS / COMMUNITY SERVICE

Perform 80 hours of community service through Alternative Sentencing and report to program within 14 days, excluding time in custody. File proof of completion by 9/13/2017. **(THA)**

FINES / FEES / RESTITUTION All fines, fees, and restitution imposed shall be paid to the Court, as directed by the Enhanced Collections Division

Pay restitution fine of \$ 150.00 (PC § 1202.4(b)). **(TYC)**
Pay probation revocation restitution fine of \$ 150.00 (PC § 1202.44). Stayed pending completion of probation. **(TYF/1)**

If your fine(s) or actual restitution is not paid in full more than 120 days before completion of probation you are ordered to re-contact Enhanced Collections and complete a new Financial Disclosure Statement form (PC § 1202.4(f) (1)). **(TYG/A)**
Report to/cooperate with Enhanced Collections immediately or within two business days of release from custody. **(DORECD)**

DRUG / SEARCH / TEST PROGRAM TERMS

Submit to immediate search of person/property including all residences/premises/storage units, containers, & vehicles under your control; by Probation Officer or law enforcement officer, with or without cause. **(TEA1/A)**

*Submit proof of enrollment and/or completion of the above noted programs as directed by your Probation Officer and/or Alternative Sentencing.

ADDITIONAL ORDERS OF THE COURT

Pay court operations assessment fee of \$40 per convicted charge (PC § 1465.6). **(TXX)**
Pay court conviction assessment fee of \$30 per convicted misdemeanor/felony charge (GC § 70373). **(TXW)**

Revised 04/12/13 CR002

I have read, I understand, and I accept these terms and conditions of probation on pages one and two.

Defendant: *[Signature]*

Defense Attorney: *[Signature]*

District Attorney: *[Signature]*

Interpreter: *[Signature]*

Dated: _____

IT IS SO ORDERED:

JUDICIAL OFFICER

NOTICE TO DEFENDANT: If you have been placed on probation, you have the right to ask the court either (1) to allow you to withdraw your plea of guilty or of nolo contendere and to enter a plea of not guilty, or (2) if you were convicted after a plea of not guilty, to set aside the verdict of guilty. (For details, see Penal Code section 1203.4.) If you have been convicted of a misdemeanor and not placed on probation, and one year has passed since pronouncement of judgment, you have the right to make a similar request. (For details, see Penal Code section 1203.4a.) Forms on which to make such requests are available in the clerk's office.

RIVERSIDE SUPERIOR COURT

PUBLIC ACCESS

Minute Order

Defendant Name: CANDELARIA VALDEZ		
Case Number: RIF1600240		File Date: 1/13/2016
Action Date: 9/13/2016	Action Time: 8:30 AM	Department: 34
Action Description: Felony Settlement Conference		
<p>Honorable Judge Elisabeth Sichel, Presiding</p> <p>Clerk: K Shepherd.</p> <p>Court Reporter: S Detwiler</p> <p>People represented by Deputy District Attorney: Attorney General Office-M. Ara.</p> <p>Public Defender Appointed.</p> <p>Defendant represented by PVT-Miles Clark.</p> <p>Defendant Present.</p> <p>Certified Interpreter M Yanez is present and sworn to interpret Spanish for defendant.</p> <p>Certification or registration number has been validated and identification has been verified by badge issued by Judicial Council.</p> <p>The oath has been administered and a sworn oath is on file.</p> <p>Defendant waives formal arraignment.</p> <p>Misdemeanor plea form is incorporated herein and includes the following advisements and waivers:</p> <p>Stat Count: Defendant Arraigned</p> <p>Defendant Advised of Constitutional Rights.</p> <p>Defendant advised of right to a speedy and public trial by judge or jury.</p> <p>Defendant advised of right to confront and cross examine witnesses; right to present evidence on own behalf.</p> <p>Defendant advised of privilege against self-incrimination.</p> <p>Defendant advised of charges and consequences of his/her plea and statutory sentencing.</p> <p>Defendant Waives Constitutional Rights.</p> <p>Defendant waives right to Trial by Jury.</p> <p>Defendant waives right to confront and cross examine witnesses.</p> <p>Defendant waives privilege against self incrimination.</p> <p>Court finds based on inquiry and examination of deft, that deft has the ability to understand and does understand his/her constitutional rights.</p> <p>Court finds defts admission of guilt and/or admission of prior conviction(s) and/or probation violation(s) if any, is the result and product of</p> <p>the result of defendant expressly, knowingly, understandingly, and intelligently waives his/her constitutional rights including, but not limited</p>		

Defendant Name: CANDELARIA VALDEZ

Case Number: RIF1600240

File Date: 1/13/2016

Action Date: 9/13/2016

Action Time: 8:30 AM

Department: 34

Action Description: Felony Settlement Conference

to: right to counsel, privilege against self-incrimination, to trial by jury, and to confront accusers, and voluntarily made with an understanding of the nature and consequences thereof. Defendant's waiver of constitutional rights taken orally and/or in writing.

Defendant pleads Guilty to Count(s) 02.

Court Accepts Plea.

Defendant waives arraignment for pronouncement of judgment.

Defendant requests immediate sentence.

No legal cause why sentence should not now be pronounced.

Proceedings Are Suspended. (SENT)

For The Charge(s) 02.

Summary Probation Granted for a period of 36 months on the following terms and conditions.

Obey all laws, ordinances, and court orders.

Perform 80 hours of community service through Alternative Sentencing Program. File proof of completion by 09/13/2017.

Report to the Alternative Sentencing Program within 14 days from today or 14 days from release from custody.

Referral Notice Generated - LCA

Pay restitution fine of \$150.00 (PC 1202.4(b)).

Pay \$150.00 for Probation Revocation Restitution Fine. Said restitution fine is stayed and the stay shall be lifted upon the revocation of probation,

and if the defendant is sentenced to prison or county jail without a probation or conditional sentence imposed. (PC 1202.44)

If your fine(s) or actual restitution is not paid in full within 120 days prior to probation expiration you are ordered to re-contact Enhanced

Collections Division and complete a new Financial Disclosure Statement form. (PC 1202.4(f)(11))

Defendant ordered to report and cooperate with Enhanced Collection Division immediately or within two business days of release from custody.

Submit to immediate search/property including all residence/premises/storage units, containers and vehicles under your control; by

Probation officer or law enforcement officer; with or without cause;

As to count(s) 02, Court Operations Assessment fee of \$40 imposed for each convicted charge. (1465.8 PC)

Pay conviction assessment fee for the following convicted count(s) 02. (GC 70373). [\$30.each misd and felony]

Defendant accepts terms and conditions of probation.

Defendant Name: CANDELARIA VALDEZ

Case Number: RIF1600240

File Date: 1/13/2016

Action Date: 9/13/2016

Action Time: 8:30 AM

Department: 34

Action Description: Felony Settlement Conference

Bail Bond # SV1004712797 Exonerated.

Count(s) 01 dismissed in the interest of justice. (1385 PC)

-- Custody Status/Information --

Released On Probation

Close Case.



JENNIFER KENT
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

FEB 22 2017

Candelaria Valdez
165 Hamilton Avenue, No. 1
Hemet, CA 92543

**Re: Suspension from Medi-Cal Participation
Candelaria Valdez aka Candelaria Maradiaga**

Dear Ms. Valdez:

The Director of the California State Department of Health Care Services (Department) has been notified of your September 13, 2016, conviction in the Riverside County Superior Court (*People v. Candelaria Valdez*, No. RIF1600240) for violation of Penal Code section 242. This is a conviction involving abuse of patients and that has been determined by the Department to be substantially related to the qualifications, functions, or duties of a provider of service. As a provider of health care services, you were granted certain permissions to participate in the Medi-Cal program by operation of law with or without applying for enrollment. Pursuant to Welfare and Institutions Code section 14123, subdivision (a), the Director is required to automatically suspend these permissions in certain cases, which means that you are precluded from being eligible to receive payment from the Medi-Cal program directly or indirectly. This requirement applies to anyone who provides health services whenever that person is convicted of any felony or any misdemeanor involving fraud, abuse of the Medi-Cal program or any patient, or otherwise substantially related to the qualifications, functions, or duties of a provider of service. (See 42 C.F.R. § 1001.101(b); Welf. & Inst. Code, § 14123.25.)

Therefore, on behalf of the Director of the Department, you are hereby notified that you are prohibited from being able to receive payment from the Medi-Cal program for an indefinite period of time, effective twenty days (15 days' statutory notice, plus 5 days for mailing) from the date of this letter. Your name will be posted on the "Medi-Cal Suspended and Ineligible Provider List," available on the Internet. During the period of your suspension, no person or entity, including an employer, can submit any claims to the Medi-Cal program for items or services rendered by you. If you are currently enrolled in Medi-Cal, that enrollment will be terminated. Any involvement by you directly or indirectly (i.e., as an office manager, administrator, billing clerk processing or preparing claims for payment, salesperson for medical equipment, etc., or utilizing any

Candelaria Valdez

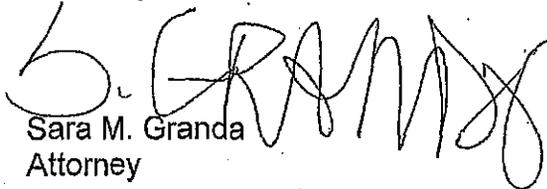
Page 2

FEB 22 2017

other provider number or group or clinic number for services rendered by you) will result in nonpayment of the claim(s) submitted. Any person who presents or causes to be presented a claim for equipment or services rendered by a person suspended from receiving Medi-Cal payment shall be subject to suspension from receiving payment, the assessment of civil money penalties, and/or criminal prosecution. (See Welf. & Inst. Code, §§ 14043.61, 14107, 14123.2; Cal. Code of Regs., tit. 22, §§ 51458.1, 51484, and 51485.1.) The Department will seek recoupment of any monies paid for claims presented to the Medi-Cal program for services or supplies rendered by you during the period of your suspension.

If you have any questions about this action, please submit your concerns, in writing, to the Mandatory Suspension Desk, at the above address.

Sincerely,


Sara M. Granda
Attorney

cc: See Next Page

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Department of Health Care Services
MS 4704
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Sacramento, CA 95899-7413

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