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CLERK U.S. DISTRICT COURT  
CENTRAL DIST. OF CALIF.  
LOS ANGELES

BY: \_\_\_\_\_

UNITED STATES DISTRICT COURT  
FOR THE CENTRAL DISTRICT OF CALIFORNIA

June 2014 Grand Jury

**CR 14 00512**

UNITED STATES OF AMERICA,

CR No. 14-

Plaintiff,

I N D I C T M E N T

v.

[18 U.S.C. § 1347: Health Care Fraud; 18 U.S.C. § 1956(h): Conspiracy to Launder Monetary Instruments; 18 U.S.C. § 1956(a)(1)(B)(i): Concealment Money Laundering; 18 U.S.C. § 2: Aiding and Abetting and Causing An Act To Be Done]

PRISCILLA VILLABROZA,  
SHARON PATROW,  
aka "Sharon Garcia,"  
SRI WIJEGONARATNA, M.D.,  
aka "Dr. J,"  
BOYAO HUANG, M.D.,  
NANCY BRIONES, R.N., and  
ROSEILYN MONTANA,

Defendants.

The Grand Jury charges:

COUNT ONE

[18 U.S.C. § 1347; 18 U.S.C. § 2]

A. INTRODUCTORY ALLEGATIONS

At all times relevant to the Indictment:

The Defendants, Their Co-Schemers, and Related Entities

1. California Hospice Care, LLC ("California Hospice") was located at 740 East Arrow Highway, Suites C and D, Covina, California, within the Central District of California.

1           2. Defendant PRISCILLA VILLABROZA ("VILLABROZA") purchased and  
2 financed the purchase of California Hospice for approximately  
3 \$300,000 in or about November 2007.

4           3. In addition to California Hospice, defendant VILLABROZA  
5 owned and operated the following health care companies within the  
6 Central District of California and elsewhere: Medicare Plus Home  
7 Health Providers, Inc., doing business as ("dba") Blue Diamond Home  
8 Health Providers ("Medcare Plus" or "Blue Diamond"), a purported home  
9 health agency; Excel Plus Home Health Services, Inc. ("Excel Plus"),  
10 a purported nursing registry; Unicare Health Professional  
11 ("Unicare"), a dba used by defendant VILLABROZA for herself; Unicare  
12 Health Professionals, LLC ("Unicare LLC"); and Nevada Home Health  
13 Providers, Inc. ("NHHP"), a purported home health agency.

14           4. Defendant SHARON PATROW, also known as ("aka") "Sharon  
15 Garcia" ("PATROW"), defendant VILLABROZA's daughter, operated  
16 California Hospice with defendant VILLABROZA.

17           5. Defendants VILLABROZA and PATROW were the only signatories  
18 on, and jointly controlled, California Hospice's bank account at  
19 Wells Fargo Bank, with an account number ending in 1910 (the "Wells  
20 Fargo Account"). Defendant VILLABROZA also controlled the bank  
21 accounts of Medicare Plus, Excel Plus, Unicare, Unicare LLC, and NHHP.

22           6. Defendant SRI WIJEGONARATNA, M.D., aka "Dr. J"  
23 ("WIJEGONARATNA"), was a physician and patient recruiter at  
24 California Hospice.

25           7. Defendant BOYAO HUANG, M.D. ("HUANG") was a physician at  
26 California Hospice.

27           8. Defendant NANCY BRIONES, R.N. ("BRIONES") was a registered  
28 nurse and patient recruiter at California Hospice.

1 9. Defendant ROSEILYN MONTANA ("MONTANA") was a patient  
2 recruiter at California Hospice.

3 10. Co-schemer E.C. was the Director of Nursing ("DON") at  
4 California Hospice.

5 11. Co-schemers M.S., K.C., and J.L. were quality assurance  
6 ("QA") nurses at California Hospice.

7 12. Co-schemers D.G., E.O., and R.P. were patient recruiters at  
8 California Hospice.

9 The Medicare and Medi-Cal Programs

10 13. Medicare was a federal health care benefit program,  
11 affecting commerce, that provided benefits to individuals who were  
12 over the age of 65 or disabled.

13 14. Medicare was administered by the Centers for Medicare and  
14 Medicaid Services ("CMS"), a federal agency under the United States  
15 Department of Health and Human Services ("HHS").

16 15. Medi-Cal was a health care benefit program, affecting  
17 commerce, for indigent individuals in California. Funding for Medi-  
18 Cal was shared between the federal government and the State of  
19 California.

20 16. The California Department of Health Care Services ("CAL-  
21 DHCS") administered the Medi-Cal program. CAL-DHCS authorized  
22 provider participation, determined beneficiary eligibility, issued  
23 Medi-Cal cards to beneficiaries, and promulgated regulations for the  
24 administration of the program.

25 17. Individuals receiving Medicare and Medi-Cal benefits were  
26 known as "beneficiaries." Each Medicare beneficiary was given a  
27 Health Identification Card Number ("HICN") unique to that  
28 beneficiary.

1 18. Hospices, physicians, and other health care providers who  
2 provided services to beneficiaries that were reimbursed by Medicare  
3 and Medi-Cal were referred to as "providers."

4 19. To become eligible to participate in Medicare, Medicare  
5 required prospective hospice providers to be licensed by a state or  
6 local agency. After obtaining the applicable license, Medicare  
7 required prospective hospice providers to submit an application in  
8 which the prospective provider agreed to (a) comply with all  
9 Medicare-related laws and regulations, including the prohibition  
10 against payment of kickbacks for the referral of Medicare  
11 beneficiaries; and (b) not to submit claims for payment to Medicare  
12 knowing they were false or fraudulent or with deliberate ignorance or  
13 reckless disregard of their truth or falsity. If Medicare approved  
14 the application, Medicare assigned the provider an identifying  
15 number, which enabled the provider to submit claims to Medicare for  
16 reimbursement for services provided to Medicare beneficiaries.

17 20. To qualify for reimbursement for hospice services, Medicare  
18 and Medi-Cal required a physician to certify that a beneficiary was  
19 terminally ill. Medicare and Medi-Cal considered a beneficiary to be  
20 "terminally ill" if the beneficiary's life expectancy was six months  
21 or less if the illness ran its normal course. Hospice services  
22 reimbursed by Medicare and Medi-Cal were palliative rather than  
23 curative in nature and included, but were not limited to, medications  
24 to manage pain symptoms, necessary medical equipment, and the  
25 provision of bereavement services to surviving family members.

26 21. If a beneficiary had a primary care physician ("PCP"),  
27 Medicare and Medi-Cal required the PCP and a physician at a hospice  
28 to certify in writing that the beneficiary was terminally ill with a

1 life expectancy of six months or less, if the terminal illness ran  
2 its normal course.

3 22. Medicare covered hospice services for those beneficiaries  
4 who were eligible for Medicare Part A (hospital-related services).  
5 When a Medicare beneficiary elected hospice coverage, the beneficiary  
6 waived all rights to Medicare Part B (covering outpatient physician  
7 services and procedures) coverage of services to treat or reverse the  
8 beneficiary's terminal illness while the beneficiary was on hospice.

9 23. A beneficiary could elect to receive hospice benefits for  
10 two periods of 90 days and, thereafter, additional services for  
11 periods of 60 days per period.

12 24. After the first 90 day period, for the beneficiary to  
13 continue to receive hospice benefits, Medicare required that a  
14 physician re-certify that the beneficiary was terminally ill and  
15 include clinic findings or other documentation supporting the  
16 diagnosis of terminal illness. For re-certifications on or after  
17 January 1, 2011, Medicare required a hospice physician or nurse  
18 practitioner to meet with the beneficiary in-person before signing a  
19 certification of terminal illness.

20 25. Most providers, including California Hospice, submitted  
21 their claims electronically pursuant to an agreement with Medicare  
22 that they would submit claims that were accurate, complete, and  
23 truthful.

24 B. THE FRAUDULENT SCHEME

25 26. Beginning in or about November 2007, and continuing through  
26 in or about June 2013, in Los Angeles County, within the Central  
27 District of California, and elsewhere, defendants VILLABROZA, PATROW,  
28 WIJEGONARATNA, HUANG, BRIONES, and MONTANA, together with others

1 known and unknown to the Grand Jury, knowingly, willfully, and with  
2 intent to defraud, executed and attempted to execute a scheme and  
3 artifice: (a) to defraud health care benefit programs, namely,  
4 Medicare and Medi-Cal, as to material matters in connection with the  
5 delivery of and payment for health care benefits, items, and  
6 services; and (b) to obtain money from Medicare and Medi-Cal by means  
7 of material false and fraudulent pretenses and representations and  
8 the concealment of material facts in connection with the delivery of  
9 and payment for health care benefits, items, and services.

10 27. The fraudulent scheme operated, in substance, in the  
11 following manner:

12 Efforts to Conceal Defendant VILLABROZA's Interest in California  
13 Hospice

14 a. On or about August 15, 2007, federal agents executed a  
15 search warrant at Medicare Plus. Shortly thereafter, defendant  
16 VILLABROZA learned that she was under investigation for health care  
17 fraud and the payment of illegal kickbacks for the referral of  
18 beneficiaries to Medicare Plus.

19 b. On or about November 29, 2007, defendant VILLABROZA  
20 purchased and financed the purchase of California Hospice. To  
21 conceal her ownership interest in California Hospice from federal  
22 agents investigating fraud at Medicare Plus, from Medicare, and from  
23 Medi-Cal, defendant VILLABROZA, in furtherance of the scheme to  
24 defraud, identified, and caused to be identified, defendant PATROW  
25 and co-conspirator E.C. as the co-owners of California Hospice on  
26 documents filed with the State of California, Medicare, Medi-Cal, and  
27 the Internal Revenue Service.

1 c. On or about January 22, 2008, defendants VILLABROZA  
2 and PATROW opened and caused to be opened the Wells Fargo Account for  
3 California Hospice. Defendant VILLABROZA funded the opening of the  
4 Wells Fargo Account with a check from Excel Plus.

5 d. Between in or about January 2008 and in or about July  
6 2009, defendant VILLABROZA funded California Hospice's operations by  
7 making deposits into the Wells Fargo Account. California Hospice  
8 generally recorded these deposits by defendant VILLABROZA in its  
9 books and records as "Loans to/from Owners."

10 e. On or about May 13, 2008, defendants VILLABROZA and  
11 PATROW submitted and caused to be submitted a Medicare provider  
12 application for California Hospice. The application, signed by  
13 defendant PATROW under penalty of perjury, was false because  
14 defendant VILLABROZA's ownership interest in California Hospice was  
15 not disclosed to Medicare as required by the application.

16 f. On or about August 19, 2008, defendant VILLABROZA pled  
17 guilty to participating in a scheme to defraud Medi-Cal operated out  
18 of Medicare Plus, in violation of 18 U.S.C. § 1347, in United States  
19 v. Villabroza, Case No. CR 08-782-GAF (Central District of  
20 California).

21 g. On or about April 16, 2009, defendants VILLABROZA and  
22 PATROW submitted and caused to be submitted a provider application to  
23 Medi-Cal, which defendant PATROW signed under penalty of perjury. As  
24 part of the application, and in furtherance of the scheme to defraud,  
25 defendant PATROW falsely certified that no owner, officer, director,  
26 employee or agent of California Hospice had been convicted of an  
27 offense involving fraud on a government program within the previous  
28 10 years. This certification was false because, as defendant PATROW

1 then well knew, defendant VILLABROZA was an owner, employee, and  
2 agent of California Hospice and had been convicted of health care  
3 fraud in Case No. CR 08-782-GAF. As a result of concealing defendant  
4 VILLABROZA's interest in California Hospice in this manner,  
5 defendants VILLABROZA and PATROW furthered the scheme to engage in  
6 health care fraud, for had defendant VILLABROZA's true interest in  
7 California Hospice been disclosed, California Hospice would not have  
8 received a Medi-Cal provider number and would not have been able to  
9 bill Medi-Cal fraudulently for health care services.

10 h. Between in or about July 2009 and in or about July  
11 2011, defendant VILLABROZA wrote checks from the Wells Fargo Account  
12 to Medicare Plus, Unicare, Excel Plus, and NHHP using funds obtained  
13 from Medicare and Medi-Cal for purportedly providing hospice-related  
14 services to beneficiaries. These checks were frequently recorded in  
15 California Hospice's books and records as "Loans to/from Owners."

16 i. On or about May 26, 2010, defendant VILLABROZA filed  
17 for Chapter 7 bankruptcy, in the Central District of California, Case  
18 No. 10-17107-RK (the "Villabroza Bankruptcy"). In connection with  
19 the Villabroza Bankruptcy, and in furtherance of the scheme to  
20 defraud, defendant VILLABROZA filed a petition, which she signed  
21 under penalty of perjury, in which defendant VILLABROZA, among other  
22 false statements, concealed and failed to disclose her ownership  
23 interest in California Hospice.

24 j. On or about July 24, 2011, in connection with  
25 defendant VILLABROZA's sentencing in Case No. CR 08-782-GAF, and in  
26 furtherance of the scheme to defraud, defendants VILLABROZA and  
27 PATROW submitted a letter to the United States District Court falsely  
28 stating that defendant VILLABROZA "has no ownership interest, nor

1 exercises any influence or control over California Hospice Care,  
2 LLC." This statement was false because, as defendants VILLABROZA and  
3 PATROW then well knew, defendant VILLABROZA was an owner of  
4 California Hospice and defendant VILLABROZA controlled the Wells  
5 Fargo Account.

6 k. While defendant VILLABROZA was serving the sentence in  
7 Case No. CR 08-782-GAF, defendant VILLABROZA continued to manage the  
8 operations of California Hospice, including through directions given  
9 during meetings with defendant PATROW and co-schemer E.C.

10 Recruitment of Beneficiaries and Fraudulent Hospice Admissions

11 l. California Hospice received few, if any, referrals  
12 from beneficiaries' PCPs. Rather, defendants VILLABROZA and PATROW  
13 paid patient recruiters, known as "marketers" or "cappers," including  
14 defendant MONTANA and co-schemers R.P., E.O., and D.G., illegal  
15 kickbacks in exchange for their referring beneficiaries to California  
16 Hospice. The amount of the kickback varied depending on the  
17 agreement between defendant VILLABROZA, defendant PATROW, and the  
18 marketer, but generally ranged between \$400 and \$1000 per month for  
19 each month a beneficiary referred by the marketer purportedly  
20 received hospice-related services.

21 m. Defendant MONTANA referred beneficiaries to California  
22 Hospice knowing that the beneficiaries were not terminally ill.

23 n. Defendants VILLABROZA and PATROW paid marketers in a  
24 variety of ways, including by checks drawn on the Wells Fargo  
25 Account, the accounts of Unicare and Unicare LLC, and personal bank  
26 accounts, as well as in cash.

27 o. For some of the marketers, including co-schemer R.P.,  
28 defendant VILLABROZA would decide whether to refer the beneficiary to

1 one of defendant VILLABROZA's home health care companies, such as  
2 Blue Diamond, and bill or cause Medicare or Medi-Cal to be billed for  
3 home health care services, or to refer the beneficiary to California  
4 Hospice, and bill or cause Medicare or Medi-Cal to be billed for  
5 hospice-related services.

6 p. Defendants VILLABROZA and PATROW referred to marketers  
7 as "business liaisons," "community liaisons," and "business  
8 development representatives" in an effort to disguise the illegal  
9 nature of their illegal kickback relationship with these marketers.

10 q. Defendants VILLABROZA and PATROW also paid medical  
11 professionals, including defendant WIJEGONARATNA and defendant  
12 BRIONES, illegal kickbacks for referring beneficiaries to California  
13 Hospice. A significant number of the beneficiaries referred by  
14 defendant WIJEGONARATNA were drug addicts who sought hospice care in  
15 order to obtain access to high-strength prescription pain killers.

16 r. If a recruited beneficiary was eligible to receive  
17 hospice benefits from Medicare or Medi-Cal, co-schemers E.C. or M.S.  
18 would direct an R.N., such as defendant BRIONES, to conduct an  
19 initial assessment. During these assessments, defendant BRIONES  
20 observed that virtually all of the beneficiaries referred to  
21 California Hospice were not terminally ill. Nevertheless, in an  
22 effort to make it appear that these beneficiaries suffered from very  
23 serious medical conditions, defendant BRIONES created false medical  
24 records, including "Functional Assessment Scales," in which defendant  
25 BRIONES falsely stated that the beneficiary could not speak.

26 s. Regardless of the outcome of the assessment performed  
27 by the R.N., defendant WIJEGONARATNA, defendant HUANG, or another  
28 California Hospice physician created a fraudulent diagnosis and

1 falsely certified that the beneficiary was terminally ill. In fact,  
2 and as defendants WIJEGONARATNA and HUANG then well knew from  
3 examining the beneficiaries and reviewing the beneficiaries' medical  
4 records, the overwhelming majority of California Hospice  
5 beneficiaries were not terminally ill.

6 t. Once the beneficiary was admitted to hospice,  
7 defendants VILLABROZA and PATROW caused California Hospice to  
8 fraudulently bill Medicare or Medi-Cal for purportedly providing  
9 hospice-related services, which were in fact unnecessary.

10 u. To convince beneficiaries to sign up for unnecessary  
11 hospice care, marketers, including defendant BRIONES, falsely  
12 promised beneficiaries that accepting services from California  
13 Hospice would not affect the beneficiaries' ability to receive  
14 services from the beneficiaries' primary care physician ("PCP").

15 v. For instance, in or about March 2011, defendant  
16 BRIONES falsely told beneficiary J.R. that J.R. could remain on the  
17 United Network of Organ Sharing ("UNOS") liver transplant list at the  
18 University of California, Los Angeles ("UCLA") even if J.R. elected  
19 to receive hospice services. Defendant WIJEGONARATNA, without  
20 consulting J.R.'s PCP, admitted J.R. to California Hospice. In or  
21 about June 2011, UCLA, believing that J.R. wished to receive  
22 palliative hospice care rather than a liver transplant, removed J.R.  
23 from the UNOS transplant list. Once J.R. learned of her removal from  
24 the UNOS transplant list, J.R. and J.R.'s spouse terminated hospice  
25 services and J.R. was eventually reinstated to the UNOS liver  
26 transplant list.

27 w. In response to California Hospice's high volume of  
28 claims, a Medicare contractor issued California Hospice Additional

1 Development Requests ("ADRs"), which sought further documentation to  
2 support claims for hospice-related services.

3 x. To support the fraudulent diagnoses of terminal  
4 illness made by defendant WIJEGONARATNA and defendant HUANG and to  
5 secure payments from Medicare, co-schemers E.C., M.S., K.C., J.L.,  
6 with the knowledge and assent of defendant PATROW, submitted and  
7 caused to be submitted to Medicare false information, including  
8 medical records they altered and caused to be altered in response to  
9 ADRs. In particular, and in effort to make it appear that  
10 beneficiaries were terminally ill, advanced directives were altered  
11 to make it appear that the beneficiaries did not want to receive CPR  
12 or other heroic measures when, in fact, the true advanced directives  
13 completed by the beneficiaries had stated that such life-saving  
14 procedures should be performed in the event of a medical crisis.  
15 Medicare submitted payment on claims subject to an ADR to the Wells  
16 Fargo Account controlled by defendants VILLABROZA and PATROW.

17 y. Between in or about March 2009 and in or about June  
18 2013, defendants VILLABROZA, PATROW, WIJEGONARATNA, HUANG, BRIONES,  
19 and MONTANA submitted and caused to be submitted false and fraudulent  
20 claims to Medicare and Medi-Cal for hospice-related services in the  
21 amounts of approximately \$6,861,346 and \$2,049,356, respectively.  
22 Based on these claims, Medicare and Medi-Cal paid California Hospice  
23 approximately \$5,464,568 and \$1,968,761, respectively. Payment on  
24 these false and fraudulent claims was made electronically to the  
25 Wells Fargo Account.

26 C. EXECUTIONS OF THE FRAUDULENT SCHEME

27 28. On or about the dates set forth below, within the Central  
28 District of California, and elsewhere, the following defendants,

1 together with others known and unknown to the Grand Jury, for the  
 2 purpose of executing the scheme to defraud described above, knowingly  
 3 and willfully submitted and caused to be submitted to Medicare the  
 4 following false and fraudulent claims for hospice-related services:

COUNT	DEFENDANTS	CLAIM NO.	DATE CLAIM SUBMITTED	AMOUNT OF CLAIM	BENEFICIARY
ONE	VILLABROZA, PATROW, WIJEGOONARATNA	21025100 636302	9/3/2010	\$6,258.98	A.D.
TWO	VILLABROZA, PATROW, WIJEGOONARATNA	21025100 636402	9/3/2010	\$6,258.98	F.O.
THREE	VILLABROZA, PATROW, WIJEGOONARATNA	21025100 636502	9/3/2010	\$6,258.98	L.O.
FOUR	VILLABROZA, PATROW, WIJEGOONARATNA, BRIONES	21030700 441302	11/3/2010	\$6,303.08	R.V.
FIVE	VILLABROZA, PATROW, WIJEGOONARATNA, BRIONES	21109600 012202	4/5/2011	\$6,783.58	J.R.
SIX	VILLABROZA, PATROW, WIJEGOONARATNA, BRIONES	21109700 705308	4/7/2011	\$5,097.35	E.U.
SEVEN	VILLABROZA, PATROW, WIJEGOONARATNA, MONTANA	21112600 15540	5/5/2011	\$6,292.35	F.L.
EIGHT	VILLABROZA, PATROW, WIJEGOONARATNA, MONTANA	21112600 154902	5/5/2011	\$5,892.35	E.R.
NINE	VILLABROZA, PATROW, WIJEGOONARATNA, BRIONES	21203000 050302	1/30/2012	\$5,753.40	M.H.
TEN	VILLABROZA, PATROW, HUANG,	21218700 664807	7/5/2012	\$6,676.50	S.C.
ELEVEN	VILLABROZA, PATROW, HUANG, BRIONES	21223600 358207	8/23/2012	\$6,754.16	A.G.

COUNT	DEFENDANTS	CLAIM NO.	DATE CLAIM SUBMITTED	AMOUNT OF CLAIM	BENEFICIARY
TWELVE	VILLABROZA, PATROW, HUANG, BRIONES	21231000 956307	11/5/2012	\$6,454.16	J.S.
THIRTEEN	VILLABROZA, PATROW, HUANG, BRIONES	21234001 049407	12/5/2012	\$6,582.70	S.F.

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COUNT FOURTEEN

[18 U.S.C. § 1956(h), 2(b)]

[Defendants VILLABROZA and PATROW]

29. The Grand Jury repeats and alleges paragraphs 1-27 of this Indictment as if fully set forth herein.

A. THE OBJECT OF THE CONSPIRACY

30. Beginning in or about June 2009, and continuing until in or about June 2013, in Los Angeles County, within the Central District of California, and elsewhere, defendants VILLABROZA and PATROW, and others known and unknown to the Grand Jury, knowingly combined, conspired, and agreed to commit the following offense against the United States: money laundering, in violation of Title 18, United States Code, Section 1956(a)(2)(A)(i), by conducting financial transactions and attempting to conduct financial transactions, affecting interstate commerce, with the proceeds of specified unlawful activity, namely, health care fraud, committed in violation of Title 18, United States Code, Section 1347, with the intent to promote the carrying on of such specified unlawful activity.

B. THE MANNER AND MEANS OF THE CONSPIRACY

31. The object of the conspiracy was carried out, and was to be carried out, in substance, as set forth in paragraphs 1-27 of this Indictment, and as follows:

a. Beginning in or about July 2009 and November 2009, respectively, Medicare and Medi-Cal began remitting payments to the Wells Fargo Account based on false and fraudulent claims for hospice-related services which defendants VILLABROZA and PATROW submitted and caused to be submitted on behalf of California Hospice. These claims were fraudulent because, among other things, as defendants VILLABROZA

1 and PATROW then well knew, virtually all of California Hospice's  
2 patients were not terminally ill, and these claims were supported in  
3 many instances by fabricated and false documents submitted in  
4 response to ADRs.

5           b. Using the proceeds of health care fraud, defendants  
6 VILLABROZA and PATROW paid recruiters, including defendants  
7 WIJEGONARATNA, BRIONES, and MONTANA, and co-conspirators D.G., E.O,  
8 and R.P., for referring beneficiaries to California Hospice.

9           c. Defendant VILLABROZA wrote checks from the Wells Fargo  
10 Account to accounts she controlled and maintained in the names of  
11 Unicare and Unicare LLC at Wells Fargo and Bank of America,  
12 respectively, and to defendant PATROW's personal account at Bank of  
13 America; and defendant VILLABROZA used the proceeds of the health  
14 care fraud offenses described herein to pay marketers, including  
15 defendant MONTANA and co-conspirators D.G. and R.P. and others, for  
16 referring new and additional beneficiaries to California Hospice.  
17 These checks were recorded in the books and records of California  
18 Hospice as "Loans to/from Owners" or "Professional Fees: Consulting."  
19 Some of the checks indicated the name of the marketer to be paid in  
20 the memo line.

21           d. Defendant PATROW wrote checks from the Wells Fargo  
22 Account to pay marketers, including defendants WIJEGONARATNA and  
23 MONTANA and co-conspirator D.G., for referring new and additional  
24 beneficiaries to California Hospice. Defendant PATROW also wrote  
25 checks from the Wells Fargo Account to herself and to co-conspirator  
26 E.C., which defendant PATROW cashed and then used the cash to pay  
27 California Hospice's marketers. The memo line on the cashed checks  
28

1 indicated that the checks were for "expenses," "services,"  
2 "reimbursement," or "loan payment."

3 e. Using the proceeds of health care fraud transferred  
4 from California Hospice, defendants VILLABROZA and PATROW further  
5 wrote checks and caused checks to be written from defendant PATROW's  
6 personal bank account at Bank of America to marketers, including co-  
7 conspirator R.P., or to the spouse of a marketer.

8 f. During the course of the conspiracy, defendants  
9 VILLABROZA and PATROW laundered at least \$700,000 from the proceeds  
10 of health care fraud to pay marketers.

11 C. OVERT ACTS

12 32. In furtherance of the conspiracy and to accomplish its  
13 object, defendants VILLABROZA and PATROW, together with others known  
14 and unknown to the Grand Jury, committed and willfully caused others  
15 to commit the following overt acts, among others, in the Central  
16 District of California, and elsewhere:

17 Overt Act No. 1: On or about June 10, 2009, defendant  
18 VILLABROZA signed check number 1431, drawn on the Wells Fargo  
19 Account, and made payable to co-conspirator D.G. in the amount \$400,  
20 with an entry in the memo line of "supplies."

21 Overt Act No. 2: On or about September 9, 2009, defendant  
22 PATROW signed check number 1626, drawn on the Wells Fargo Account,  
23 and made payable to defendant Montana in the amount \$2,200.

24 Overt Act No. 3: On or about October 12, 2009, defendant  
25 PATROW signed check number 1663, drawn on the Wells Fargo Account,  
26 and made payable to defendant Montana in the amount \$1,800.

1        Overt Act No. 4:        On or about October 26, 2009, defendant  
2 PATROW signed check number 1741, drawn on the Wells Fargo Account,  
3 and made payable to defendant Montana in the amount \$500.

4        Overt Act No. 5:        On or about December 14, 2009, defendant  
5 PATROW signed check number 1900, drawn on the Wells Fargo Account,  
6 and made payable to defendant Montana in the amount \$5,000.

7        Overt Act No. 6:        On or about December 28, 2009, defendant  
8 VILLABROZA signed check number 1264, drawn on the Wells Fargo  
9 Account, with a memo line of "[D.G.] - Oct. Pay," and made payable to  
10 Unicare in the amount of \$1,200.

11       Overt Act No. 7:        On or about January 13, 2010, defendant  
12 VILLABROZA signed check number 1270, drawn on the Wells Fargo  
13 Account, with a memo line of "[R.P.'s] Check," and made payable to  
14 Unicare in the amount of \$500.

15       Overt Act No. 8:        On or about January 22, 2010, defendant  
16 VILLABROZA signed check number 1151, drawn on the Wells Fargo  
17 Account, and made payable to Unicare in the amount of \$10,000.

18       Overt Act No. 9:        On or about January 22, 2010, defendant  
19 VILLABROZA signed check number 180, drawn on the Unicare bank account  
20 at Wells Fargo, and made payable to defendant Montana in the amount  
21 of \$1,000.

22       Overt Act No. 10:       On or about January 25, 2010, defendant  
23 PATROW signed check number 2069, drawn on the Wells Fargo Account,  
24 and made payable to co-conspirator D.G. in the amount \$2,450.

25       Overt Act No. 11:       On or about April 26, 2010, defendant  
26 VILLABROZA signed check number 1306, drawn on the Wells Fargo  
27 Account, and made payable to Unicare in the amount of \$7,500.

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1        Overt Act No. 12:    On or about May 1, 2010, defendant  
2 VILLABROZA signed check number 1050, drawn on the Unicare LLC bank  
3 account at Bank of America, and made payable to co-conspirator D.G.  
4 in the amount of \$800.

5        Overt Act No. 13:    On or about July 9, 2010, defendant PATROW  
6 signed check number 3002, drawn on the Wells Fargo Account, and made  
7 payable to defendant Montana in the amount \$2,000.

8        Overt Act No. 14:    On or about December 23, 2010, defendant  
9 PATROW signed check number 4002, drawn on the Wells Fargo Account,  
10 and made payable to defendant Montana in the amount \$1,900.

11       Overt Act No. 15:    On or about January 21, 2011, defendant  
12 VILLABROZA signed check number 1575, drawn on defendant PATROW's  
13 personal account at Bank of America, and made payable to co-  
14 conspirator R.P. in the amount of \$800.

15       Overt Act No. 16:    On or about February 16, 2011, defendant  
16 PATROW signed check number 1581, drawn on her personal Bank of  
17 America account, and made payable to G.P., the spouse of co-  
18 conspirator R.P., in the amount of \$1,300.

19       Overt Act No. 17:    On or about March 2, 2011, defendant PATROW  
20 signed check number 1584, drawn on her personal Bank of America  
21 account, and made payable to G.P., the spouse of co-conspirator R.P.,  
22 in the amount of \$800.

23       Overt Act No. 18:    On or about March 10, 2011, defendant PATROW  
24 signed check number 4340, drawn on the Wells Fargo Account, and made  
25 payable to defendant Montana in the amount \$1,100.

26       Overt Act No. 19:    On or about March 10, 2011, defendant PATROW  
27 signed check number 4336, drawn on the Wells Fargo Account, and made  
28 payable to co-conspirator D.G. in the amount \$600.

1        Overt Act No. 20:    On or about April 25, 2011, defendant PATROW  
2 signed check number 4594, drawn on the Wells Fargo Account, and made  
3 payable to defendant Wijegoonaratna in the amount \$5,380.65.

4        Overt Act No. 21:    On or about May 25, 2011, defendant PATROW  
5 signed check number 4716, drawn on the Wells Fargo Account, and made  
6 payable to defendant Wijegoonaratna in the amount \$6,450.

7        Overt Act No. 22:    On or about January 10, 2012, defendant  
8 PATROW signed check number 6845, drawn on the Wells Fargo Account,  
9 and made payable to co-conspirator D.G. in the amount \$600.

10       Overt Act No. 23:    On or about July 25, 2012, defendant PATROW  
11 signed check number 5267, drawn on the Wells Fargo Account, and made  
12 payable to herself in the amount of \$11,001.

13       Overt Act No. 24:    On or about December 20, 2012, defendant  
14 PATROW signed check number 5769, drawn on the Wells Fargo Account,  
15 and made payable to herself in the amount of \$15,000.

16       Overt Act No. 25:    On or about January 25, 2013, defendant  
17 PATROW signed check number 5892, drawn on the Wells Fargo Account,  
18 and made payable to herself in the amount of \$10,200.

19       Overt Act No. 26:    On or about March 4, 2013, defendant PATROW  
20 signed check number 7080, drawn on the Wells Fargo Account, and made  
21 payable to herself in the amount of \$5,000.

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## COUNTS FIFTEEN THROUGH TWENTY-FIVE

[18 U.S.C. § 1956(a)(1)(B)(i), 2(b)]

[Defendants VILLABROZA and PATROW]

33. The Grand Jury hereby repeats and alleges 1-27 and 31 of this Indictment as if fully set forth herein.

34. On or about the following dates, in Los Angeles County, within the Central District of California, and elsewhere, the following defendants, together with others known and unknown to the Grand Jury, knowing that the property involved in each of the financial transactions described below represented the proceeds of some form of unlawful activity, conducted and willfully caused others to conduct the following financial transactions, affecting interstate commerce, which transactions in fact involved the proceeds of specified unlawful activity, namely, health care fraud, in violation of Title 18, United States Code, Section 1347, knowing that each of the transactions was designed in whole and in part to conceal and disguise the nature location, source, ownership, and control of the proceeds of such specified unlawful activity:

COUNT	DEFENDANTS	DATE	FINANCIAL TRANSACTION
FIFTEEN	VILLABROZA	10/27/2009	Signed and deposited check number 1141, drawn on the Wells Fargo Account, in the amount of \$6,000, made payable to Unicare.
SIXTEEN	VILLABROZA	12/18/2009	Signed and deposited check number 1244, drawn on the Wells Fargo Account, in the amount of \$15,000, made payable to Unicare.
SEVENTEEN	VILLABROZA	12/28/2009	Signed and deposited check number 1264, drawn on the Wells Fargo Account, in the amount of \$1,200, made payable to Unicare.
EIGHTEEN	VILLABROZA	1/13/2010	Signed and deposited check number 1270, drawn on the Wells Fargo Account, in the amount of \$500, made payable to Unicare.

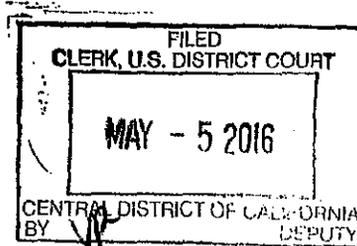
COUNT	DEFENDANTS	DATE	FINANCIAL TRANSACTION
NINETEEN	VILLABROZA	10/22/2010	Signed and deposited check number 1424, drawn on the Wells Fargo Account, in the amount of \$5,000, made payable to Unicare.
TWENTY	VILLABROZA	11/19/2010	Signed and deposited check number 1445, drawn on the Wells Fargo Account, in the amount of \$5,000, made payable to Unicare.
TWENTY-ONE	VILLABROZA	2/15/2011	Signed and deposited check number 1486, drawn on the Wells Fargo Account, in the amount of \$5,000, made payable to Unicare.
TWENTY-TWO	VILLABROZA, PATROW	1/21/2011	Defendant VILLABROZA signed check number 1575, drawn on defendant PATROW's personal Bank of America account, in the amount of \$800, and made payable to R.P.

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UNITED STATES DISTRICT COURT  
FOR THE CENTRAL DISTRICT OF CALIFORNIA

UNITED STATES OF AMERICA,

Plaintiff,

v.

BOYAO HUANG, M.D.,

Defendant.

No. CR 14-512-SJO (4)

VERDICT FORM AS TO DEFENDANT  
BOYAO HUANG, M.D.

1 COUNT TEN

2 We, the jury in the above-captioned case, unanimously find  
3 defendant Boyao Huang:

4  
5  Not Guilty

6  
7  Guilty

8  
9 of health care fraud as charged in Count Ten of the Indictment, based  
10 on a claim submitted to Medicare for hospice-related services for  
11 Sandie Crisp on or about July 5, 2012.

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COUNT ELEVEN

We, the jury in the above-captioned case, unanimously find  
defendant Boyao Huang:

           Not Guilty

  X   Guilty

of health care fraud as charged in Count Eleven of the Indictment,  
based on a claim submitted to Medicare for hospice-related services  
for Amalia Gonzalez on or about August 23, 2012.

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COUNT TWELVE

We, the jury in the above-captioned case, unanimously find  
defendant Boyao Huang:

\_\_\_\_\_ Not Guilty  
 Guilty

of health care fraud as charged in Count Twelve of the Indictment,  
based on a claim submitted to Medicare for hospice-related services  
for Jesse Staten on or about November 5, 2012.

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COUNT THIRTEEN

We, the jury in the above-captioned case, unanimously find  
defendant Boyao Huang:

\_\_\_\_ Not Guilty  
X Guilty

of health care fraud as charged in Count Thirteen of the Indictment,  
based on a claim submitted to Medicare for hospice-related services  
for Steven Fortier on or about December 5, 2012.

Date: May 5, 2016

REDACTED AS TO  
FOREPERSON'S  
SIGNATURE

United States District Court
Central District of California

UNITED STATES OF AMERICA vs.

Docket No. CR 14-00512 SJO-4

Defendant HUANG, Boyao

Social Security No. [blacked out]

akas: None.

(Last 4 digits)

JUDGMENT AND PROBATION/COMMITMENT ORDER

In the presence of the attorney for the government, the defendant appeared in person on this date.

Table with 3 columns: MONTH, DAY, YEAR. Row 1: August, 15, 2016

COUNSEL

John H. Hobson (Retained)

(Name of Counsel)

PLEA

[ ] GUILTY, and the court being satisfied that there is a factual basis for the plea. [ ] NOLO CONTENDERE [X] NOT GUILTY

FINDING

There being a finding/verdict of GUILTY, defendant has been convicted as charged of the offense(s) of: 18 U.S.C. § 1347 and 18 U.S.C. § 2: Health Care Fraud; Aiding and Abetting and Causing an Act to be Done as charged in Counts 10 through 13 of the Indictment

JUDGMENT AND PROB/ COMM ORDER

The Court asked whether there was any reason why judgment should not be pronounced. Because no sufficient cause to the contrary was shown, or appeared to the Court, the Court adjudged the defendant guilty as charged and convicted and ordered that: Pursuant to the Sentencing Reform Act of 1984, it is the judgment of the Court that the defendant is hereby committed to the custody of the Bureau of Prisons to be imprisoned for a term of:

It is ordered that the defendant shall pay to the United States a special assessment of \$400, which is due immediately. Any unpaid balance shall be due during the period of imprisonment, at the rate of not less than \$25 per quarter, and pursuant to the Bureau of Prisons' Inmate Financial Responsibility Program.

Defendant shall pay restitution in the total amount of \$1,344,204.56 pursuant to 18 U.S.C. § 3663A, to victims as set forth in a separate victim list prepared by the probation office which this Court adopts and which reflects the Court's determination of the amount of restitution due to each victim. The victim list, which shall be forwarded to the fiscal section of the clerk's office, shall remain confidential to protect the privacy interests of the victims.

The Court finds from a consideration of the record that the defendant's economic circumstances allow for restitution payments pursuant to the following schedule: A partial payment of \$700,000 shall be paid within 120 days of sentencing. The balance shall be due during the period of imprisonment, at the rate of not less than \$25 per quarter, and pursuant to the Bureau of Prisons' Inmate Financial Responsibility Program. If any amount of the restitution remains unpaid after release from custody, monthly payments of at least 10% of defendant's gross monthly income but not less than \$700, whichever is greater, shall be made during the period of supervised release. These payments shall begin 30 days after the commencement of supervision.

If the defendant makes a partial payment, each payee shall receive approximately proportional

USA vs. HUANG, Boyao

Docket No.: CR 14-00512 SJO-4

payment unless another priority order or percentage payment is specified in the judgment.

The defendant shall be held jointly and severally liable with the co-defendants for restitution as ordered in this judgment.

Defendant's liability for restitution ceases if and when defendant pays the total amount of restitution imposed as to the defendant as ordered in this judgment or when adding together the payments of all the below-listed co-schemers, the largest restitution obligation of any of these co-schemers is satisfied.

No restitution payment made by any of the other co-schemers in this case or any defendant in any of the related cases shall be credited to the defendant unless and until when adding together the payments of all the below-listed co-schemers, the largest restitution obligation of any of these defendants is satisfied.

1. United States v. Ramon Parayno, CR 15-548-SJO
2. United States v. Kristen Castaneda, CR 15-14-SJO
3. United States v. Janel Licayan, CR 15-04-SJO
4. United States v. Priscilla Villabroza, CR 14-512-SJO
5. United States v. Mubina Siddiqui, CR 15-719-SJO
6. United States v. Erwin Castillo, CR 15-18-SJO
7. United States v. Sharon Patrow, CR 14-512-SJO
8. United States v. Nancy Briones, CR 14-512-SJO
9. United States v. Sri Wijegoonaratna, CR 14-512-SJO
10. United States v. Boyao Huang, CR 14-512-SJO

Pursuant to 18 U.S.C. § 3612(f)(3)(A), interest on the restitution ordered is waived because the defendant does not have the ability to pay interest.

All fines are waived as it is found that the defendant does not have the ability to pay a fine in addition to restitution.

Pursuant to the Sentencing Reform Act of 1984, it is the judgment of the Court that the defendant, Boyao Huang, is hereby committed on Counts 10 through 13 of the Indictment to the custody of the Bureau of Prisons for a term of 48 months. This term consists of 48 months on each of Counts 10 through 13 of the Indictment, to be served concurrently.

Upon release from imprisonment, the defendant shall be placed on supervised release for a term of three years. This term consists of three years on each of Counts 10 through 13, all such terms to run concurrently under the following terms and conditions:

1. The defendant shall comply with the rules and regulations of the United States Probation Office,

USA vs. HUANG, Boyao

Docket No.: CR 14-00512 SJO-4

General Order 05-02, and General Order 01-05, including the three special conditions delineated in General Order 01-05.

2. The defendant shall not commit any violation of local, state, or Federal law or ordinance.
3. During the period of community supervision, the defendant shall pay the special assessment and restitution in accordance with this judgment's orders pertaining to such payment.
4. The defendant shall not be employed in any position that requires licensing and/or certification by any local, state, or federal agency without the prior written approval of the Probation Officer.
5. The defendant shall not engage, as whole or partial owner, employee or otherwise, in any business or profession that bills Medicare or Medi-Cal or any other publicly funded health care benefit program without the express written approval of the Probation Officer prior to engaging in such employment, business, or profession. Further, the defendant shall provide the Probation Officer with access to any and all business records, client lists, and other records pertaining to the operation of any business owned, in whole or in part, by the defendant, as directed by the Probation Officer.
6. The defendant shall apply all monies received from income tax refunds to the outstanding court-ordered financial obligation. In addition, the defendant shall apply all monies received from lottery winnings, inheritance, judgments and any anticipated or unexpected financial gains to the outstanding court-ordered financial obligation.
7. The defendant shall cooperate in the collection of a DNA sample from the defendant.

The drug testing condition mandated by statute is suspended based on the Court's determination that the defendant poses a low risk of future substance abuse.

It is further ordered that the defendant surrender himself to the institution designated by the Bureau of Prisons at or before 12 noon, Thursday, December 16, 2016. In the absence of such designation, the defendant shall report on or before the same date and time, to the United States Marshal located at the Roybal Federal Building, 255 East Temple Street, Los Angeles, California 90012.

The Court advises the Defendant of his right to appeal.

The Court recommends that the defendant shall be designated at the Lompoc Federal Penitentiary.

The bond shall be exonerated upon surrender.

USA vs. HUANG, Boyao

Docket No.: CR 14-00512 SJO-4

In addition to the special conditions of supervision imposed above, it is hereby ordered that the Standard Conditions of Probation and Supervised Release within this judgment be imposed. The Court may change the conditions of supervision, reduce or extend the period of supervision, and at any time during the supervision period or within the maximum period permitted by law, may issue a warrant and revoke supervision for a violation occurring during the supervision period.

*S. James Otero*

August 15, 2016

Date

S. James Otero

U. S. District Judge/Magistrate Judge

It is ordered that the Clerk deliver a copy of this Judgment and Probation/Commitment Order to the U.S. Marshal or other qualified officer.

Clerk, U.S. District Court

August 15, 2016

Filed Date

By Victor Paul Cruz

Deputy Clerk

*Victor Paul Cruz*

The defendant shall comply with the standard conditions that have been adopted by this court (set forth below).

**STANDARD CONDITIONS OF PROBATION AND SUPERVISED RELEASE**

While the defendant is on probation or supervised release pursuant to this judgment:

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>1. The defendant shall not commit another Federal, state or local crime;</li> <li>2. the defendant shall not leave the judicial district without the written permission of the court or probation officer;</li> <li>3. the defendant shall report to the probation officer as directed by the court or probation officer and shall submit a truthful and complete written report within the first five days of each month;</li> <li>4. the defendant shall answer truthfully all inquiries by the probation officer and follow the instructions of the probation officer;</li> <li>5. the defendant shall support his or her dependents and meet other family responsibilities;</li> <li>6. the defendant shall work regularly at a lawful occupation unless excused by the probation officer for schooling, training, or other acceptable reasons;</li> <li>7. the defendant shall notify the probation officer at least 10 days prior to any change in residence or employment;</li> <li>8. the defendant shall refrain from excessive use of alcohol and shall not purchase, possess, use, distribute, or administer any narcotic or other controlled substance, or any paraphernalia related to such substances, except as prescribed by a physician;</li> <li>9. the defendant shall not frequent places where controlled substances are illegally sold, used, distributed or administered;</li> </ol> | <ol style="list-style-type: none"> <li>10. the defendant shall not associate with any persons engaged in criminal activity, and shall not associate with any person convicted of a felony unless granted permission to do so by the probation officer;</li> <li>11. the defendant shall permit a probation officer to visit him or her at any time at home or elsewhere and shall permit confiscation of any contraband observed in plain view by the probation officer;</li> <li>12. the defendant shall notify the probation officer within 72 hours of being arrested or questioned by a law enforcement officer;</li> <li>13. the defendant shall not enter into any agreement to act as an informer or a special agent of a law enforcement agency without the permission of the court;</li> <li>14. as directed by the probation officer, the defendant shall notify third parties of risks that may be occasioned by the defendant's criminal record or personal history or characteristics, and shall permit the probation officer to make such notifications and to conform the defendant's compliance with such notification requirement;</li> <li>15. the defendant shall, upon release from any period of custody, report to the probation officer within 72 hours;</li> <li>16. and, <u>for felony cases only</u>: not possess a firearm, destructive device, or any other dangerous weapon.</li> </ol> |
|--|--|

The defendant will also comply with the following special conditions pursuant to General Order 01-05 (set forth below).

USA vs. HUANG, Boyao

Docket No.: CR 14-00512 SJO-4

**STATUTORY PROVISIONS PERTAINING TO PAYMENT AND COLLECTION OF FINANCIAL SANCTIONS**

The defendant shall pay interest on a fine or restitution of more than \$2,500, unless the court waives interest or unless the fine or restitution is paid in full before the fifteenth (15<sup>th</sup>) day after the date of the judgment pursuant to 18 U.S.C. §3612(f)(1). Payments may be subject to penalties for default and delinquency pursuant to 18 U.S.C. §3612(g). Interest and penalties pertaining to restitution, however, are not applicable for offenses completed prior to April 24, 1996.

If all or any portion of a fine or restitution ordered remains unpaid after the termination of supervision, the defendant shall pay the balance as directed by the United States Attorney's Office. 18 U.S.C. §3613.

The defendant shall notify the United States Attorney within thirty (30) days of any change in the defendant's mailing address or residence until all fines, restitution, costs, and special assessments are paid in full. 18 U.S.C. §3612(b)(1)(F).

The defendant shall notify the Court through the Probation Office, and notify the United States Attorney of any material change in the defendant's economic circumstances that might affect the defendant's ability to pay a fine or restitution, as required by 18 U.S.C. §3664(k). The Court may also accept such notification from the government or the victim, and may, on its own motion or that of a party or the victim, adjust the manner of payment of a fine or restitution-pursuant to 18 U.S.C. §3664(k). See also 18 U.S.C. §3572(d)(3) and for probation 18 U.S.C. §3563(a)(7).

Payments shall be applied in the following order:

1. Special assessments pursuant to 18 U.S.C. §3013;
2. Restitution, in this sequence:
  - Private victims (individual and corporate),
  - Providers of compensation to private victims,
  - The United States as victim;
3. Fine;
4. Community restitution, pursuant to 18 U.S.C. §3663(c); and
5. Other penalties and costs.

**SPECIAL CONDITIONS FOR PROBATION AND SUPERVISED RELEASE**

As directed by the Probation Officer, the defendant shall provide to the Probation Officer: (1) a signed release authorizing credit report inquiries; (2) federal and state income tax returns or a signed release authorizing their disclosure; and (3) an accurate financial statement, with supporting documentation as to all assets, income and expenses of the defendant. In addition, the defendant shall not apply for any loan or open any line of credit without prior approval of the Probation Officer.

The defendant shall maintain one personal checking account. All of defendant's income, "monetary gains," or other pecuniary proceeds shall be deposited into this account, which shall be used for payment of all personal expenses. Records of all other bank accounts, including any business accounts, shall be disclosed to the Probation Officer upon request.

The defendant shall not transfer, sell, give away, or otherwise convey any asset with a fair market value in excess of \$500 without approval of the Probation Officer until all financial obligations imposed by the Court have been satisfied in full.

These conditions are in addition to any other conditions imposed by this judgment.

USA vs. HUANG, Boyao

Docket No.: CR 14-00512 SJO-4

**RETURN**

I have executed the within Judgment and Commitment as follows:

Defendant delivered on \_\_\_\_\_ to \_\_\_\_\_

Defendant noted on appeal on \_\_\_\_\_

Defendant released on \_\_\_\_\_

Mandate issued on \_\_\_\_\_

Defendant's appeal determined on \_\_\_\_\_

Defendant delivered on \_\_\_\_\_ to \_\_\_\_\_

at \_\_\_\_\_

the institution designated by the Bureau of Prisons, with a certified copy of the within Judgment and Commitment.

United States Marshal

By \_\_\_\_\_

Date \_\_\_\_\_

Deputy Marshal

**CERTIFICATE**

I hereby attest and certify this date that the foregoing document is a full, true and correct copy of the original on file in my office, and in my legal custody.

Clerk, U.S. District Court

By \_\_\_\_\_

Filed Date \_\_\_\_\_

Deputy Clerk

**FOR U.S. PROBATION OFFICE USE ONLY**

Upon a finding of violation of probation or supervised release, I understand that the court may (1) revoke supervision, (2) extend the term of supervision, and/or (3) modify the conditions of supervision.

These conditions have been read to me. I fully understand the conditions and have been provided a copy of them.

(Signed) \_\_\_\_\_  
Defendant

\_\_\_\_\_ Date

\_\_\_\_\_ U. S. Probation Officer/Designated Witness

\_\_\_\_\_ Date

**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

<b>In the Matter of the Accusation</b>	)	
<b>Against:</b>	)	
	)	
<b>BOYAO HUANG, M.D.</b>	)	<b>Case No. 8002015011398</b>
	)	
<b>Physician's and Surgeon's</b>	)	
<b>Certificate No. A 77036</b>	)	
	)	
<b>Respondent</b>	)	
_____	)	

**DECISION AND ORDER**

**The attached Stipulated Surrender of License and Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.**

**This Decision shall become effective at 5:00 p.m. on December 30, 2016.**

**IT IS SO ORDERED December 23, 2016.**

**MEDICAL BOARD OF CALIFORNIA**

By:   
\_\_\_\_\_  
**Kimberly Kirchmeyer**  
**Executive Director**

1 KAMALA D. HARRIS  
Attorney General of California  
2 JUDITH T. ALVARADO  
Supervising Deputy Attorney General  
3 BRIAN D. BILL  
Deputy Attorney General  
4 State Bar No. 239146  
California Department of Justice  
5 300 So. Spring Street, Suite 1702  
Los Angeles, CA 90013  
6 Telephone: (213) 897-9474  
Facsimile: (213) 897-9395  
7 *Attorneys for Complainant*

8 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
9 **DEPARTMENT OF CONSUMER AFFAIRS**  
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

12 **BOYAO HUANG, M.D.**  
13 **2275 Huntington Drive, #781**  
**San Marino, CA 91108**

14 **Physician's and Surgeon's Certificate No.**  
15 **A77036,**

16 Respondent.

Case No. 800-2015-011398

OAH No. 2016091068

**STIPULATED SURRENDER OF**  
**LICENSE AND ORDER**

17 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
18 entitled proceedings that the following matters are true:

19 PARTIES

20 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
21 of California (Board). She brought this action solely in her official capacity and is represented in  
22 this matter by Kamala D. Harris, Attorney General of the State of California, by Brian D. Bill,  
23 Deputy Attorney General.

24 2. BOYAO HUANG, M.D. (Respondent) is represented in this proceeding by attorney  
25 Corey E. Krueger, whose address is 245 S. Los Robles Ave., Ste. 600, Pasadena, CA 91101.

26 3. On or about November 7, 2001, the Board issued Physician's and Surgeon's  
27 Certificate No. A77036 to BOYAO HUANG, M.D. (Respondent). The Physician's and Surgeon's  
28 Certificate was in full force and effect at all times relevant to the charges brought in Accusation

1 No. 800-2015-011398 and will expire on February 28, 2017, unless renewed.

2 JURISDICTION

3 4. Accusation No. 800-2015-011398 was filed before the Board, and is currently  
4 pending against Respondent. The Accusation and all other statutorily required documents were  
5 properly served on Respondent on August 16, 2016. Respondent timely filed his Notice of  
6 Defense contesting the Accusation. A copy of Accusation No. 800-2015-011398 is attached as  
7 Exhibit A and incorporated by reference.

8 ADVISEMENT AND WAIVERS

9 5. Respondent has carefully read, fully discussed with counsel, and understands the  
10 charges and allegations in Accusation No. 800-2015-011398. Respondent also has carefully read,  
11 fully discussed with counsel, and understands the effects of this Stipulated Surrender of License  
12 and Order.

13 6. Respondent is fully aware of his legal rights in this matter, including the right to a  
14 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine  
15 the witnesses against him; the right to present evidence and to testify on his own behalf; the right  
16 to the issuance of subpoenas to compel the attendance of witnesses and the production of  
17 documents; the right to reconsideration and court review of an adverse decision; and all other  
18 rights accorded by the California Administrative Procedure Act and other applicable laws.

19 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and  
20 every right set forth above.

21 CULPABILITY

22 8. Respondent admits the truth of each and every charge and allegation in Accusation  
23 No. 800-2015-011398, agrees that cause exists for discipline and hereby surrenders his  
24 Physician's and Surgeon's Certificate No. A77036 for the Board's formal acceptance.

25 9. Respondent understands that by signing this stipulation he enables the Board to issue  
26 an order accepting the surrender of his Physician's and Surgeon's Certificate without further  
27 process.

28 //



1 the State of California, the Board shall treat it as a petition for reinstatement. Respondent must  
2 comply with all the laws, regulations and procedures for reinstatement of a revoked license in  
3 effect at the time the petition is filed, and all of the charges and allegations contained in  
4 Accusation No. 800-2015-011398 shall be deemed to be true, correct and admitted by Respondent  
5 when the Board determines whether to grant or deny the petition.

6 ACCEPTANCE

7 I have carefully read the above Stipulated Surrender of License and Order and have fully  
8 discussed it with my attorney, Corey E. Krueger. I understand the stipulation and the effect it will  
9 have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Surrender of  
10 License and Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
11 Decision and Order of the Medical Board of California.

12  
13  
14 DATED: \_\_\_\_\_

BOYAO HUANG, M.D.  
*Respondent*

15  
16  
17 I have read and fully discussed with Respondent BOYAO HUANG, M.D. the terms and  
18 conditions and other matters contained in this Stipulated Surrender of License and Order. I  
19 approve its form and content.

20  
21  
22 DATED: \_\_\_\_\_

COREY E. KRUEGER  
*Attorney for Respondent*

23  
24  
25 //

26 //

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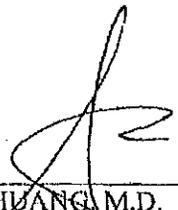
28 //

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2 comply with all the laws, regulations and procedures for reinstatement of a revoked license in  
3 effect at the time the petition is filed, and all of the charges and allegations contained in  
4 Accusation No. 800-2015-011398 shall be deemed to be true, correct and admitted by Respondent  
5 when the Board determines whether to grant or deny the petition.

6 ACCEPTANCE

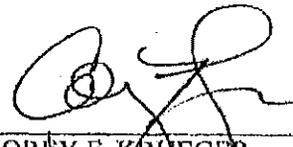
7 I have carefully read the above Stipulated Surrender of License and Order and have fully  
8 discussed it with my attorney, Corey E. Krueger. I understand the stipulation and the effect it will  
9 have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Surrender of  
10 License and Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
11 Decision and Order of the Medical Board of California.

12  
13  
14 DATED: 11-21-2016

  
15 BOYAO HUANG, M.D.  
16 Respondent

17 I have read and fully discussed with Respondent BOYAO HUANG, M.D. the terms and  
18 conditions and other matters contained in this Stipulated Surrender of License and Order. I  
19 approve its form and content.

20  
21 DATED: 11/21/2016

  
22 COREY E. KRUEGER  
23 Attorney for Respondent

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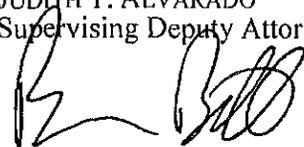
ENDORSEMENT

The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

Dated: 11-21-16

Respectfully submitted,

KAMALA D. HARRIS  
Attorney General of California  
JUDITH T. ALVARADO  
Supervising Deputy Attorney General



BRIAN D. BILL  
Deputy Attorney General  
*Attorneys for Complainant*

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**Exhibit A**

**Accusation No. 800-2015-011398**

1 KAMALA D. HARRIS  
Attorney General of California  
2 JUDITH T. ALVARADO  
Supervising Deputy Attorney General  
3 BRIAN D. BILL  
Deputy Attorney General  
4 State Bar No. 239146  
California Department of Justice  
5 300 So. Spring Street, Suite 1702  
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6 Telephone: (213) 897-9474  
Facsimile: (213) 897-9395  
7 *Attorneys for Complainant*

FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO August 16, 2016  
BY: *Richard A. [Signature]* ANALYST

8 **BEFORE THE**  
9 **MEDICAL BOARD OF CALIFORNIA**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 800-2015-011398

12 **Boyao Huang, M.D.**  
13 **2275 Huntington Drive, #781**  
**San Marino, CA 91108**

**A C C U S A T I O N**

14 **Physician's and Surgeon's Certificate**  
15 **No. A77036,**

16 Respondent.

17  
18 Complainant alleges:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official  
21 capacity as the Executive Director of the Medical Board of California, Department of Consumer  
22 Affairs (Board).

23 2. On or about November 7, 2001, the Medical Board issued Physician's and Surgeon's  
24 Certificate Number A77036 to Boyao Huang, M.D. (Respondent). The Physician's and Surgeon's  
25 Certificate was in full force and effect at all times relevant to the charges brought herein and will  
26 expire on February 28, 2017, unless renewed.

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28 //

JURISDICTION

1  
2       3.    This Accusation is brought before the Board, under the authority of the following  
3 laws. All section references are to the Business and Professions Code unless otherwise indicated.

4       4.    Section 2227 of the Code states:

5           “(a) A licensee whose matter has been heard by an administrative law judge of the Medical  
6 Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default  
7 has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary  
8 action with the board, may, in accordance with the provisions of this chapter:

9           “(1) Have his or her license revoked upon order of the board.

10          “(2) Have his or her right to practice suspended for a period not to exceed one year upon  
11 order of the board.

12          “(3) Be placed on probation and be required to pay the costs of probation monitoring upon  
13 order of the board.

14          “(4) Be publicly reprimanded by the board. The public reprimand may include a  
15 requirement that the licensee complete relevant educational courses approved by the board.

16          “(5) Have any other action taken in relation to discipline as part of an order of probation, as  
17 the board or an administrative law judge may deem proper.

18          “(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical  
19 review or advisory conferences, professional competency examinations, continuing education  
20 activities, and cost reimbursement associated therewith that are agreed to with the board and  
21 successfully completed by the licensee, or other matters made confidential or privileged by  
22 existing law, is deemed public, and shall be made available to the public by the board pursuant to  
23 Section 803.1.”

24       5.    Section 2234 of the Code, states:

25           “The board shall take action against any licensee who is charged with unprofessional  
26 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not  
27 limited to, the following:

28           “(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the

1 violation of, or conspiring to violate any provision of this chapter.

2 “... ”

3 “(e) The commission of any act involving dishonesty or corruption that is substantially  
4 related to the qualifications, functions, or duties of a physician and surgeon.

5 “... ”

6 6. Section 2236 of the Code states:

7 “(a) The conviction of any offense substantially related to the qualifications, functions, or  
8 duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this  
9 chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive  
10 evidence only of the fact that the conviction occurred.

11 “... ”

12 “(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to  
13 be a conviction within the meaning of this section and Section 2236.1. The record of conviction  
14 shall be conclusive evidence of the fact that the conviction occurred.”

15 7. California Code of Regulations, title 16, section 1360, states:

16 “For the purposes of denial, suspension or revocation of a license, certificate or permit  
17 pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be  
18 considered to be substantially related to the qualifications, functions or duties of a person holding  
19 a license, certificate or permit under the Medical Practice Act if to a substantial degree it  
20 evidences present or potential unfitness of a person holding a license, certificate or permit to  
21 perform the functions authorized by the license, certificate or permit in a manner consistent with  
22 the public health, safety or welfare. Such crimes or acts shall include but not be limited to the  
23 following: Violating or attempting to violate, directly or indirectly, or assisting in or abetting the  
24 violation of, or conspiring to violate any provision of the Medical Practice Act.”

25 8. Section 490 of the Code provides, in pertinent part, that a board may suspend or  
26 revoke a license on the ground that the licensee has been convicted of a crime substantially related  
27 to the qualifications, functions, or duties of the business or profession for which the license was  
28 issued.

1           9.     Section 493 of the Code states:

2           “Notwithstanding any other provision of law, in a proceeding conducted by a board within  
3 the department pursuant to law to deny an application for a license or to suspend or revoke a  
4 license or otherwise take disciplinary action against a person who holds a license, upon the  
5 ground that the applicant or the licensee has been convicted of a crime substantially related to the  
6 qualifications, functions, and duties of the licensee in question, the record of conviction of the  
7 crime shall be conclusive evidence of the fact that the conviction occurred, but only of that fact,  
8 and the board may inquire into the circumstances surrounding the commission of the crime in  
9 order to fix the degree of discipline or to determine if the conviction is substantially related to the  
10 qualifications, functions, and duties of the licensee in question.

11           “As used in this section, ‘license’ includes ‘certificate,’ ‘permit,’ ‘authority,’ and  
12 ‘registration.’”

13           10.    Section 810 of the Code states:

14           “(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including  
15 suspension or revocation of a license or certificate, for a health care professional to do any of the  
16 following in connection with his or her professional activities:

17                   “(1) Knowingly present or cause to be presented any false or fraudulent claim  
18 for the payment of a loss under a contract of insurance.

19                   “(2) Knowingly prepare, make, or subscribe any writing, with intent to present  
20 or use the same, or to allow it to be presented or used in support of any false or  
21 fraudulent claim.

22           “(b) It shall constitute cause for revocation or suspension of a license or certificate for a  
23 health care professional to engage in any conduct prohibited under Section 1871.4 of the  
24 Insurance Code or Section 549 or 550 of the Penal Code.

25           “(c) (1) It shall constitute cause for automatic suspension of a license or certificate issued  
26 pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section  
27 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section  
28 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the

1 Osteopathic Act, if a licensee or certificate holder has been convicted of any felony involving  
2 fraud committed by the licensee or certificate holder in conjunction with providing benefits  
3 covered by worker's compensation insurance, or has been convicted of any felony involving  
4 Medi-Cal fraud committed by the licensee or certificate holder in conjunction with the Medi-Cal  
5 program, including the Denti-Cal element of the Medi-Cal program, pursuant to Chapter 7  
6 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of Part 3 of  
7 Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing  
8 to determine whether or not the license or certificate shall be suspended, revoked, or some other  
9 disposition shall be considered, including, but not limited to, revocation with the opportunity to  
10 petition for reinstatement, suspension, or other limitations on the license or certificate as the board  
11 deems appropriate.

12           “(2) It shall constitute cause for automatic suspension and for revocation of a  
13 license or certificate issued pursuant to Chapter 4 (commencing with Section 1600),  
14 Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section  
15 2900), Chapter 7 (commencing with Section 3000); or Chapter 9 (commencing with  
16 Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a  
17 licensee or certificate holder has more than one conviction of any felony arising out of  
18 separate prosecutions involving fraud committed by the licensee or certificate holder  
19 in conjunction with providing benefits covered by worker's compensation insurance,  
20 or in conjunction with the Medi-Cal program, including the Denti-Cal element of the  
21 Medi-Cal program pursuant to Chapter 7 (commencing with Section 14000), or  
22 Chapter 8 (commencing with Section 14200), of Part 3 of Division 9 of the Welfare  
23 and Institutions Code. The board shall convene a disciplinary hearing to revoke the  
24 license or certificate and an order of revocation shall be issued unless the board finds  
25 mitigating circumstances to order some other disposition.

26           “(3) It is the intent of the Legislature that paragraph (2) apply to a licensee or  
27 certificate holder who has one or more convictions prior to January 1, 2004, as  
28 provided in this subdivision.



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**SECOND CAUSE FOR DISCIPLINE**

**(Commission of Acts Involving Dishonesty)**

15. Respondent Boyao Huang, M.D. is subject to disciplinary action under sections 2234, subdivision (e), and 810, of the Code, in that Respondent was convicted of crimes substantially related to the qualifications, functions, or duties of a physician, as more particularly alleged in paragraphs 11 through 14.

**THIRD CAUSE FOR DISCIPLINE**

**(Unprofessional Conduct)**

16. Respondent Boyao Huang, M.D. is subject to disciplinary action under sections 2234 and 810 of the Code, in that Respondent was convicted of crimes substantially related to the qualifications, functions, or duties of a physician, as more particularly alleged in paragraphs 11 through 14.

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**PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

1. Revoking or suspending Physician's and Surgeon's Certificate Number A77036, issued to Boyao Huang, M.D.;
2. Revoking, suspending or denying approval of Boyao Huang, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;
3. Ordering Boyao Huang, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: August 16, 2016



KIMBERLY KIRCHMEYER  
Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

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