

MAERENE DILLARD took or used money from a bank account at First United Bank and Trust Company with account number ending in 0291 belonging to P.P., by using a check drawn on that account which she wrote as payable to herself and signed using P.P.'s name, on one or more occasions, thereby using P.P.'s funds, assets, or property, to benefit herself or any person other than P.P., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT TWO (2):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 14th day of June 2023 through and including the 16th day of June 2023, in Tulsa County, State of Oklahoma, **LAROSA MAERENE DILLARD**, knowingly, willfully, and unlawfully commit the felony crime of Exploitation of Elderly Persons or Disabled Adults, by knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of P.P., an elderly person or disabled adult with whom **LAROSA MAERENE DILLARD** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive P.P. of the use, benefit, or possession of P.P.'s funds, assets, or property, or to benefit someone other than P.P., to wit: **LAROSA MAERENE DILLARD** took or used money from a bank account at First United Bank and Trust Company with account number ending in 0291 belonging to P.P., by using a check drawn on that account which she wrote as payable to herself and signed using P.P.'s name, on one or more occasions, thereby using P.P.'s funds, assets, or property, to benefit herself or any person other than P.P., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT THREE (3):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 16th day of June 2023 through and including the 19th day of June 2023, in Tulsa County, State of Oklahoma, **LAROSA MAERENE DILLARD**, knowingly, willfully, and unlawfully commit the felony crime of Exploitation of Elderly Persons or Disabled Adults, by knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of P.P., an elderly person or disabled adult with whom **LAROSA MAERENE DILLARD** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive P.P. of the use, benefit, or possession of P.P.'s funds, assets, or property, or to benefit someone other than P.P., to wit: **LAROSA MAERENE DILLARD** took or used money from a bank account at First United Bank and Trust Company with account number ending in 0291 belonging to P.P., by using a check drawn on that account which she wrote as payable to herself and signed using P.P.'s name, on one or more occasions, thereby using P.P.'s funds, assets, or property, to benefit herself or any person other than P.P., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT FOUR (4):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 18th day of June 2023 through and including the 27th day of June 2023, in Tulsa County, State of Oklahoma, **LAROSA MAERENE DILLARD**, knowingly, willfully, and unlawfully commit the felony crime of Exploitation of Elderly Persons or Disabled Adults, by

knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of P.P., an elderly person or disabled adult with whom **LAROSA MAERENE DILLARD** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive P.P. of the use, benefit, or possession of P.P.'s funds, assets, or property, or to benefit someone other than P.P., to wit: **LAROSA MAERENE DILLARD** took or used money from a bank account at First United Bank and Trust Company with account number ending in 0291 belonging to P.P., by using a check drawn on that account which she wrote as payable to herself and signed using P.P.'s name, on one or more occasions, thereby using P.P.'s funds, assets, or property, to benefit herself or any person other than P.P., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

GENTNER DRUMMOND

ATTORNEY GENERAL OF OKLAHOMA

By:


DONALD PALIK
Assistant Attorney General
15 W. 6th Street, Suite 1000
Tulsa, OK 74119
(918) 581-2745 Telephone
(918) 938-6348 Facsimile
Donald.Palik@oag.ok.gov
OBA#18795

STATE OF OKLAHOMA)
COUNTY OF TULSA)

I, Donald Palik, being duly sworn on my oath, declare that the statements set forth in the above Information, are true and correct to the best of my knowledge and belief.


Donald Palik
Assistant Attorney General

Subscribed and sworn to before me this 24th day of March, 2026.




NOTARY PUBLIC

TRUONG
1498

IN THE DISTRICT COURT OF OKLAHOMA COUNTY
STATE OF OKLAHOMA

CF- 2026- 1498

STATE OF OKLAHOMA,
Plaintiff,

vs.

PEGGY JOYCE ANDERSON,
SSN: XXX-XX-4583
DOB: XX/XX/1960

Defendant.

FILED IN DISTRICT COURT
OKLAHOMA COUNTY

Case Number:

MAR 26 2026

RICK WARREN
COURT CLERK

01

INFORMATION

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

COUNT 1: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between September 20, 2024 through January 8, 2025, in Oklahoma County, Oklahoma, Defendant **PEGGY J. ANDERSON** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims for payment in the aggregate amount of more than \$2,500.00 for Medicaid services billed but not rendered in violation of Title 56 O.S. Section 1005(A)(1).

All in violation of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

Dated this 26th, day of March, 2026

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

BY:

Candace Arnold

Candace Arnold, OBA # 22050
Assistant Attorney General
313 NE 21st Street
Oklahoma City, OK 73105-3207

State of Oklahoma)
County of Oklahoma)

I, Candace Arnold, being duly sworn upon oath, state that I have read the above and foregoing information and know the contents thereof, and that the facts stated herein are true to the best of my knowledge and belief.

Candace Arnold

Assistant Attorney General
Medicaid Fraud Control Unit

Subscribed and sworn to before me this 22nd, day of March, 2026.

Jenny Juvera
Notary Public



1494
Savage

IN THE DISTRICT COURT OF OKLAHOMA COUNTY
STATE OF OKLAHOMA

CF-2026-1494

THE STATE OF OKLAHOMA)
)
Plaintiff,)
)
v.)
)
CHRISTA LEE ROGOFF)
DOB: xx-xx, 1982)
SSN: xxx-xx-9768)
)
Defendant.)

Case No. FILED IN DISTRICT COURT
OKLAHOMA COUNTY

MAR 26 2026
KATHY WALKER
COURT CLERK
01 _____

INFORMATION

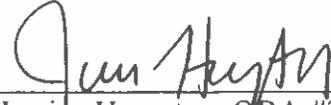
In the name and by the authority of the State of Oklahoma, GENTNER DRUMMOND, duly elected, qualified, and acting Attorney General of the State of Oklahoma, and on his official oath informs the District Court that:

**COUNT 1: NEGLECT BY CARETAKER,
21 O.S. § 843.1(A)(1), a FELONY,**

On or about the 1st day of March, 2025, in Oklahoma County, Oklahoma, CHRISTA LEE ROGOFF, while working as Habilitation Training Specialist with the Chickasha Opportunity Center, acting as caretaker while in a community based setting, willfully and knowingly neglected to use wheelchair restraints for E.B., a vulnerable adult entrusted to her care, while instructing another vulnerable adult, C.B., also in the her care, to push said wheelchair down an escalator, causing E.B. to fall from the top to the bottom of said escalator, causing severe injuries to E.B., in Oklahoma County, Oklahoma, contrary to the provisions of section 843.1(A)(1) of Title 21 of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

By:



Jessica Hampton, OBA #32740
Assistant Attorney General
313 N.E. 21st Street
Oklahoma City, OK 73105
Jessica.Hampton@oag.ok.gov
(405) 522-0450 Telephone

STATE OF OKLAHOMA)
)
COUNTY OF OKLAHOMA)

I, Jessica Hampton, being duly sworn on my oath, declare that the statements set forth in the above Information, are true and correct to the best of my knowledge and belief.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

By: Jess Hampton
Jessica Hampton
Assistant Attorney General

Subscribe and sworn to before me this 26th day of March, 2026.

My commission expires: Feb 27, 2026
Jenny Juvera
NOTARY PUBLIC



Green
1495

IN THE DISTRICT COURT OF OKLAHOMA COUNTY
STATE OF OKLAHOMA

FILED IN DISTRICT COURT
OKLAHOMA COUNTY

MAR 26 2026

KATHY GREEN
COURT CLERK

61

STATE OF OKLAHOMA,)
)
Plaintiff,)
)
vs.)
)
JANICE MAE CLIVER,)
SSN: XXX-XX-8375)
DOB: XX/XX/1953)
Alias: Janice Dudash)
Alias: Janice McDonald)
)
Defendant.)

Case Number: **CF-2026-1495**

INFORMATION

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

COUNT 1: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between November 1, 2024 through November 30, 2025, in Oklahoma County, Oklahoma, Defendant **JANICE MAE CLIVER** committed the crime of **MEDICAID FRAUD**, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims for payment in the aggregate amount of more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 2: IDENTITY THEFT [21 O.S. §1533.1 (B)]

On or between November 1, 2024 through November 30, 2025, in Oklahoma County, Oklahoma, Defendant **JANICE MAE CLIVER**, committed the crime of **IDENTITY THEFT**, a felony, in violation of Title 21 O.S. Section 1533.1(B), by using with fraudulent intent the personal identities of four (4) Medicaid recipients, to wit: using the Oklahoma Medicaid Program Client ID numbers belonging to C.T., T.R., W.G., B.S., and M.S. to fraudulently obtain or attempt to obtain money in violation of Title 21 O.S. Section 1533.1(B).

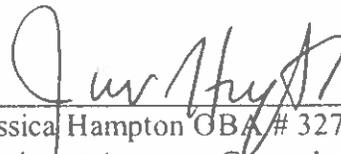
COUNT 3: OKLAHOMA COMPUTER CRIMES ACT [21 O.S. §1953(2)]

On or about the November 1, 2024 through November 30, 2025, Defendant **JANICE MAE CLIVER** committed crimes in violation of **THE OKLAHOMA COMPUTER CRIMES ACT**, in Oklahoma County, State of Oklahoma, by willfully, unlawfully, fraudulently, and feloniously using a computer, computer system, or computer network for the purpose of devising or executing a scheme or artifice with the intent to defraud, deceive or extort for the purpose of obtaining a thing of value by means of a false or fraudulent pretense or representation, to-wit: Using Milan, a billing system, to fraudulently input progress notes and bill Oklahoma Medicaid, for services not rendered, contrary to of Title 21 O.S. Section 1953.

All in violation of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

Dated this 26, day of March, 2026.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

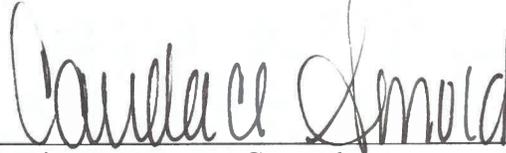
BY: 

Jessica Hampton OBA # 32740
Assistant Attorney General
313 NE 21st Street
Oklahoma City, OK 73105-3207

State of Oklahoma)

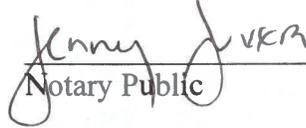
County of Oklahoma)

I, Candace Arnold, being duly sworn upon oath, state that I have read the above and foregoing Information and know the contents thereof, and that the facts stated herein are true to the best of my knowledge and belief.



Assistant Attorney General
Medicaid Fraud Control Unit

Subscribed and sworn to before me this 26th, day of March, 2026.


Notary Public

Kirkpatrick
1493

IN THE DISTRICT COURT OF OKLAHOMA COUNTY
STATE OF OKLAHOMA

STATE OF OKLAHOMA,)
)
Plaintiff,)
)
vs.)
)
LEONARD NWADIOHA NWANEBU,)
SSN: XXX-XX-8979)
DOB: XX/XX/1958)
)
JACOB GERMANY)
SSN: XXX-XX-3114)
DOB: XX/XX/1980)
)
PATRICIA GERMANY)
SSN: XXX-XX-3929)
DOB: XX/XX/1949)
)
RONNY GERMANY)
SSN: XXX-XX-7500)
DOB: XX/XX/1950)
)
)
Defendants.)

CF-2026-1493

Case Number:

FILED IN DISTRICT COURT
OKLAHOMA COUNTY

MAR 26 2026

RICK WARREN
COURT CLERK

01

INFORMATION

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

COUNT 1: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between March 1, 2023 through December 31, 2023, in Oklahoma County, Oklahoma, Defendant **LEONARD NWADIOHA NWANEBU** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on S.H. for payment in the aggregate amount of \$5,131.54, more than \$2,500.00, for Medicaid services billed but not rendered in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 2: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between March 1, 2023 through December 31, 2023, in Oklahoma County, Oklahoma, Defendant **LEONARD NWADIOHA NWANEBU** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on J.G. for payment in the aggregate amount of \$5,207.52, more than \$2,500.00, for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 3: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between March 1, 2023 through December 31 2023, in Oklahoma County, Oklahoma, Defendant **LEONARD NWADIOHA NWANEBU** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on J.H. for payment in the aggregate amount of \$5,178.17, more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 4: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between October 1, 2022 through January 31 2024, in Oklahoma County, Oklahoma, Defendant, **JACOB GERMANY** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on M.W. for payment in the aggregate amount of \$3,502.70, more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 5: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between January 1, 2022 through June 30 2022, in Oklahoma County, Oklahoma, Defendant **JACOB GERMANY** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on F.R. for payment in the aggregate amount of \$5,221.90, more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 6: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between January 1, 2022 through April 30, 2023, in Oklahoma County, Oklahoma, Defendant **JACOB GERMANY** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on J.H. for payment in the aggregate amount of \$13,076.50 more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 7: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between April 1, 2020, through September 30, 2021, in Oklahoma County, Oklahoma, Defendant **PATRICIA GERMANY** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on A.H. for payment in the aggregate amount of \$ 8,837.50, more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 8: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

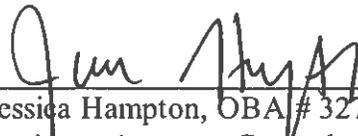
On or between October 1, 2022 through December 31, 2023, in Oklahoma County, Oklahoma, Defendant **RONNY GERMANY** committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims on M.W. for payment in the aggregate amount of \$8,413.30, more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

All in violation of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

Dated this 24, day of March, 2026.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

BY:



Jessica Hampton, OBA # 32740
Assistant Attorney General
313 NE 21st Street
Oklahoma City, OK 73105-3207

State of Oklahoma)

County of Oklahoma)

I, Jessica Hampton, being duly sworn upon oath, state that I have read the above and foregoing Information and know the contents thereof, and that the facts stated herein are true to the best of my knowledge and belief.

IN THE DISTRICT COURT OF WASHINGTON COUNTY
STATE OF OKLAHOMA

THE STATE OF OKLAHOMA)
)
 Plaintiff,)
)
 v.)
)
 MARCELLA JEAN FREED)
 DOB: xx-xx, 1973)
 SSN: xxx-xx-8670)
)
 Defendant.)

Case No. CF-26-66

DISTRICT COURT WASHINGTON CO OK
JEAN DAVIS, COURT CLERK
FILED
MAR 25 2026
BY _____ DEPUTY

INFORMATION

In the name and by the authority of the State of Oklahoma, GENTNER DRUMMOND, duly elected, qualified, and acting Attorney General of the State of Oklahoma, and on his official oath informs the District Court that:

**COUNT 1: FINANCIAL EXPLOITATION OF THE ELDERLY,
21 O.S. § 843.4.A.2, a FELONY,**

On or about the 1st day of April, 2024, through April 30, 2025, in Washington County, Oklahoma, MARCELLA JEAN FREED, while working as the business manager for Bartlesville Health and Rehab Center, obtained and used C.G. and S.G.'s funds, for personal use, without the consent of C.G. and S.G, with the intent to permanently deprive C.G. and S.G. of said funds, while C.G. and S.G. were residents at Bartlesville Health and Rehab Center, who at the time were both 76 years old, contrary to the provisions of section 843.4.(A).(2) of Title 21 of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

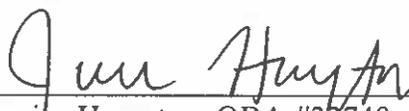
**COUNT 2: FINANCIAL EXPLOITATION OF THE ELDERLY,
21 O.S. § 843.4.A.2, a FELONY,**

On or about the 1st day of February, 2025 through and including 30th day of April, 2025, in Washington County, Oklahoma, MARCELLA JEAN FREED, and while working as the business manager for Bartlesville Health and Rehab Center, obtained and used N.C.'s funds, for personal use, without the consent of N.C., with the intent to permanently deprive N.C. of said funds, while N.C. was 75 years old, contrary to the provisions of section 843.4.(A).(2) of Title 21 of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

**COUNT 3: FINANCIAL EXPLOITATION OF THE ELDERLY,
21 O.S. § 843.4.A.2, a FELONY,**

On or about the 1st day of May, 2025 through and including 30th day of June, 2025, in Washington County, Oklahoma, MARCELLA JEAN FREED, while working as the business manager for Bartlesville Health and Rehab Center, obtained and used L.P.'s funds, for personal use, without the consent of L.P., with the intent to permanently deprive L.P. of said funds, who at the time was 87 years old, contrary to the provisions of section 843.4.(A).(2) of Title 21 of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

By: 

Jessica Hampton, OBA #32740
Assistant Attorney General
313 N.E. 21st Street
Oklahoma City, OK 73105
Jessica.Hampton@oag.ok.gov
(405) 522-0450 Telephone

STATE OF OKLAHOMA)
)
COUNTY OF WASHINGTON)

I, Jessica Hampton, being duly sworn on my oath, declare that the statements set forth in the above Information, are true and correct to the best of my knowledge and belief.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

By: Jess Hampton
Jessica Hampton
Assistant Attorney General

Subscribe and sworn to before me this 24th day of March, 2026.

My commission expires: Feb 27, 2029
Jenny Juvera
NOTARY PUBLIC



Coyne
1496

IN THE DISTRICT COURT OF OKLAHOMA COUNTY
STATE OF OKLAHOMA FILED IN DISTRICT COURT
OKLAHOMA COUNTY

STATE OF OKLAHOMA,)
)
Plaintiff,)
)
vs.)
)
NSE T. UDO,)
SSN: XXX-XX-6465)
DOB: XX/XX/1964)
)
Defendant.)

MAR 26 2026

BRUCE WALKER
COURT CLERK

01 _____

Case Number:

CF-2026-1496

INFORMATION

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

COUNT 1: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between January 1, 2024 through October 31, 2024, in Oklahoma County, Oklahoma, Defendant NSE T. UDO committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims for payment in the aggregate amount of more than \$2,500.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 2: MEDICAID FRAUD [56 O.S. §1005 (A)(1)]

On or between November 1, 2024 through January 1, 2026, in Oklahoma County, Oklahoma, Defendant NSE T. UDO committed the crime of MEDICAID FRAUD, a felony, in violation of Title 56 O.S. Section 1005(A)(1), by willfully and knowingly causing to be submitted to the Oklahoma Medicaid Program through its fiscal agent, false claims for payment in the aggregate amount of more than \$1000.00 for Medicaid services he did not render in violation of Title 56 O.S. Section 1005(A)(1).

COUNT 3: IDENTITY THEFT [21 O.S. §1533.1 (B)]

On or between January 1, 2024 through January 31, 2026, in Oklahoma County, Oklahoma, Defendant NSE T. UDO committed the crime of IDENTITY THEFT, a felony, in violation of Title 21 O.S. Section 1533.1(B), by using with fraudulent intent the personal identities of four (4) Medicaid recipients, to wit: using the Oklahoma Medicaid Program Client ID numbers belonging to B.D., A.R.R., G.B., E.W., B.F., R.C.H., E.W., O.R., P.A.V., and E.P. to fraudulently obtain or attempt to obtain money in violation of Title 21 O.S. Section 1533.1(B).

COUNT 4: OKLAHOMA COMPUTER CRIMES ACT [21 O.S. §1953(2)]

On or about the January 1, 2024 through January 31, 2026, Defendant **NSE T. UDO** committed the crime of **VIOLATION OF THE OKLAHOMA COMPUTER CRIMES ACT** in Oklahoma County, State of Oklahoma, by willfully, unlawfully, fraudulently, and feloniously using a computer, computer system, or computer network for the purpose of devising or executing a scheme or artifice with the intent to defraud, deceive or extort for the purpose of obtaining a thing of value by means of a false or fraudulent pretense or representation, to-wit: Using Milan, a billing system, to fraudulently input progress notes and bill Oklahoma Medicaid, for services not rendered, contrary to Section 1953 of Title 21 of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

All in violation of the Oklahoma Statutes and against the peace and dignity of the State of Oklahoma.

Dated this 20, day of March, 2026.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

BY:

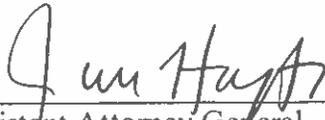


Jessica Hampton OBA # 32740
Assistant Attorney General
313 NE 21st Street
Oklahoma City, OK 73105-3207

State of Oklahoma)

County of Oklahoma)

I, Jessica Hampton, being duly sworn upon oath, state that I have read the above and foregoing Information and know the contents thereof, and that the facts stated herein are true to the best of my knowledge and belief.



Assistant Attorney General
Medicaid Fraud Control Unit

Comerica Bank with account card number ending in 9801 belonging to T.D., by using a Conduent Way2Go prepaid debit card associated with that account, to make a purchase and get cash back at Walmart #0247, thereby using T.D.'s funds, assets, or property, to benefit herself or any person other than T.D., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT TWO (2):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 21st day of January, 2021, in Okmulgee County, State of Oklahoma, **PAMELA SUE FISHER**, knowingly, willfully, and unlawfully commit the felony crime of Exploitation of Elderly Persons or Disabled Adults, by knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of B.L., an elderly person or disabled adult with whom **PAMELA SUE FISHER** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive B.L. of the use, benefit, or possession of B.L.'s funds, assets, or property, or to benefit someone other than B.L., to wit: **PAMELA SUE FISHER** took or used money from a bank account at Comerica Bank with account card number ending in 4058 belonging to B.L. by using a Conduent Way2Go prepaid debit card associated with that account, to make a cash withdrawal at an Automated Teller Machine, thereby using B.L.'s funds, assets, or property, to benefit herself or any person other than B.L., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT THREE (3):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 17th day of July, 2021, in Okmulgee County, State of Oklahoma, **PAMELA SUE FISHER**, knowingly, willfully, and unlawfully commit the felony crime of Exploitation of Elderly Persons or Disabled Adults, by knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of B.C., an elderly person or disabled adult with whom **PAMELA SUE FISHER** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive B.C. of the use, benefit, or possession of B.C.'s funds, assets, or property, or to benefit someone other than B.C., to wit: **PAMELA SUE FISHER** took or used money from a bank account at Comerica Bank with account card number ending in 3874 belonging to B.C. by using a Conduent Way2Go prepaid debit card associated with that account, to make a cash withdrawal at an Automated Teller Machine, thereby using B.C.'s funds, assets, or property, to benefit herself or any person other than B.C., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT FOUR (4):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 2nd day of February, 2022, in Okmulgee County, State of Oklahoma, **PAMELA SUE FISHER**, knowingly, willfully, and unlawfully commit the felony crime of Exploitation of Elderly Persons or Disabled Adults, by knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of T.F., an elderly person or disabled adult with whom **PAMELA SUE FISHER** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive T.F. of the use, benefit, or possession of T.F.'s funds, assets, or property, or to benefit someone

other than T.F., to wit: **PAMELA SUE FISHER** took or used money from a bank account at Comerica Bank with account card number ending in 6704 belonging to T.F. by using a Conduent Way2Go prepaid debit card associated with that account, to make a cash withdrawal at an Automated Teller Machine, thereby using T.F.'s funds, assets, or property, to benefit herself or any person other than T.F., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

GENTNER DRUMMOND
ATTORNEY GENERAL OF OKLAHOMA

By:


DONALD PALIK
Assistant Attorney General
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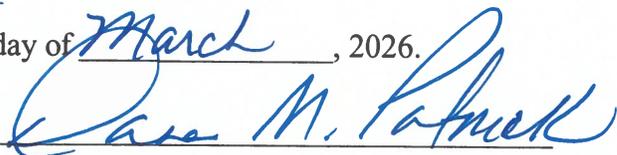
STATE OF OKLAHOMA)
COUNTY OF TULSA)

I, Donald Palik, being duly sworn on my oath, declare that the statements set forth in the above Information, are true and correct to the best of my knowledge and belief.




Donald Palik
Assistant Attorney General

Subscribed and sworn to before me this 24th day of March, 2026.


NOTARY PUBLIC

or property, or to benefit someone other than V.P., to wit: **PATRICIA GAIL BUSH** took or used money from a bank account at Wells Fargo Bank with account number ending in 3281, with a linked bank card number ending in 0653, belonging to V.P., by causing transfers of money from that account into an account with Block, Inc. (formerly known as Square, Inc.) owned and/or controlled by **PATRICIA GAIL BUSH**, thereby using V.P.'s funds, assets, or property to benefit herself or any person other than V.P., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT TWO (2):

**EXPLOITATION OF ELDERLY PERSONS OR DISABLED ADULTS
21 O.S. § 843.4, a FELONY**

On or about the 19th day of April, 2024 through the 12th day of October, 2024, in Haskell County, State of Oklahoma, **PATRICIA GAIL BUSH**, a licensed Nursing Home Administrator, knowingly, willfully, and unlawfully committed the felony crime of Exploitation of Elderly Persons or Disabled Adults, by knowingly, by deception or intimidation, obtaining or using, or endeavoring to obtain or use the funds, assets, or property of L.B., an elderly and/or disabled adult resident of the Haskell County Nursing Center, with whom **PATRICIA GAIL BUSH** stood in a position of trust and confidence or had a business relationship, with the intent to temporarily or permanently deprive L.B. of the use, benefit, or possession of L.B.'s funds, assets, or property, or to benefit someone other than L.B., to wit: **PATRICIA GAIL BUSH** took or used money from a Medicaid Income Pension Trust bank account at Firstar Bank, with account card number ending in 0814, belonging to L.B., by on one or more occasions writing and signing checks from the account, made out as payable to "Patricia Bush" herself, and endorsing the checks by signing her name "Patricia Bush" on the back the checks, and negotiating the checks to an account owned or controlled by **PATRICIA GAIL BUSH**, thereby using L.B.'s funds, assets, or property, to benefit

herself or any person other than L.B., contrary to the provisions of sections 843.4 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

COUNT THREE (3):

**FINANCIAL NEGLECT BY CARETAKER
21 O.S. § 843.1, a FELONY**

On or about the 18th day of February, 2024 through the 30th day of October, 2024, in Haskell County, State of Oklahoma, **PATRICIA GAIL BUSH**, a licensed Nursing Home Administrator, who had by contract assumed the responsibility for the care and financial management of a vulnerable adult, D.B., committed the felony crime of Financial Neglect by Caretaker, by willfully and knowingly, on repeated instances, failed to use the resources available to restore or maintain the health and physical well-being of vulnerable adult D.B. by squandering or negligently mismanaging the money, property or accounts of D.B., to wit: **PATRICIA GAIL BUSH** took or used money from a credit card account from Capital One Bank with account number and card number both ending in 5742, which was available to D.B. for use in paying for D.B.'s care at Haskell County Nursing Center, by repeatedly causing transfers of money from that Capital One account into an account with Block, Inc. (formerly known as Square, Inc.) owned and/or controlled by **PATRICIA GAIL BUSH**, and failing to direct said funds from the Capital One card account to pay for D.B.'s care at Haskell County Nursing Center, contrary to the provisions of sections 843.1 of Title 21 of the Oklahoma Statutes, and against the peace and dignity of the State of Oklahoma.

GENTNER DRUMMOND

ATTORNEY GENERAL OF OKLAHOMA

By:


DONALD PALIK

Assistant Attorney General
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(918) 938-6348 Facsimile
Donald.Palik@oag.ok.gov
OBA#18795

STATE OF OKLAHOMA)
COUNTY OF TULSA)

I, Donald Palik, being duly sworn on my oath, declare that the statements set forth in the above Information, are true and correct to the best of my knowledge and belief.





Donald Palik
Assistant Attorney General

Subscribed and sworn to before me this 24th day of March, 2026.



NOTARY PUBLIC

IN THE DISTRICT COURT OF OKLAHOMA COUNTY
STATE OF OKLAHOMA

MAR 26 2026

RICK WARREN
COURT CLERK

88 _____

STATE OF OKLAHOMA, ex rel., GENTNER)
DRUMMOND, ATTORNEY GENERAL OF)
OKLAHOMA,)

Plaintiff,)

v.)

NEUROPATHY TREATMENT CLINIC OF)
OKLAHOMA, LLC and)
JAMES WARREN LINN, Jr.,)

Defendants.)

Case No.

CJ - 2026 - 2250

PETITION

The State of Oklahoma (the "State"), for its cause of action against Neuropathy Treatment Clinic of Oklahoma, LLC ("NTCO") and James Warren Linn, Jr. ("Linn") (collectively "Defendants"), alleges as follows:

INTRODUCTION

1. From approximately August 2021 to approximately August 2025, Defendants engaged in a fraudulent scheme to bill Oklahoma Medicaid for services not rendered and services that were not medically reasonable or necessary.

2. The Oklahoma Medicaid program, SoonerCare ("Medicaid"), is a joint federal-state program that provides health care benefits for certain groups, including the poor and disabled. The Oklahoma Health Care Authority ("OHCA") is the single State agency responsible for administration of the Oklahoma Medicaid system and its funds.

3. In late 2016, Defendant Linn, through various corporate structures, invested in Sanexas neoGen medical devices. Defendant Linn subsequently formed NTCO to offer Sanexas treatments.

4. Sanexas treatments are not covered by Oklahoma Medicaid.

5. To access Medicaid program funds despite Medicaid not covering Sanexas treatments, NTCO and Defendant Linn devised a scheme to prescribe every patient diluted vitamin blend injections (the “Carnitor Blend”) that contained 90% saline plus over-the-counter ingredients and the drug Carnitor (L Carnitine or levocarnitine).

6. Carnitor is only FDA approved for patients with an inborn error of metabolism which results in secondary carnitine deficiency or prevention and treatment of carnitine deficiency in patients with end stage renal disease. NTCO prescribed it to nearly every Medicaid patient.

7. Carnitor is reimbursed by the Oklahoma Medicaid program in units, with 1 unit equaling 1 gram (g) of Carnitor.

8. NTCO purchased Carnitor in 1 g single dose vials. However, NTCO then diluted the Carnitor with saline and vitamins so that each 1g vial of Carnitor could be enough product for 231 patient treatments (approximately 4 mg per patient).

9. From August 2021 into April 2023, NTCO billed the Medicaid program 4 units (4 g) of Carnitor for nearly every Medicaid patient treatment (about 1,000 times more Carnitor than actually administered).

10. In April 2023, NTCO increased the amount of Carnitor billed to the Medicaid program to 6 units (6 g) per patient treatment. From April 2023 through August 2025, NTCO billed the Medicaid program for approximately 1,500 times more Carnitor than it actually administered to Medicaid patients.

11. For approximately \$40 worth of Carnitor, NTCO routinely billed Medicaid tens of thousands of dollars. For example, in June 2025, the cost of one vial of Carnitor was about \$41. Distributed among 231 patient treatments, NTCO would be reimbursed by the Oklahoma Medicaid program more than \$33,000 for the single vial.

12. Overall, from August 2021 to Present, NTCO received more than \$880,000 for fraudulent Carnitor claims.

13. NTCO also received more than \$300,000 for the physical administration of the Carnitor Blend injections. To inflate reimbursement for injections, NTCO required patients to receive a small amount of the Carnitor Blend spread across multiple injection sites at each treatment so that NTCO could bill multiple injection units.

14. Finally, NTCO received nearly \$200,000 for evaluation and management services that were not medically reasonable or necessary.

15. As set forth below, NTCO and Defendant Linn knew—at all times relevant to this action—that the products and services it billed to the Oklahoma Medicaid program were fraudulent and not medically reasonable or necessary.

16. Through this action, the State seeks to recover treble damages and per-claim civil penalties from Defendants for making false and/or fraudulent claims to the State for services allegedly provided to Oklahoma Medicaid beneficiaries. The State seeks recovery under the Oklahoma Medicaid False Claims Act, 63 Okla. Stat. § 5053.1 *et seq.* (“OFCA”), and state common law.

PARTIES

17. Plaintiff is the State of Oklahoma.

18. Defendant NTCO is an Oklahoma limited liability company headquartered in Tulsa County, Tulsa, Oklahoma, doing business in Oklahoma and Tulsa counties.

19. Defendant Linn is a resident of Tulsa, Oklahoma, and is the Manager and indirect owner of NTCO.

JURISDICTION AND VENUE

20. This court has jurisdiction pursuant to the Oklahoma Medicaid False Claims Act, 63 Okla. Stat. § 5053.1 et seq. (“OFCA”).

21. Venue is proper in the District Court of Oklahoma County, State of Oklahoma, as the cause of action or some part thereof arose in Oklahoma County, Oklahoma City, Oklahoma where NTCO conducts business and Defendants caused to be presented false or fraudulent claims to the Oklahoma Health Care Authority in Oklahoma County, Oklahoma. Additionally, NTCO entered into a Provider Agreement with the Oklahoma Health Care Authority that established Oklahoma County, State of Oklahoma as the exclusive venue for legal actions arising from the Agreement.

FACTUAL ALLEGATIONS

The Sanexas Machine

22. The Sanexas neoGen medical device (“Sanexas”) is an electric cell signaling device marketed by RST.

23. Sanexas delivers non-invasive energy waves to targeted areas of the body through contact electrodes for the purpose of providing relief of acute or chronic pain.

24. Sanexas is not FDA approved. In January 2003, the FDA cleared Sanexas as substantially equivalent to an electrical stimulation device that was already available in the market.

25. Prior to 2019, RST offered a solution of vitamin, minerals, and Chinese herbs that could allegedly be used in combination with Sanexas treatments, though Sanexas was not and is

not FDA cleared to be used in conjunction with vitamin injections. RST informed providers that injections are not a mandatory part of the Sanexas treatment and are “by no means required for treatment.”

Neuropathy Treatment Clinic of Oklahoma

26. James Warren Linn, Jr., a businessman with no medical certifications or medical licenses, formed NTCO in September 2016.

27. NTCO operates two Oklahoma medical clinics—one in Tulsa and the other in Oklahoma City—that provide Sanexas treatments.

28. NTCO hired mid-level providers, such as Advanced Practice Registered Nurses (“APRNs”), to evaluate patients for Sanexas treatments and perform vitamin injections.

29. NTCO hired certified nursing assistants and certified medication aides to attach Sanexas devices to patients for their unattended electrical stimulation treatment.

30. NTCO employed one medical doctor, Dr. Liphard D’Souza, to oversee the clinic’s operations. At all times relevant to this action, Dr. D’Souza lived in North Carolina.

31. In or around 2018 or 2019, Defendant Linn engaged a billing company, National Billing Institute, LLC (“NBI”) to help NTCO set up a process to bill Medicare and commercial insurers.

32. In the healthcare industry, medical services, devices and drugs are assigned standardized billing codes, and diseases and medical conditions are assigned diagnosis codes.

33. Healthcare providers must only submit claims for reimbursement to Medicare and Medicaid that contain accurate Current Procedural Terminology (CPT) codes or Healthcare Common Procedure Coding System (HCPCS) codes for medically necessary services that are individualized to a patient’s diagnosis or needs.

34. The codes applicable to Sanexas treatments for the unattended electrical stimulation are CPT code 97014 and HCPCS code G0283. Sanexas treatments are generally not reimbursed or are subject to limited reimbursement by Medicare, state Medicaid programs, and commercial insurance because the treatment is considered to be investigational or not medically reasonable or necessary in most cases.

35. In and around 2019, Michael Evans, founder of NBI, and Defendant Linn set up a billing scheme that assigned incorrect codes to the Sanexas treatments, such as codes for physical therapy, so that the treatments could be billed to Medicare and commercial insurance.

36. Evans and Defendant Linn, neither of whom has any medical training or medical license, prepared treatment protocols and “template” medical records that they instructed all employees to use for patient encounters.

37. The template medical records contained uniform diagnosis and treatment information to create the misimpression that a medically necessary service was provided—not a run-of-the-mill electrical stimulation treatment.

38. NBI advised NTCO to notify all patients, by flyers, posting, letters, sign-in documents, etc. of the following:

“Your pain treatment at our clinic using the electric stimulation treatment is considered Physical Therapy by insurances and Medicare. Medicare and insurances are billed utilizing therapy billing codes. Should you be asked by Medicare representatives or by your insurance please be aware that these services are defined as Physical Therapy being performed by Nurse practitioner or NPP's.”

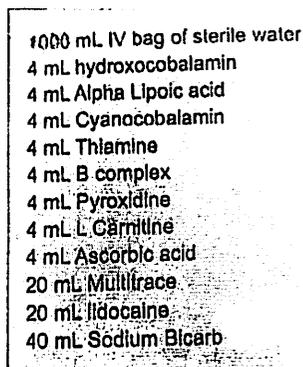
39. While RST advised patients that the frequency of treatments depends on the indication/condition being addressed and can usually be 2-3 times per week for 2-12 weeks, NTCO’s template treatment plan provided that every patient—regardless of indication or condition—would receive 12-weeks of treatment, two times per week.

40. The NTCO treatment protocol developed by NTCO, NBI and Defendant Linn also included vitamin injections to be given with all Sanexas treatments.

41. By 2019, RST no longer offered the RST vitamin solution, so Evans, NTCO, and Defendant Linn worked together to establish a new vitamin solution, the Carnitor Blend, for use at NTCO.

42. The non-FDA approved Carnitor Blend is mostly saline with vitamins and supplements added that are typically available over-the-counter.

43. NTCO maintains its homemade Carnitor Blend recipe on a laminated card as follows:



1000 mL IV bag of sterile water
4 mL hydroxocobalamin
4 mL Alpha Lipoic acid
4 mL Cyanocobalamin
4 mL Thiamine
4 mL B complex
4 mL Pyridoxine
4 mL L-Carnitine
4 mL Ascorbic acid
20 mL Multitrac
20 mL lidocaine
40 mL Sodium Bicarb

44. No one involved in the formulation of the Carnitor Blend had the knowledge or medical credentials necessary to determine or verify the clinical effectiveness of the products and dosages contained in the Carnitor Blend.

45. Evans and Defendant Linn also developed an injection protocol for use with every patient.

46. Under the injection protocol, patient injections were not individualized to patient needs and conditions. Rather, each patient received the same small amount and dosage of the Carnitor Blend (varying only when ingredients were unavailable) via multiple, subcutaneous injections at each treatment visit.

47. It was not medically necessary or reasonable for NTCO patients to be prescribed treatments with the Carnitor Blend, let alone multiple injections of the Carnitor Blend at each treatment visit.

The NTCO Patient Experience

48. The combination Sanexas/Carnitor Blend treatment regimen devised by NBI and Defendant Linn was essentially the only treatment available at NTCO, and Defendant Linn expected NTCO mid-level providers to prescribe the treatment to every patient regardless of medical need.

49. According to various, former NTCO employees:

- a. NTCO employees were trained to advise every patient that the recommended course of treatment was Sanexas twice a week for 12 weeks and that the treatments included injections;
- b. It was rare for NTCO to wait for EMGs/diagnostics before prescribing and starting treatment;
- c. Employees prescribed the Sanexas treatments even if it was not indicated by the diagnostic testing;
- d. The goal of consultations was to evaluate new patients and find a way to get them on an NTCO treatment plan;
- e. Defendant Linn expected employees to put every patient on the 12-week treatment plan regardless of the patient's medical need;
- f. NTCO pressured its employees to use certain words and phrases in their notes;
- g. Procedure codes were added to employees' notes, and when providers pushed back, they were told that if they did not comply, the clinic would not get paid and they would be forced to shut down.

50. One former NTCO employee remarked that if her notes reflected what a patient told her, but did not specify pain, Defendant Linn would email her and tell her to modify her notes.

51. Another former NTCO employee stated that she would not force patients who did not want injections to receive them, but she received pushback from Defendant Linn, who advised that NTCO might not get paid for treatments without the injections.

52. One former NTCO employee who prescribed the Carnitor Blend injections did not even know what was in the blend.

53. According to Defendant Linn, historically, 95% of NTCO consultations would result in patients starting treatment. When that number fell to approximately 65% on or around January 2025, Defendant Linn considered the trend a “concerning decline.” Defendant Linn implemented a “Same-Day Case Review Protocol” and required the providers to contact Dr. D’Souza by telephone the same day to review every case where the patient did not schedule treatment after the consultation.

54. Once treatments were started, NTCO patients were encouraged to continue treatments even if their symptoms increased over the course of treatment—claiming that increased symptoms would be the result of nerves “waking up.”

The Insurance Audits

55. By 2020, insurer claim audits started to uncover NTCO’s fraudulent billing schemes.

56. In February 2020, Aetna wrote to NTCO’s medical director and advised that 49 claims had been reviewed, and all 49 claims were denied as the documentation indicated that the services provided did not meet coverage criteria.

57. Aetna specifically advised that the injection codes were being denied because of a lack of evidence that the “nutria-pharmaceutical blend/mix” is of clinical value.

58. In December 2020, Evans and Defendant Linn received an email from another Sanexas provider re “Insurance Denying Injections...”.

59. That provider stated that its largest payor and another payor were refusing to pay for the injections. The provider stated that it was well known that the injections were really what makes Sanexas profitable.

60. In an internal NTCO email sent at a later time, NTCO’s billing manager mirrored these sentiments regarding the value of injections, stating, “The machine itself pays, but the injections are where the money lies.”

61. Instead of ceasing medically unnecessary Carnitor Blend injections, NTCO’s billing director, Defendant Linn, and NBI started contemplating ways to concoct medical necessity for the injections.

62. In December 2020, NTCO’s billing director and Evans discussed adding lab testing for vitamin deficiency to justify the Carnitor Blend injections, but Evans expressed concern for the plan, stating:

The only issue we may have is what if patients don’t test low on vitamins? Then do we over ride [sic] that per the medical judgement of the NP? I am not sure, I think we should do some test patients, see how man [sic] come back low at first to see if it warrants the test. If a lot do then good, if the test shows not vary [sic] many come back low in vitamins then we have a delima [sic].

63. Ultimately, NTCO did not add vitamin deficiency testing to its protocol.

64. NTCO also did not stop administering and billing for Carnitor Blend injections.

65. Instead, as commercial insurers and Medicare started routinely denying claims for NTCO services, NTCO turned its attention to Medicaid patients.

NTCO Expands to Oklahoma Medicaid

66. In late 2020 and into 2021, NTCO began considering whether it was “worth the reimbursement” to start offering treatments to Oklahoma Medicaid patients.

67. It was NTCO’s understanding that Medicaid “does not pay for any therapy codes for patients over the age of 20 unless the patient is on a waiver program, and the provider has to be contracted as a physical therapist with that waiver.” NTCO, then, could not bill Medicaid for the assortment of physical therapy codes that NTCO billed to other providers in lieu of the non-reimbursable e-stim codes.

68. To compensate for not being able to bill therapy codes to Medicaid, NTCO’s billing manager decided that NTCO could add extra 99212 CPT codes for Evaluation and Management visits.

69. The billing manager advised an insurance specialist of the plan in an email exchange, as follows:

Billing Manager: “add the 99212 to every treatment, making sure the clinician steps in on these Medicaid patients.”

Insurance Specialist: “So we need to have provider step in with every medicaid patient?”

Billing Manager: “Yes, for like 5 minutes for billing purposes. We can't bill for the estim or for any therapy codes, so this helps with being able to see the patient.”

70. In other words, Medicaid patients would receive an unnecessary “pop-in” by NTCO nurses so that NTCO could bill Medicaid for evaluation and management in addition to the Carnitor Blend injections.

71. In or around August 2021, NTCO began billing Oklahoma Medicaid for Sanexas/Carnitor Blend treatments.

72. NTCO advised Medicaid patients that Medicaid would only pay for the services if they agreed to the Carnitor Blend injections.

73. For example, one patient stated that NTCO employees told her that Medicaid would only cover the electrical stimulation services if she agreed to the injections. NTCO told her the vitamin injections are beneficial even if you have plenty of vitamins in your body because they don't always make it to the lower portions of your feet.

Aetna Advises Defendant Linn That NTCO's Billing Constitutes a Pattern of Abusive Billing that Gives Rise to a Reasonable Suspicion of Fraud

74. Shortly after NTCO started billing Oklahoma Medicaid for Sanexas/Carnitor Blend treatments, Aetna wrote to Defendant Linn.

75. The letter, dated September 3, 2021, and received September 13, 2021, advised that Aetna completed a review of claims processed from January 1, 2018, through June 30, 2021, and identified an overpayment of more than \$1.4 million—of that, slightly more than \$1.2 million represented payments for “unclassified drugs.”

76. Aetna advised NTCO that the circumstances of the billing constituted a pattern of abusive billing and gave rise to a reasonable suspicion of fraud.

77. Once again, instead of ceasing medically unnecessary Carnitor Blend injections, NTCO's billing director, Defendant Linn, and NBI started again contemplating ways to fabricate medical necessity of the injections in patient records.

78. Michael Evans at NBI emailed Defendant Linn on September 29, 2021, and stated: “one thing we need to do is use our vitamin deficiency form. Use this and add on the code for vitamin deficiency which is E56.8 (vitamin deficiency other) and E53.8 (vitamin b deficiencies).”

79. On December 14, 2021, Michael Evans emailed NTCO's billing director and asked if they were using the vitamin deficiency diagnosis codes. The billing director responded on December 15, 2021, asking:

Michael, I appreciate what you are saying and understand the need for justification of the injections, but can the clinician actually make a confirmed diagnosis of vitamin deficiency based on symptoms, not confirmed with lab?

80. On January 6, 2022, Michael Evans again emailed NTCO's billing director about vitamin deficiency diagnosis codes, stating:

I am not seeing that the dx code is being used, we sent over the form that needs to be used and the dx needs to be added to the billing e56.8 is deficiency [sic] of other vitamins or e56.9 vitamin deficiency unspecified. Since there is not one for L-carnitine, the e56.9 is probably best. Or they can be specific with vitamin b deficiency e53.9 and then also add e56.9 since you can have up to 10 dx codes.

If we get asked for audits and they don't see where a dx was used even if it is in the notes it could cause the insurance to deny the claim.

81. The billing director forwarded the email to Defendant Linn the same day, saying:

Warren,

I know Michael wants us to use the vitamin deficiency diagnosis codes, but John [a nurse practitioner] is not comfortable doing this without having labs to support this even using the form Michael is talking about. I've sent the email to the NPs a couple of times, but John always responds that he isn't really on board.

82. Following the January 6, 2022 email to Linn, NTCO continued its practice of providing the Carnitor Blend injections to every patient, despite knowledge that medical necessity for the Carnitor Blend injections did not exist.

83. By May 2023, NTCO and NBI were still trying to get the NTCO employees to diagnose patients with a vitamin deficiency through the use of a form questionnaire.

84. On May 8, 2023, an Advanced Practice Registered Nurse ("APRN") at NTCO sent the NTCO billing director an email stating that she was still "trying to get all the providers on board with diagnosing based on the answers to the vitamin deficiency form."

85. The NTCO APRN went on to say: “What I'm hearing from providers is that they aren't comfortable diagnosing a patient with a condition without lab confirmation.”

86. The NTCO APRN suggested that the form should include language on the back that informs patients that based on the answer the provider recommends lab testing for suspected vitamin deficiency. NTCO could then draw labs or refer the patient out for labs to be done.

87. The billing director—who years prior ruled out lab testing because NTCO would have a dilemma if testing ruled out vitamin deficiency—responded that she would hate for the patients to get stuck with a bill for lab testing. The NTCO APRN replied:

I want to avoid that as well. So maybe we just need a separate consent form, detailing the risks/benefits of vitamin injections and that the patient consents to receiving without lab work? I really don't think that our vitamin injections will ever give somebody too much of anything because we inject such a small amount.

88. The vitamin deficiency form was then revised and circulated for comment.

89. One APRN gave her “honest thoughts” as follows:

I think if we were able to document "possible" signs of vitamin deficiency this would help justify why we are giving our current vitamin injections. . . . The only way I know we can truly diagnose a vitamin deficiency is to obtain and document a really good subjective history of the patient that would then justify why we would want to obtain objective labs to confirm our case. If we confirmed a vitamin deficiency with labs, we would then be obligated to continue to treat this person for the deficiency.

90. NTCO employees, including Defendant Linn, knew in 2023, and before, that NTCO had no legitimate justification for giving patients the Carnitor Blend injections.

91. NTCO did not add vitamin deficiency lab testing in its diagnosis protocol.

92. Rather, NTCO implemented the following “Vitamin Deficiency Screening Tool.”

Vitamin Deficiency Screening Tool

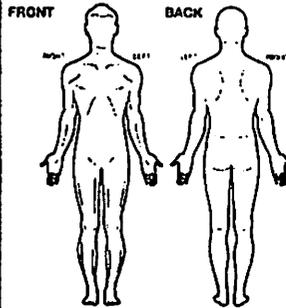
Patient Name: _____ Date: _____

The B vitamins are a group of eight nutrients, each with unique roles in keeping the body healthy. They are especially important for maintaining cell health and keeping you energized.

**Below are Signs/Symptoms of Vitamin Deficiency
Please Check Any That Apply to You**

- | | | |
|--|--|---|
| <input type="checkbox"/> Poor wound healing | <input type="checkbox"/> Mouth pain | <input type="checkbox"/> Mood changes |
| <input type="checkbox"/> Decreases alertness | <input type="checkbox"/> Depression | <input type="checkbox"/> Brittle hair |
| <input type="checkbox"/> Smooth tongue | <input type="checkbox"/> Difficulty walking | <input type="checkbox"/> Hair loss |
| <input type="checkbox"/> Nausea and vomiting | <input type="checkbox"/> Headache | <input type="checkbox"/> Pale skin |
| <input type="checkbox"/> Fatigue | <input type="checkbox"/> Hiccups | <input type="checkbox"/> Tingling in hands and feet |
| <input type="checkbox"/> Weakness, tiredness, or lightheadedness | <input type="checkbox"/> Cracks or sores in the skin around the corners of the mouth | |

Please Mark the Areas Affected



Vitamin B is a water-soluble vitamin that plays essential roles in red blood cell formation, cell metabolism, nerve function, and the production of DNA. With age, it can become harder to absorb this vitamin. It can also happen if you have had weight loss surgery or another operation that removed part of your stomach, or if you drink heavily. Since vitamin B deficiency is relatively common, it is helpful to know some of its main causes. It is recommended that older adults who have deficient levels of vitamin B talk with their healthcare provider as soon as possible to come up with a treatment plan.

L-Carnitine is a derivative of an amino acid (AA) and also called speudo-AA. L-Carnitine continues to form proteins which carry many essential cell tasks. Most concentrated in the tissues that use fatty acids/fats as their primary fuel, e.g. skeletal, cardiac, muscle, nervous systems. Plays crucial role in production of energy by transporting fatty acids into the cell mitochondria. Mitochondria acts as engines within the cells burning fats to create useable energy. Synthesized from essential AA tyrosine and methionine. Especially present predominantly in foods of animal origin, but are also available as dietary supplements. Synthesized primarily in the liver, but also in the kidneys. Deficiency occurs when this nutrient cannot reach the body cells for energy production or in severe dietary deprivation, atrophic nutritional disorders or impaired liver and renal functions. Symptoms/Signs: muscle aches/weakness/floppy tone/fatigue/low blood sugar/ican cause in adults muscle necrosis, myopathy, hypoglycemia, fatty liver, confusion, cardiomyopathy.

93. As demonstrated in the form, the Vitamin Deficiency Screening Tool purported to allow NTCO employees to diagnose a vitamin deficiency—and thus prescribe the Carnitor Blend injections—if patients suffered from common ailments or conditions such as pale skin, fatigue, or headache.

94. The Vitamin Deficiency Screening Tool was patently a fraudulent mechanism to give the illusion that there was some justification for prescribing and administering Carnitor Blend injections to patients.

95. Following the adoption of the “Vitamin Deficiency Screening Tool,” NTCO continued to provide medically unnecessary Carnitor Blend injection treatments to Medicaid, and NTCO was reimbursed nearly one million dollars for doing so.

Fraudulent Medicaid Billing

96. The Oklahoma Medicaid program’s rules on medical necessity are clear: “Services, provided within the scope of the Oklahoma Medicaid program, shall meet medical necessity criteria.” OAC: 317:30-3-1(f).

97. Practitioners are not entitled to reimbursement from the Oklahoma Medicaid program unless services provided are “medically necessary and essential to the diagnosis and treatment of the patient's presenting problem.” OAC: 317:30-3-1(d).

98. NTCO and Defendant Linn deliberately and fraudulently devised a scheme to bill the Oklahoma Medicaid program for services that were not medically necessary or essential to the diagnosis and treatment of Medicaid patient’s problems.

99. From August 2021 through present, NTCO knowingly submitted, and Defendant Linn knowingly caused to be submitted, thousands of fraudulent claims to the Oklahoma Health Care Authority, or Oklahoma Managed Care Organization, for services that were not medically necessary or essential to the diagnosis and treatment of Medicaid patients’ problems.

FIRST CLAIM FOR RELIEF

Violations of the Oklahoma Medicaid False Claims Act: Presenting False Claims for Payment (63 Okla. Stat. § 5053.1(B)(1))

100. The State of Oklahoma realleges and incorporates by reference each of the preceding paragraphs as if fully set forth herein.

101. A health care provider's participation in the Oklahoma Medicaid program is voluntary.

102. To be eligible for payment by the Oklahoma Medicaid program, providers must have an approved Provider Agreement on file with the OHCA. Okla. Admin. Code § 317:30-3-2. Through this Provider Agreement, "the provider certifies that all information submitted on claims is accurate and complete, assures that the State Agency's requirements are met and assures compliance with all applicable Federal and State regulations." *Id.*

103. Providers certify with each claim for payment that the services or products for which payment is billed by or on behalf of the provider were medically necessary as defined by O.A.C. § 317:30-3-1(f) and were rendered by the provider.

104. If a provider contracts with a third party to provide billing services or submit claims on behalf of the provider, the provider is "responsible for the accuracy and integrity of all claims submitted on behalf of [the] Provider by the billing service." *See Medicaid's General Provider Agreement.*

105. NTCO entered into a provider agreement with the Oklahoma Health Care Authority dated effective January 1, 2021.

106. Defendants knowingly presented, or caused to be presented, materially false and fraudulent claims for payment or approval to the State of Oklahoma, including claims for reimbursement by OHCA, by misrepresenting the services allegedly performed and by billing for services that were not individualized to patient need, or medically reasonable or necessary. These claims were both factually and legally false or fraudulent.

107. OHCA would not have paid these false and fraudulent claims had they known that NTCO was misrepresenting its services and providing services that were not medically reasonable or necessary.

108. Defendants presented, or caused to be presented, these claims with actual knowledge of their falsity, or with reckless disregard or deliberate ignorance of whether or not they were false.

109. The State of Oklahoma, unaware of the falsity of the claims submitted for payment or caused to be submitted for payment by Defendants, approved, paid, and participated in payments made by OHCA for false or fraudulent claims that would otherwise not have been approved and paid.

110. By reason of the false or fraudulent claims, the State of Oklahoma has sustained damages in a substantial amount to be determined at trial and is entitled to treble damages plus a civil penalty for each false or fraudulent claim.

SECOND CLAIM FOR RELIEF
Violations of the Oklahoma Medicaid False Claims Act:
Use of False Statements
(63 Okla. Stat. § 5053.1(B)(2))

111. The State of Oklahoma realleges and incorporates by reference each of the preceding paragraphs as if fully set forth herein.

112. The State of Oklahoma seeks relief against Defendants under Section 5053.1(B)(2) of the OFCA.

113. As detailed above, Defendants knowingly made, used, or caused to be made or used, false records or statements, which included the false statements, express and implied certifications, and representations on claim forms to obtain approval for and payment by the State of Oklahoma for false or fraudulent claims as detailed above.

114. The false statements, express and implied certifications, and representations made, used, or caused to be made or used by Defendants were material to the payment of the false or fraudulent claims by the State of Oklahoma.

115. The false statements, express and implied certifications, and representations were made, used, or caused to be made or used with actual knowledge of their falsity, or with reckless disregard or deliberate ignorance of whether or not they were false.

116. The State of Oklahoma, unaware of the falsity of the records and statements made, used, or caused to be made or used by Defendants, approved, paid, and participated in payments made by OHCA for false or fraudulent claims that would otherwise not have been approved and paid.

117. By reason of these false records or statements, the State of Oklahoma has sustained damages in a substantial amount to be determined at trial and is entitled to treble damages plus a civil penalty for each false or fraudulent claim.

THIRD CLAIM FOR RELIEF (NTCO ONLY)

**Payment by Mistake
(Oklahoma Common Law)**

118. The State of Oklahoma realleges and incorporates by reference each of the preceding paragraphs as if fully set forth herein.

119. The State of Oklahoma paid NTCO, either directly or indirectly, for claims submitted by NTCO for services that were misrepresented, without knowledge of material facts, and under the mistaken belief that NTCO was entitled to receive payment for such claims.

120. The mistaken belief of the State of Oklahoma was material to its decision to pay NTCO on such claims.

121. NTCO intended that the State of Oklahoma would rely on its false statements, representations, and material omissions of fact.

122. The State of Oklahoma reasonably relied on NTCO's false statements, representations, and material omissions of fact and, as a result, paid NTCO money that otherwise would not have been paid.

123. The State of Oklahoma has been damaged as a result of these mistaken payments and is entitled to recover the amount of the payments in an amount to be determined at trial.

FOURTH CLAIM FOR RELIEF

**Fraud
(Oklahoma Common Law)**

124. The State of Oklahoma realleges and incorporates by reference each of the preceding paragraphs as if fully set forth herein.

125. Defendants made materially false statements and representations, including material omissions of fact, to the State of Oklahoma to obtain money from the State of Oklahoma to which they were not entitled.

126. Defendants made such statements and representations with knowledge of their materiality and falsity.

127. Defendants also failed to tell the State of Oklahoma about the fraudulent activity at NTCO, which was a material omission.

128. Defendants made such materially false statements, representations, and omissions with the intent that the State of Oklahoma would rely on them in making determinations to pay claims submitted to the State of Oklahoma.

129. The State of Oklahoma reasonably relied on Defendants' material misrepresentations and omissions.

130. The State of Oklahoma was injured as a result of Defendants' unlawful conduct in an amount to be determined at trial.

PRAYER FOR RELIEF

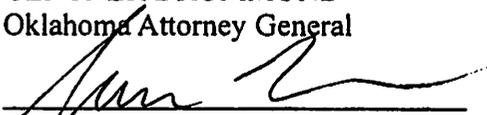
Wherefore, the State of Oklahoma respectfully requests judgment be entered in its favor in an amount in excess of \$75,000 as follows:

- a. Against Defendants jointly and severally on the First and Second Claims for Relief (Oklahoma Medicaid False Claims Act), treble damages and civil penalties in the maximum amount allowed by law;
- b. Against NTCO on the Third Claim for Relief (Payment by Mistake), damages to the extent allowed by law;
- c. Against Defendants jointly and severally on the Fourth Claim for Relief (Fraud), damages to the extent allowed by law;
- d. All costs associated with investigating and prosecuting this civil action, as provided by law;
- e. Interest on all amounts owed to the State of Oklahoma, as provided by law; and
- f. For all other relief the Court deems just and proper.

JURY DEMAND

The State of Oklahoma demands a trial by jury on all issues so triable.

GENTNER DRUMMOND
Oklahoma Attorney General



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SECRETARY OF THE ARMY

NOV 19 1944

TO THE SECRETARY OF THE ARMY
FROM THE SECRETARY OF THE ARMY
SUBJECT: [Illegible]

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