



**OFFICE OF THE
ATTORNEY GENERAL**
Medicaid Fraud Control Unit
BUREAU



**REPORT OF
ARREST & CASE DISPOSITION**

CASE NAME: Intervention Services I
Valuemark Laurel Oaks Behav. HC

CASE NUMBER: 19-99-05-0009
19-98-05-0004

M.F.C.U. INVESTIGATOR: Kelly Timbrook

DATE: May 31, 2000

ARRESTS:

Subject #1/DOB: Sharon Lewis Steyer
October 23, 1960

Charges: Count One: Medicaid Provider Fraud; F.S. 409.920(2)(a); (F-3)
Count Two: Medicaid Provider Fraud; F.S. 409.920(2)(a); (F-3)

COURT INFORMATION:

Court Case Number: CR00-7020

Court of Record: Circuit Court of the Ninth Judicial Circuit, Orange County, Florida

AFFIDAVIT IN SUPPORT OF INFORMATION

Your Affiant, Kelly Timbrook, has been employed as a Senior Investigator with the Office of the Attorney General, State of Florida, Medicaid Fraud Control Unit (MFCU), since April 10, 1998. Prior to employment with the Florida unit, Affiant was employed as an investigator for the West Virginia MFCU from July 1989 forward. As such, Affiant has conducted several investigations of Medicaid providers suspected of committing fraud and/or abuse against the Medicaid Program.

Your Affiant was assigned to investigate allegations of Medicaid Provider Fraud by Valuemark Inc., and Intervention Services Inc., both enrolled providers of the Florida Medicaid Program, operating within the State of Florida, who provide community mental health services. Your Affiant and the MFCU had authority to investigate these allegations pursuant to Florida Statute 409.920.

During the course of my investigation, Affiant learned that between March 1, 1997, and May 21, 1999, Sharon STEYER, a former employee of both *Valuemark* and *Intervention Services*, falsified documentation of services which resulted in false claims to be submitted to the Florida Medicaid program in violation of FS 409.920(2)(a).

STEYER, a licensed Mental Health Counselor, admitted to MFCU investigators via sworn statements on May 25, 1999, and June 18, 1999, that during the aforementioned time period, she had falsified clinical documentation by claiming face-to-face initial psychological assessments either not performed on the dates indicated, or not performed at all. STEYER also prepared initial assessments of Medicaid clients, reflecting that they met the medical criteria and necessity for Intensive Therapeutic On-Site Service (ITOS), when they could not benefit from this type of service. STEYER further admitted to instructing subordinate therapists for whom she was responsible, to "round up" therapy contact hours for Medicaid recipients, all in violation of Medicaid Program rules.

ITOS services are designed to provide mental health clients with assistance in problem solving, behavior skills, and other functional deficits. The services must be provided "on-site," which is defined as the area where the client is living, working, or participation in education activities. The therapy must be of at least one-hour duration to be reimbursed by Medicaid. This need not be a continuous time period but must be provided in one day.

Interviews and sworn statements of more than thirty families who were clients of Valuemark Inc., and its therapists, were completed by MFCU investigators. These interviews, coupled with extensive medical chart reviews of these same clients, substantiated falsification of documentation supporting Medicaid billing.

Staff at Intervention Services performed an internal audit, based upon information provided by STEYER. Contact was made with more than 190 of STEYER's clients, in


19-98-05-0004-

order to verify the extent of false billing. The results showed that, over the course of approximately eight months, STEYER had billed for more than thirty evaluations where she never saw the client face-to-face. STEYER's actions also resulted in treatment plans and ITOS services based on her fraudulent evaluations being billed, cascading the effect of her fraud. Total losses were approximately \$18,800. In furtherance of this scheme, STEYER also forged parents' signatures on documentation, including progress notes.

These activities by STEYER resulted in false claims being submitted to the Florida Medicaid Program, resulting in Medicaid reimbursement to either Valuemark Inc., or Intervention Services, Inc., to which they were not entitled.

Based upon the sworn statements obtained and the interviews conducted, the review of billing records and patient charts, Affiant feels there is probable cause to believe Sharon STEYER committed multiple violations of FS 409.920(2)(a), Medicaid Provider Fraud.

FURTHER AFFIANT SAYETH NOT


AFFIANT

Kelly Timbrook
Senior Investigator

Sworn to me and subscribed this
18 day of May A.D. 2000


Signature of Person Administering Oath

CAG-LEC # 31