STATE OF INDIANA COUNTY OF HENDRICKS	) )ss: )	IN THE HENDRICKS	COURT
	)	INFORMATION	
	)	COUNTS: I-V	
	)	FORGERY	
	)	Class C Felony	
	)	I.C. 35-43-5-2	
*	)		
STATE OF INDIANA	)	COUNTS: VI-VIII	
	) .	NEGLECT OF A DEPENDENT	
	)	Class D Felony	
v.	)	I.C. 35-46-1-4	
	)		
	)	COUNTS: IX	
CHAROLETTE MOODY	)	MEDICAID FRAUD	
a.k.a. Charolette Martin	)	Class D Felony	
	)	I.C. 35-43-5-7.1(a)(2)	
W/F DOB	)	*	
	)	COUNTS X-XIV	
	)	MEDICAID FRAUD	
	)	Class D Felony	
	)	I.C. 35-43-5-7.1(a)(4)	

I, Brian Goodwin, the undersigned affiant, being duly sworn on my oath or having affirmed, say that:

CAUSE NO.

## COUNT I FORGERY

On or about June 9, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly, with intent to defraud, made or uttered a written instrument in such a manner that it purports to have been made at a different time, with different provisions, or by authority of one who did not give authority, to wit: Moody

made and/or uttered a Nursing Flow Sheet/timesheet #9884539 to Maxim Healthcare Services that contained different provisions than were contained on the duplicate copy signed and approved by her patient's family member; and the sheet submitted to Maxim overstated the hours Moody had worked and/or the services she had provided.

### COUNT II FORGERY

On or about June 10, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly, with intent to defraud, made or uttered a written instrument in such a manner that it purports to have been made at a different time, with different provisions, or by authority of one who did not give authority, to wit: Moody made and/or uttered a Nursing Flow Sheet/timesheet #9884541 to Maxim Healthcare Services that contained different provisions than were contained on the duplicate copy signed and approved by her patient's family member; and the sheet submitted to Maxim overstated the hours Moody had worked and/or the services she had provided.

# COUNT III FORGERY

On or about June 11, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly, with intent to defraud, made or uttered a written instrument in such a manner that it purports to have been made at a different time, with different provisions, or by authority of one who did not give authority, to wit: Moody

made and/or uttered a Nursing Flow Sheet/timesheet #9884549 to Maxim Healthcare Services that contained different provisions than were contained on the duplicate copy signed and approved by her patient's family member; and the sheet submitted to Maxim overstated the hours Moody had worked and/or the services she had provided.

### COUNT IV FORGERY

On or about January 23, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly, with intent to defraud, made or uttered a written instrument in such a manner that it purports to have been made at a different time, with different provisions, or by authority of one who did not give authority, to wit: Moody made and/or uttered a Nursing Flow Sheet/timesheet #8338279 to Maxim Healthcare Services that contained different provisions than were contained on the duplicate copy signed and approved by her patient's family member; and the sheet submitted to Maxim overstated the hours Moody had worked and/or the services she had provided.

## COUNT V FORGERY

On or about February 27, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly, with intent to defraud, made or uttered a written instrument in such a manner that it purports to have been made at a different time, with different provisions, or by authority of one who did not give authority, to wit: Moody

made and/or uttered a Nursing Flow Sheet/timesheet #9353885 to Maxim Healthcare Services that contained different provisions than were contained on the duplicate copy signed and approved by her patient's family member; and the sheet submitted to Maxim overstated the hours Moody had worked and/or the services she had provided.

#### COUNT VI NEGLECT OF A DEPENDENT

On or about June 9, 2014, in Hendricks County, State of Indiana, Charolette Moody, a Licensed Practical Nurse having the care of her patient K.B., a child with special needs, knowingly abandoned K.B. when K.B. was under her care, to wit: Moody left K.B.'s home during the time Moody was being paid to provide medical care and constant supervision of K.B.

### COUNT VII NEGLECT OF A DEPENDENT

On or about June 10, 2014, in Hendricks County, State of Indiana, Charolette Moody, a Licensed Practical Nurse having the care of her patient K.B., a child with special needs, knowingly placed K.B. in a situation that endangered her life or health and/or knowingly abandoned K.B., to wit: Moody left K.B. while she was being paid to provide medical care and constant supervision of her patient and/or failed to provide critical life-saving medication to K.B.

### COUNT VIII NEGLECT OF A DEPENDENT

On or about June 11, 2014, in Hendricks County, State of Indiana, Charolette Moody, a Licensed Practical Nurse having the care of her patient K.B., a child with special needs, knowingly placed K.B. in a situation that endangered her life or health and/or knowingly abandoned K.B., to wit: Moody left K.B. while she was being paid to provide medical care and constant supervision of her patient and/or failed to provide critical life-saving medication to K.B.

### COUNT IX MEDICAID FRAUD

On or between June 9, 2014 and June 12, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly obtained payment from the Medicaid Program by means of a false or misleading written statement, to wit: Moody knowingly submitted a false timesheet to her employer, Maxim Healthcare Services, who compensated Moody with Medicaid funds paid as a result of her deception.

## COUNT X MEDICAID FRAUD

On or between June 9, 2014 and June 12, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly falsified documents or records of Maxim Healthcare Services that are required to be kept under the Medicaid Program, to wit: Moody falsified Nursing Flow Sheets/timesheets #9884539, #9884541, and

#9884549; by overstating the number of hours she worked and/or the services she provided to a Medicaid recipient.

#### COUNT XI MEDICAID FRAUD

On or between June 9, 2014 and June 12, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly falsified documents or records of Maxim Healthcare Services that are required to be kept under the Medicaid Program, to wit: Moody falsified a Medication Administration Record by falsely claiming to have administered medication to her patient K.B., a Medicaid recipient, when she had not done so.

### COUNT XII MEDICAID FRAUD

On or about January 23, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly falsified a document or record of Maxim Healthcare Services that was required to be kept under the Medicaid Program, to wit: Moody falsified Nursing Flow Sheet/timesheet #8338279, by overstating the number of hours she worked and/or the services she provided to K.B., a Medicaid recipient.

## COUNT XIII MEDICAID FRAUD

On or about February 27, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly falsified a document or record of Maxim Healthcare Services that was required to be kept under the Medicaid Program, to wit: Moody falsified Nursing Flow Sheet/timesheet #9353885, by overstating the number of hours she

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worked and/or the services she provided to K.B., a Medicaid recipient.

### COUNT XIV MEDICAID FRAUD

On or between January 22, 2014 and April 22, 2014, in Hendricks County, State of Indiana, Charolette Moody knowingly altered with intent to defraud, or falsified a document or record of Maxim Healthcare Services that is required to be kept under the Medicaid Program, to wit: Moody altered or falsified one or more of the following Nursing Flow Sheets: #8338275; #6243251; #9243253; #9353805; #9353807; #9353827; #9353830; #9169790; #9353856; #9353864; #9353875; #9353839; #9353845; #9353847; #9099547; #9099553; #9353877; #9099502; #9099509; #9099544; #9430051; #9430056; #9099569; #9099573; #9099575; #9430021; #9430058; #9430072; #9430087; #9430095; #9430097; #9353602.

all of which is contrary to statute and against the peace and dignity of the State of Indiana.

I swear (affirm), under penalty of perjury as specified by IC 35-44.1-2-1 that the foregoing representations are true as I am informed and believe.

<u>(a-19-18</u> Date

Brian Goodwin, Investigator

Indiana Medicaid Fraud Control Unit Affiant

Adres

Attorney

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### STATE'S WITNESSES:

Brian Goodwin, MFCU Investigator
Laurie B.
Brad B.
Julie Ellis
Mark Miller
Bryce Lowery
Julie Stillabower, R.N.
Sheryle Cullen
Karen Miller
Keeper of the records for Dr. Mark Kahn
Keeper of the records for Dr. Ronda Hamaker

### AFFIDAVIT FOR PROBABLE CAUSE

I, Brian Goodwin, swear of affirm that I learned the following facts during the course of my official duties as an Investigator with the Medicaid Fraud Control Unit of the Indiana Attorney General's Office:

In February of 2015, the Medicaid Fraud Control Unit

("MFCU") received a referral regarding potential timecard fraud
and neglect of a patient by a home health nurse named Charolette
Moody, who had previously been employed as a Licensed Practical
Nurse ("LPN") for Maxim Healthcare Services ("Maxim") in
Indianapolis. On June 18, 2014, Maxim received a complaint by a
client's mother, Laurie B., who reported that Moody had left
K.B., her 14-year-old special-needs child, unattended for
significant periods of time during the week of June 9-12, 2014,
and had falsified her documentation regarding administering
necessary medication to K.B. Laurie B. also reported that Moody
had not accounted for the missing time on her paperwork. Laurie
had spoken to Moody on June 12th, and told her that her services
were no longer needed. As a result of this complaint, Maxim
placed Moody on suspension pending their internal investigation.

Maxim is a nationwide provider of home health services, whose staff of nurses, therapists and home health aides provide services ranging from housework and companionship to skilled nursing care for adults and children with a variety of health

<sup>&</sup>lt;sup>1</sup> Moody was married on May 30, 2015, during the course of the investigation; however, for purposes of this affidavit, I have referred to her by the name she used during the events relevant to the criminal charges.

conditions. Bryce Lowery ("Lowery"), a Healthcare Recruiter for Maxim, was assigned to gather additional details regarding Moody's actions during the week of June 9th, which were provided by Laurie via an email on July 15, 2014. Laurie noted that, despite being scheduled to work 7am-5pm shifts, Moody arrived late each day; spent considerable time on personal calls on her cell phone (one day even locking herself in one of the bedrooms while yelling at her boyfriend on the phone); left the house for hours during her scheduled work time-without permission and without arranging coverage for K.B.'s care; falsified her paperwork; and left early each day. Particularly disturbing, Laurie noted that Moody left at 11:30am on June 10th and did not return; however, Moody had filled out paperwork that indicated that she had given K.B. her afternoon medications (at 2pm and 3pm), despite the fact that she was not at the house at the time. These allegations were corroborated by other Maxim employees who were at the home during the week. Maxim confirmed that Moody's absences were not approved and were not accounted for on Moody's timesheets. Moody was terminated on August 25, 2014, at the conclusion of Maxim's investigation.

After the referral to our office, the case was initially assigned to two of my MFCU colleagues: Cheryl (Page) Lowry and Gerry Hoffa, who each subsequently left the Attorney General's Office while the investigation was still pending. The initial

focus of their inquiry was limited to Moody's actions during the week of June 9th - 12th, 2014. Lowry, Hoffa and I all spoke to various members of the administrative staff at Maxim, including Kelly Suchar, Moody's immediate nursing supervisor; Lowery; Mark Miller; and Clinical Nurse Manager Julie Ellis ("Ellis"). These witnesses educated us regarding the internal operations and policies at Maxim, and explained the methods Maxim employees use to document their time and account for their services.

After I took over the file, I contacted Laurie, in order to arrange a visit to the home and to learn more about the daily routine for providing care for K.B. At that time, I obtained additional records from Laurie that prompted me to expand the scope of the investigation, as outlined below. At the conclusion of this case, I believe that the evidence shows not only that Moody placed K.B. in danger by her actions in June, but that she had been engaged in an ongoing pattern of fraud that had gone undetected for months.

At all times relevant to this investigation, Moody lived in Avon, Indiana. Moody had worked for Maxim in Texas before she moved back to Indiana. She obtained her Indiana nursing license in November of 2012, and applied to Maxim in Indianapolis in December of 2012. After being hired, Moody was assigned in February of 2013 to provide care for one of Laurie's four

children who receive in-home nursing care through Maxim. Shortly thereafter, Moody began providing one-on-one care to K.B.

K.B. has a condition called Kabuki Syndrome, which is a rare genetic disorder, characterized by growth deficiency and abnormalities in the skeletal system and multiple organ systems in the body. The symptoms vary from person to person, but many patients, like K.B., have difficulty eating, absorbing, and digesting food, and are prone to infections. According to K.B.'s Care Plan, she requires constant supervision, due to her susceptibility to frequent seizures; she also has difficulty swallowing and uses a G-tube for nutrition and taking many of her medications. K.B. tires easily, and she requires multiple routine medications that are administered on a strict schedule throughout the day; however, despite being developmentally delayed, K.B. is alert and oriented and has a full range of motion in her arms and legs. K.B. enjoys watching cartoons and playing video games, and she receives academic instruction at home from a teacher from the Avon school district.

Moody's primary responsibilities as K.B.'s nurse were to monitor her condition; properly and promptly administer her medications; and accurately document her care. One medication, Cortef, an anti-inflammatory corticosteroid, must be given on schedule three times daily, through the G-tube; this process involves dissolving a tablet in water; attaching tubing to a

port site; and using a syringe to administer the medication through the tubing. The tubing and other supplies must then be flushed and cleaned, and they are left on the counter to air dry. Carafate, which settles the stomach, is given an hour later. The consequences of missing a dose of Cortef can be severe; without it, K.B. becomes lethargic, and could slip into a coma and possibly even die. Due to the fragile nature of K.B.'s health, it is important not only that her medication is given in a timely manner, but that the documentation regarding its administration be accurate, in the event that K.B. requires subsequent medical intervention.

Laurie, who is a pediatric occupational therapist, does not have a set schedule, but travels to her patient appointments during the day, while her husband, Jerold ("Brad"), works nights, and is home sleeping during the day. Laurie and Brad have a teenaged daughter, Kiara, who is frequently in the home after school, in the mid-late afternoon. Three of Laurie and Brad's other children also receive in-home nursing care from nurses Julie Stillabower ("Stillabower")—who was usually scheduled to work the same hours as Moody—and Sheryle Cullen ("Cullen") and Karen Miller ("nurse Miller"), whose shifts would partially overlap with Moody's. Despite the fact that other nurses may be present in the home, each is responsible for

providing one-on-one care for their patient, and they are not supposed to "share" duties.

In order to track patient progress and the billable services provided by its employees, as required by Medicaid, Maxim provides its nursing staff with a two-sided duplicate form called a Nursing Flow Sheet, which also functions as the employee's timesheet. The Flow Sheet is used to record the patient's vitals, activities, behaviors and emotions, as well as the administration of medications and any significant activities and observations during the shift. The Flow Sheet has a space on the front page for the nurse to sign-in and sign-out, and Maxim employees are instructed that the time entries are supposed to reflect their actual arrival and departure times-not simply the times that they are scheduled to work their shift. If nurses leave the home during their shift for any length of time-which must be approved in advance, so that other family members or relief staff can be sent to provide coverage-they are expected to sign out on the original flow sheet and create a new one when they return. Each Flow Sheet has a unique sequential number at the top, which is the same on both the yellow and white copies. At the end of a shift, the form must be signed on the bottom of the back page by a parent or other responsible family member; the pages are then separated and the duplicate "yellow" copy is left with the family, while the top "white" copy is submitted to Maxim. The forms, therefore, should be filled out and signed before they are separated, and the white and yellow copies should contain identical information.

According to Ellis—and Maxim written policy—once the Nursing Flow Sheets are completed, signed by the client's family member, and separated from the duplicate, no changes are permitted to be made to that document. If a mistake is made on the form before it is detached, the nurse may cross out the incorrect information and initial and date the change. However, once the form is signed and separated, even the original author may not change it; if an addition or correction needs to be made at that point, a different form is used. Ellis provided me with documentation to show that Moody attended and completed training regarding Maxim's policies and procedures, and I found at least four examples of Moody using the appropriate correction form at various times during 2013 and 2014.

In addition to the Nursing Flow Sheet, Moody had to fill out a Medication Administration Record ("MAR"), which contained information about all medications prescribed for K.B., which documented the administration time for each drug. The nurse is required to note the time of administration in the appropriate box, and initial the entry; this is supposed to be done at the time the task is completed.

On June 28, 2017, I went to Laurie's home and interviewed her, Stillabower and Cullen. I had a chance to observe where her medications are kept, and to learn how the process for administering her medications takes place. Laurie provided me with a binder of the yellow Nursing Flow Sheets related to K.B. When I later reviewed these records, I noticed that many of Moody's forms did not have entries showing her time out. Because this information would have been needed for Maxim to be able to bill Medicaid for her services, I contacted Maxim to request their white copies of Moody's Flow Sheets. When I compared the white copies of the Flow Sheets with the yellow Flow Sheets that had missing "time out" entries, I discovered that-with the exception of two dates in March of 2013-all of the white copies had a "time out" written on the form. Before assuming that Moody herself had added the time later, I arranged to meet with Ellis and Mark Miller at Maxim, to discuss who might have added that information, and where it would have come from.

In the event that a Flow Sheet is submitted without a necessary time entry, a Maxim employee reaches out to the family caregiver, to confirm the correct information for billing purposes. Due to the strict policy restricting changes to the completed Flow Sheets, however, this information is not added to the incomplete Flow Sheet, but is included in a note in Maxim's Vivid Care computer system, which is then reviewed by the

billing department. Ellis was able to find the entries for the two dates in March of 2013 that had no "time out" on the white sheet; in both cases, Maxim had confirmed Moody's departure time with Laurie and made a note in the computer. Maxim could find no other notes in their system for the period of March 2013 until June 11, 2014; therefore, the white forms would have been submitted to Maxim with the information already included—and no administrative employee would have added that information.

Once I discovered the discrepancies with Moody's Nursing Flow Sheets, I spoke to Laurie to find out whether she would have noticed the missing information at the top of the sheet. According to Laurie, Moody would often leave the house before she got home from work, so Brad or their oldest daughter, Kiara, would sign off of the Flow Sheet. Even when she was at home, Laurie recalled that Moody was frequently rushing out the door at the end of her shift, and would present her flow sheet to Laurie in the hallway or at the door, turned to the back page that contained the signature line. Since she would have already verbally discussed any issues regarding K.B.'s day with Moody before she left—and since she trusted Moody—she did not have a habit of reviewing the time in/out blanks. In addition, Moody would occasionally leave the house with both parts of the form, and bring back the yellow copies at the end of the week.

As I engaged in a closer comparison of the white and yellow copies of the Nursing Flow Sheets, I discovered repeated instances where Moody had added additional details on the second page of the white copy, in a section called "nursing documentation," that were not on the yellow form when it was signed by the family member at the house. The additional information is written in Moody's handwriting, and adds information about purported events at the end of the day, which appears to justify the "time out" entry that was added to the white form after the pages were separated. Nothing about the white copy as it was submitted would have aroused suspicion by the staff at Maxim; the discrepancies between the documents were only evident upon a careful side-by-side comparison of the yellow and white copies-which would have been unlikely to occur, since the yellow copy was left at the home. Maxim submitted Moody's hours-and Medicaid paid the claims-based upon the information Moody provided in the timesheets.

Based on interviews of witnesses and review of the documents, this investigation has revealed the following evidence that Moody altered or falsified her Nursing Flow Sheets and the MAR while providing care to K.B. in 2014:

<u>June 9, 2014</u>: Moody's white Nursing Flow Sheet #9884539 shows a "time in" at 7:00am and a "time out" at 1700pm (5:00 pm). Brad signed off on the form.

Laurie was at home when Moody arrived at 7:30am. Laurie left the home at 7:45am. Due to two patient cancellations, Laurie returned home at noon, and Moody was gone. The other nurses reported that Moody left at 11:30, saying she was going to McDonald's. Laurie went to both nearby McDonald's locations, but couldn't locate Moody. Moody came back to the house at 2:30pm. Laurie was still at the house, but left at 3:00 for an appointment. When Laurie returned home before 5:00pm, Moody was not there. Therefore, Moody left K.B. unsupervised at the home for approximately three hours and failed to account for the gap on her timesheet.

<u>June 10, 2014:</u> Moody's white Nursing Flow Sheet #9884541 shows her hours reported as 7:00am-1700pm (5:00pm). The form was signed by Kiara. Moody documented giving Cortef to K.B. at 2:00 and Carafate at 3:00pm.

Moody also made entries on the MAR that indicated administration of Cortef at  $1400 \ (2pm)$  and Carafate at  $1500 \ (3pm)$ .

Laurie was at the house when Moody arrived at 7:20am. Laurie left the house shortly thereafter. Moody left the home at 11:30am and did not return. This is confirmed by Laurie (who returned home at noon); Cullen; and Suchar, who came to the home to assess another child. Laurie took a photo of the top of the yellow copy of the Nursing Flow Sheet #9884541, which had no "time out;" however, the yellow copy is now missing.

Therefore, Moody left K.B., without ensuring coverage for her care; failed to account for the hours she did not work; and failed to provide necessary medication to K.B., while falsely documenting that it was administered.

<u>June 11, 2014</u>: Moody's white Nursing Flow Sheet #9884549 shows her reported hours as 7:00am-1400pm (2:00pm). The form was signed by Brad.

Laurie was home when Moody arrived at 7:30am. Laurie left at 9:00am, but returned at 10:15; she then left for an appointment with Brad. Nurse Miller reported that Moody left the home at 11:00. When Laurie and Brad returned at 1:15pm, Moody was not there. Moody returned at 2:00pm, and Miller confronted her about not giving K.B. her medication. Moody claimed that she did; however, there was no evidence that it was done, and no supplies were out on the counter.

After the confrontation with Nurse Miller, Moody left the residence shortly after 2:00pm.

Laurie returned home at 4:00pm. K.B. was very lethargic that evening, but recovered after Laurie administered Cortef.

I obtained a copy of a photo that Laurie took of the top portion of the yellow copy of Flow Sheet #9884549, which had no "time out" entry; however, Moody subsequently obtained the yellow copy and submitted it to Maxim, claiming that she had lost the white copy. The yellow copy now had a "time out" of 1400pm (2:00pm). The Nursing Flow Sheet does not contain documentation that Moody administered Cortef or Carafate to K.B. in the afternoon. While the MAR has administration entries for both medications, the original times for Cortef (1400) and Carafate (1500) are crossed out; Moody changed each to a time an hour earlier. The changes and her initials are in a different color of ink from the original entries.

In addition, I identified 34 instances where Moody altered or falsified her Nursing Flow Sheets between January 22<sup>nd</sup> and April 22<sup>nd</sup> 2014, by adding information to the white copy after it was signed by a family member and separated from the yellow copy. In two of those instances, I obtained evidence from other medical providers that directly contradict Moody's documentation:

January 23, 2014: The yellow copy of Moody's Flow Sheet has no "time out" entry. The last entry under "nursing documentation" is at 12:30pm. The form is signed by Laurie.

The white copy shows a "time out" at 1400 pm (2:00 pm). The white copy also has an entry added under the "nursing documentation" section at 1400 claiming that Moody reported off to Laurie and K.B. was stable; however, Laurie's calendar and records from K.B.'s dentist, Dr. Mark Kahn, indicate that K.B. and her siblings were at the dentist's office at that time. The dental office is 21 minutes from

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the home. K.B. had a 1:30pm appointment, which ended at 2:29 pm. Moody did not accompany the family on the visit to the dentist.

February 27, 2014: The yellow copy of Moody's Flow Sheet has no "time out" entry. The last entry under "nursing documentation" is at 1300 pm (1:00pm). This note indicates that Moody gave K.B. her Cortef, and that K.B. had a doctor's appointment. The form is signed by Laurie.

The white copy shows a "time out" at 1500 (3:00pm) The white form also has additional information under the "nursing documentation" section for the 1:00 entry, and another entry at 3pm, claiming that K.B. was left with her mother and was stable; however, Laurie's calendar and records from K.B.'s doctor, Dr. Ronda Hamaker, show that she had a 2:00pm appointment with Dr. Hamaker, whose office is 39 minutes from the home. K.B.'s vitals were taken at the doctor's office at 2:00pm, and the doctor signed off at 3:16 pm. Moody did not accompany the family to the doctor visit.

Based on the evidence gathered, I believe that probable cause exists to charge Moody with criminal acts related to falsifying her Nursing Flow Sheets/timesheets and failing to provide necessary medication to her patient, K.B.

I affirm under the penalty of perjury as specified by IC 35-41 that the foregoing representations are true to the best of my knowledge and belief.

Dated: 6-19-18

Bin K. Stor