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Los Angeles Medical Equipment Supplier Sentenced to 55 Months in Prison for Medicare Fraud

WASHINGTON—The owner and operator of a Los Angeles durable medical equipment (DME) company was sentenced to 55 months in prison today in connection with a nearly \$1 million power wheelchair fraud scheme, the Departments of Justice and Health and Human Services (HHS) announced.

Ajibola Adekeunle Sadiqr, 51, was also ordered to pay \$508,134 in restitution by U.S. District Judge John F. Walter of the Central District of California. In addition, Sadiqr was ordered to serve three years of supervised release following his prison term.

Sadiqr pleaded guilty on Jan. 27, 2010, to conspiracy to commit health care fraud. According to court documents, Sadiqr owned and operated Cooper Medical Supply. Sadiqr admitted that between January 2006 and September 2009, he conspired with Leonard Nwafor, the owner of another DME supply company, and Maria Nela Moreno, a patient recruiter, and others to purchase fraudulent prescriptions and medical documents. Sadiqr then used those documents to submit false claims to Medicare for expensive, high-end power wheelchairs and DME he claimed he supplied to Medicare beneficiaries who lived hundreds of miles from Cooper Medical Supply's store front location in Los Angeles. According to court documents, over 80 percent of Cooper Medical Supply's beneficiaries lived more than 100 miles from Cooper Medical Supply in cities and towns such as Fresno and Oakland, Calif.

Sadiqr also admitted that he knew Cooper Medical Supply's beneficiaries did not need the power wheelchairs and other DME he billed to Medicare. Sadiqr also admitted that he knew the doctor and beneficiary information contained in the fraudulent prescriptions and medical documents came from fraudulent medical clinics and patient recruiters like Moreno. Sadiqr admitted that he used Cooper Medical Supply to submit or cause the submission of approximately \$950,000 in false claims to Medicare as a result of this scheme.

In sentencing Sadiqr, Judge Walter took into consideration Sadiqr's criminal history, which included prior arrest and conviction for theft of personal property and receiving stolen property.

Sadiqr's co-conspirators, Nwafor and Moreno, were convicted in September 2008 and February 2010, respectively, of conspiracy to commit health care fraud and health care fraud. Nwafor was sentenced in March 2010 to nine years in prison. Moreno's sentencing is scheduled for May 24, 2010.

Today's sentencing was announced by Assistant Attorney General Lanny A. Breuer of the Criminal Division; U.S. Attorney André Birotte Jr. for the Central District of California; Tony

Sidley, Assistant Chief of the California Department of Justice, Bureau of Medi-Cal Fraud and Elder Abuse; Glenn R. Ferry, Special Agent-in-Charge for the Los Angeles Region of the Office of Inspector General (OIG) for HHS (HHS-OIG); and Steven Martinez, Assistant Director in Charge of the FBI's Los Angeles Field Office

The case is being prosecuted by Assistant U.S. Attorney Kerry C. O'Neill of the Central District of California and Trial Attorney Jonathan T. Baum of the Criminal Division's Fraud Section. The case is being investigated by the California Department of Justice and HHS-OIG. The case was brought as part of the Medicare Fraud Strike Force, supervised by the Criminal Division's Fraud Section and the U.S. Attorney's Office for the Central District of California.

Since their inception in March 2007, Strike Force operations in seven districts have obtained indictments of more than 560 individuals who collectively have falsely billed the Medicare program for more than \$1.2 billion. In addition, HHS Centers for Medicare and Medicaid Services, working in conjunction with the HHS-OIG, are taking steps to increase accountability and decrease the presence of fraudulent providers.