1 2 3 4 FILED - SOUTHERN DIVISION CLERK, U.S. DISTRICT COURT 5 6 **DFC 1** 0 2015 7 CENTRAL DISTRICT OF CALIFORNIA UNITED STATES DISTRICT COURT 8 FOR THE CENTRAL DISTRICT OF CALIFORNIA 9 1,0 SOUTHERN DIVISION CR15-00155 UNITED STATES OF AMERICA, 0 12 ₹\$Plaintiff, <u>I N F O R M A T I O N</u> 13 [18 U.S.C. § 371: Conspiracy; 42 U.S.C. § 1320a-7b(b)(2)(A): MICHAEL R. DROBOT. 14 Illegal Remunerations for Health Care Referrals 15 Defendant. 16 17 The United States Attorney charges: 18 COUNT ONE 19 [18 U.S.C. § 371] 20 RELEVANT PERSONS AND ENTITIES 21 At all times relevant to this Information: 22 Pacific Hospital of Long Beach ("Pacific Hospital") was a 23 hospital located in Long Beach, California, specializing in 24 surgeries, particularly spinal and orthopedic surgeries. From at least in or around 1997 to in or around November 2013, Pacific 25 Hospital was owned and/or operated by Michael D. Drobot ("Drobot 26

Senior"), defendant MICHAEL R. DROBOT's ("defendant DROBOT") father.

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- California Pharmacy Management, Inc. ("CPM") was a corporation formed and owned by Drobot Senior. CPM contracted with doctors to manage doctors' in-house pharmaceutical dispensaries, providing such services as logistical, billing, and collection services on behalf of the in-house pharmacies. From 2003 to 2007, defendant DROBOT operated and/or controlled CPM along with Drobot Senior.
- Industrial Pharmacy Management LLC ("IPM," and collectively 3. with CPM, the "Dispensary Management Companies"), was a limited liability company formed in 2006 by Drobot Senior. Like CPM, IPM also contracted with doctors to manage doctors' in-house pharmaceutical dispensaries. From 2007 to 2010, defendant DROBOT and Drobot Senior together owned, and defendant DROBOT operated, IPM. From 2010 to at least November 2013, defendant DROBOT was the majority owner of IPM, and controlled and directed its operations.

В. RELEVANT LEGISLATION

The California Worker's Compensation System ("CWCS") was a system created by California law to provide insurance covering treatment of injury or illness suffered by individuals in the course of their employment. Under the CWCS, employers were required to purchase workers' compensation insurance policies from insurance carriers to cover their employees. When an employee suffered a covered injury or illness and received medical services, the medical service provider submitted a claim for payment to the relevant insurance carrier, which then paid the claim. Claims were submitted to and paid by the insurance carriers either by mail or electronically. The CWCS was governed by various California laws and regulations.

1 5. The California State Compensation Insurance Fund ("SCIF") was a non-profit insurance carrier, created by the California Legislature, which provided workers' compensation insurance to employees in California, including serving as the "insurer of last resort" under the CWCS system for employees without any other coverage.

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- California law, including but not limited to the California Business and Professions Code, the California Insurance Code, and the California Labor Code, prohibited the offering, delivering, soliciting, or receiving anything of value in return for referring a patient for medical services.
- The Federal Employees' Compensation Act ("FECA") provided benefits to civilian employees of the United States, including United States Postal Service employees, for medical expenses and wage-loss disability due to traumatic injury or occupational disease sustained while working as a federal employee. Benefits available to injured employees included rehabilitation, medical, surgical, hospital, pharmaceutical, and supplies for treatment of injury. The Department of Labor ("DOL") - Office of Workers' Compensation Programs ("OWCP") was the governmental body responsible for administering the FECA. When a federal employee suffered a covered injury or illness and received medical services, the medical service provider submitted a claim for payment by mail or electronically to Affiliated Computer Services ("ACS"), located in London, Kentucky, which was contracted with the DOL to handle such claims. Upon approval of the claim, ACS sent payment by mail or electronic funds transfer from the U.S. Treasury in Philadelphia, Pennsylvania, to the medical service provider.

8. Federal law prohibited the offering, delivering, soliciting, or receiving of anything of value in return for referring a patient for medical services paid for by a federal health care benefit program.

C. OBJECTS OF THE CONSPIRACY

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1320a-7b(b)(2)(A).

- 9. Beginning in or around 2007, and continuing to in or around November 2013, in Orange and Los Angeles Counties, within the Central District of California, and elsewhere, defendant DROBOT, together with others known and unknown to the United States Attorney, knowingly combined, conspired, and agreed to commit the following offenses against the United States: Mail Fraud and Honest Services Fraud, in violation of Title 18, United States Code, Sections 1341 and 1346; Use of an Interstate Facility in Aid of Racketeering, in violation of Title 18, United States Code, Section 1952(a)(3); Conducting Monetary Transactions in Property Derived from Specified Unlawful Activity, in violation of Title 18, United States Code, Section 1957; and Payment of Illegal Remunerations for Health Care
- D. MANNER AND MEANS TO ACCOMPLISH THE OBJECTS OF THE CONSPIRACY

Referrals, in violation of Title 42, United States Code, Section

- 10. The objects of the conspiracy were to be carried out, and were carried out, in the following ways, among others:
- a. Drobot Senior and other co-conspirators offered to pay kickbacks to dozens of doctors, chiropractors, marketers, and others for their referring workers' compensation patients to Pacific Hospital for spinal surgeries, other types of surgeries, magnetic resonance imaging, toxicology, durable medical equipment, and other services, to be paid primarily through CWCS and the FECA. As of

- b. Influenced by the promise of kickbacks, doctors, chiropractors, marketers, and others referred patients insured through the CWCS and the FECA to Pacific Hospital for spinal surgeries, other types of surgeries, and other medical services. The workers' compensation patients were not informed that the medical professionals had been offered kickbacks to induce them to refer the surgeries to Pacific Hospital.
- c. The surgeries and other medical services were performed on the referred workers' compensation patients at Pacific Hospital.
- d. Pacific Hospital submitted claims, by mail and electronically, to SCIF and other workers' compensation insurance carriers for payment of the costs of the surgeries and other medical services.
- e. As defendant DROBOT and the other co-conspirators knew and intended, and as was reasonably foreseeable to them, in submitting claims for payment, Pacific Hospital made materially false and misleading statements to, and concealed material information from, SCIF and other workers' compensation insurance carriers, including that Pacific Hospital had offered or paid kickbacks for the referral of the surgeries and other medical services for which it was submitted claims.
- f. The insurance carriers paid Pacific Hospital's claims, by mail or electronically.

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Among other means used to pay kickback recipients, g. defendant DROBOT, Drobot Senior, and other co-conspirators caused the Dispensary Management Companies to pay certain doctors and chiropractors kickbacks for referring patients to Pacific Hospital for spine surgeries and other services, and used the Dispensary Management Companies' contracts with those doctors and chiropractors to cover up the kickback arrangement.

h. Defendant DROBOT and other co-conspirators recorded and/or tracked the number of surgeries and other medical services performed at Pacific Hospital due to referrals from the kickback recipients, as well as amounts paid to the kickback recipients for those referrals.

EFFECTS OF THE CONSPIRACY

- Had SCIF and the other workers' compensation insurance 11. carriers known the true facts regarding the payment of kickbacks for the referral of workers' compensation patients for surgeries and other medical services performed at Pacific Hospital, they would not have paid the claims or would have paid a lesser amount.
- 12. From in or around 2008 to in or around April 2013, Pacific Hospital billed workers' compensation insurance carriers approximately \$500 million in claims for spinal surgeries that were the result of the payment of a kickback; and defendant DROBOT or other co-conspirators paid kickback recipients between approximately \$20 million and \$50 million in kickbacks relating to those claims.

F. OVERT ACTS

13. On or about the following dates, in furtherance of the conspiracy and to accomplish the objects of the conspiracy, defendant DROBOT and other co-conspirators known and unknown to the United

States Attorney committed various overt acts within the Central District of California, and elsewhere, including, but not limited to, the following:

Overt Act No. 1: In or about March 2008, after Drobot Senior caused IPM to pay \$60,000 to Surgeon A as a kickback for spinal surgeries Surgeon A performed at Pacific Hospital, defendant DROBOT sought reimbursement for IPM from PSPM for the kickback payment made by IPM.

Overt Act No. 2: On or about May 12, 2008, Drobot Senior caused IPM to pay \$35,000 to Chiropractor A, of which \$18,000 represented a kickback for spinal surgeries performed at Pacific Hospital on patients referred by Chiropractor A.

Overt Act No. 3: On or about July 29, 2008, defendant DROBOT sent an email message to Executive A requesting a \$60,000 payment from Pacific Hospital to IPM as reimbursement for kickbacks paid by IPM for spinal surgeries performed at Pacific Hospital, including \$18,000 IPM had paid to Chiropractor A in kickbacks.

Overt Act No. 4: On or about March 10, 2009, defendant DROBOT advised Executive B that Surgeon B was estimated to perform three to four spinal surgeries per month at Pacific Hospital on patients referred to Surgeon B by Dr. Philip Sobol, which referrals were caused by kickbacks paid to Dr. Philip Sobol.

Overt Act No. 5: On or about June 15, 2011, defendant DROBOT received an email message from Pacific Hospital CFO James Canedo listing spinal surgeries performed by, among others, Surgeon C, Surgeon D, and Surgeon E, which were referred to Pacific Hospital by Dr. Philip Sobol, as a result of kickbacks paid to Dr. Philip Sobol.

Overt Act No. 6: On or about April 30, 2012, defendant DROBOT caused IPM to pay \$155,000 to Surgeon F, of which \$30,000 represented a kickback for spinal surgeries performed at Pacific Hospital, either by Surgeon F or by surgeons to whom Surgeon F referred surgical candidates.

Overt Act No. 7: On or about May 24, 2012, defendant DROBOT caused IPM to pay \$140,000 to Dr. Philip Sobol, of which \$60,000 represented a kickback for spinal surgeries performed at Pacific Hospital, either by Dr. Philip Sobol or by surgeons to whom Dr. Philip Sobol referred surgical candidates.

Overt Act No. 8: On or about July 2, 2012, Drobot Senior caused PSPM to pay \$23,706.80 to Surgeon B for performing surgeries at Pacific Hospital and for referring surgical candidates to Surgeon G for spinal surgeries at Pacific Hospital, including on patients covered by the FECA and CWCS.

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COUNT TWO

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$[42 \text{ U.S.C.} \S 1320a-7b(b)(2)(A)]$

- 14. Paragraphs 1 through 8 and 10 through 13 of this Information are re-alleged and incorporated as if fully set forth herein.
- 15. Beginning in or around 2003 and continuing to in or around November 2013, in Orange and Los Angeles Counties, within the Central District of California, and elsewhere, defendant MICHAEL R. DROBOT, together with others known and unknown to the United States Attorney, knowingly and willfully offered and paid remuneration, that is, cash and checks, directly and indirectly, to induce persons to refer individuals to Pacific Hospital for spinal surgery and other medical services for which payment could be made in whole and in part under a Federal health care program, namely, the FECA.

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