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PRESS RELEASE

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Two Maryland Women Arrested on Federal Charges Alleging They Defrauded D.C Medicaid Program Defendants Worked as Personal Care Aides

WASHINGTON – Two Maryland women who were employed as personal care aides were arrested today on separate federal charges. Both are charged with engaging in a scheme in which they allegedly submitted a combined \$1.7 million in false claims to the District of Columbia’s Medicaid program.

The announcement was made by U.S. Attorney Jessie K. Liu for the District of Columbia, Assistant Attorney General Brian A. Benczkowski of the Justice Department’s Criminal Division, Assistant Director in Charge Nancy McNamara of the FBI’s Washington Field Office, District of Columbia Inspector General Daniel W. Lucas, and Special Agent in Charge Maureen R. Dixon of the U.S. Department of Health and Human Services Office of Inspector General (HHS-OIG), for the region that includes Washington, D.C.

Temitope “Deborah” or “Temi” Oluwa-Bakare Ogunbiyi, 48, of Bowie, Maryland, and Nkiru “Nikki” Uduji, 48, of Lanham, Maryland, were arrested on two separate criminal complaints charging them each with health care fraud and health care fraud conspiracy. They made their first appearances this afternoon in the U.S. District Court for the District of Columbia. They were released on personal recognizance pending preliminary hearings next month.

According to the complaints, Ogunbiyi and Uduji were employed as personal care aides from approximately January 2013 through the present. Under the Medicaid program, personal care aides perform services intended to assist Medicaid beneficiaries in carrying out the activities of daily living. These can include helping beneficiaries get in and out of bed, bathe, dress, eat out, take medication, and engage in toileting. To receive personal care services under Medicaid, a beneficiary must obtain a prescription from a doctor.

Last year, both Ogunbiyi's and Uduji's billing practices drew the attention of the District of Columbia Department of Health Care Finance, and that led to an investigation.

According to the complaints, the investigation determined that Ogunbiyi submitted approximately \$1,071,247 in false claims between 2013 and the present, and Uduji submitted approximately \$568,830, during the same time. The complaints allege that these claims fall into three categories: claims purporting that they provided services in excess of 24 hours in a given day; claims purporting that they provided services to Medicaid beneficiaries to whom they provided no care at all; and claims purporting that they provided services to Medicaid beneficiaries to whom they paid illegal kickbacks. Ogunbiyi is also alleged to have submitted claims for services purportedly provided to Medicaid beneficiaries while she was on international travel.

The charges in a criminal complaint are merely allegations, and every defendant is presumed innocent until proven guilty beyond a reasonable doubt in a court of law.

The investigation into this matter was conducted by the FBI's Washington Field Office, the District of Columbia Medicaid Fraud Control Unit, and the Office of Inspector General for the U.S. Department of Health and Human Services.

The cases are being prosecuted by Trial Attorney Amy Markopoulos of the Criminal Division's Fraud Section and Assistant U.S. Attorney Denise Simmonds, with assistance from Paralegal Specialists Robert Fishman and Brittany Phillips of the U.S. Attorney's Office for the District of Columbia.

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