



# Department of Justice



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DISTRICT OF NEVADA

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## **TWO WOMEN SENTENCED FOR NEVADA MEDICAID FRAUD SCHEME**

**RENO, Nev.** – Two women were sentenced today for their guilty pleas to federal health care fraud charges after they defrauded the Nevada Medicaid program of approximately \$1 million, announced Daniel G. Bogden, United States Attorney for the District of Nevada.

Cassandra Little, 49, of Reno, was sentenced to 33 months in prison, three years of supervised release, and ordered to pay \$81,400 in restitution. Little pleaded guilty in March to 28 counts of health care fraud and 10 counts of money laundering.

Susan Hill, 66, of Las Vegas, was sentenced to 18 months in prison, three years of supervised release, and ordered to pay \$81,400 in restitution. Hill pleaded guilty in March to one count of health care fraud and one count of money laundering.

Senior U.S. District Judge Howard D. McKibben in Reno sentenced both women, and allowed them to self-report to federal prison by Oct. 15, 2013.

“As this case demonstrates, health care fraud is a serious criminal offense with serious consequences that can land you in federal prison,” said U.S. Attorney Bogden. “The U.S. Department of Justice is committed to investigating and prosecuting persons who commit this type of crime.”

“Our attorneys and investigators work closely with our partners to find Medicaid violators and prosecute them to the fullest extent of the law for cheating the system,” said Nevada Attorney General Catherine Cortez Masto. “We hope today's prison sentence and combined restitution of approximately \$81,000 sends a strong message to others who may consider stealing from taxpayers. We will not tolerate those that take advantage of the system.”

According to the court records, from about January 2007 to January 2011, Hill and Little defrauded the Nevada Medicaid program of approximately \$1 million by fraudulently billing for expensive therapy-related services such as psychosocial rehabilitation and basic skills training which were never provided. To execute their scheme, Hill and Little formed a company, the

Hill/Little LLC, and entered into a contract with Nevada Medicaid to provide health care services to children who were eligible for Medicaid. Hill was the president of the LLC. Little, a PhD and licensed social worker, was to provide the clinical services to the children. Hill and Little then created a program to obtain aid for the parents of the children who were eligible to receive the Medicaid funding; however, the program was not authorized or allowed under their Medicaid contract with the state. Hill recruited parents and guardians to provide services to their own children following minimal training provided by Hill/Little LLC. The services were nothing more than what parents normally do without reimbursement. Hill/Little LLC then billed Medicaid approximately \$8,000 per month for each child, using a billing code which was only authorized for services that could have been provided by Little, the licensed social worker. Hill/Little kept \$5,000 per month for each child and paid each parent/guardian approximately \$3,000. The parents/guardians reported that their children received little or no services from Hill or Little, and none of the services billed by Hill/Little from January 2007 to January 2011 were ever properly provided or authorized under Medicaid rules. Using this scheme, Hill and Little unlawfully received approximately \$1 million from Medicaid for services they did not provide.

The case was investigated by the State of Nevada Medicaid Fraud Control Unit, the State of Nevada Attorney General's Office, and IRS Criminal Investigation, and is being prosecuted by Assistant U.S. Attorney Ronald C. Rachow and Senior Deputy Attorney General Andrew Schulke, designated as a Special Assistant U.S. Attorney, with assistance from the Nevada Attorney General's Office.

This case was handled in connection with the President's Financial Fraud Enforcement Task Force. The task force was established to wage an aggressive, coordinated and proactive effort to investigate and prosecute financial crimes. With more than 20 federal agencies, 94 U.S. attorneys' offices and state and local partners, it's the broadest coalition of law enforcement, investigatory and regulatory agencies ever assembled to combat fraud. Since its formation, the task force has made great strides in facilitating increased investigation and prosecution of financial crimes; enhancing coordination and cooperation among federal, state and local authorities; addressing discrimination in the lending and financial markets and conducting outreach to the public, victims, financial institutions and other organizations. Over the past three fiscal years, the Justice Department has filed nearly 10,000 financial fraud cases against nearly 15,000 defendants including more than 2,900 mortgage fraud defendants. For more information on the task force, please visit [www.StopFraud.gov](http://www.StopFraud.gov).

If you suspect that Medicaid Fraud may be occurring, complete and submit this form [http://ag.nv.gov/uploadedFiles/agnv.gov/Content/Complaints/MFCU\\_ComplaintForm.pdf](http://ag.nv.gov/uploadedFiles/agnv.gov/Content/Complaints/MFCU_ComplaintForm.pdf), and mail it to the Office of the Attorney General, Medicaid Fraud Control Unit (MFCU), 100 North Carson Street, Carson City, NV 89701. You can also call the Nevada MFCU at 775-684-1191, 702- 486-3187 or the toll free number at 1-800-266-8688.

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