

# Florida man sentenced in multi-million-dollar medicare fraud scheme of Massachusetts residents

A Florida man was sentenced yesterday for his role in a multi-million-dollar Medicare fraud scheme involving durable medical equipment.

Nathan LaParl, 34, of Boca Raton, Fla., was sentenced by U.S. District Court Senior Judge George A. O'Toole, Jr. to three years of probation, the first year to be served subject to a curfew and forfeiture in the amount of \$220,671. On Jan. 21, 2021, LaParl pleaded guilty to one count of receiving kickbacks in connection with a federal health care program and one count of violating the HIPAA statute.

LaParl and co-defendant Talia Alexandre sold Medicare patients' personal and medical data to Juan Camilo Perez Buitrago. LaParl and Alexandre worked with foreign call centers to contact Medicare patients to ask if they were interested in durable medical equipment (DME) such as arm, back, knee and shoulder braces "at little to no cost." The call centers collected demographic and insurance information from Medicare patients, which LaParl and Alexandre sold to Perez Buitrago. Together, LaParl and Alexandre received more than \$1.6 million from Perez Buitrago for the patient data. Perez Buitrago used that patient data to submit more than \$109 million in false and fraudulent claims, submitting claims for DME that was not prescribed, not necessary, and, in many instances, never requested or received.

To perpetuate the scheme, LaParl checked Medicare patients' insurance eligibility by improperly accessing a patient

eligibility tool provided by co-defendant Stefanie Hirsch. Hirsch owned EI Medical, Inc., a Medicare-enrolled wheelchair and scooter repair company that qualified for access to a health care clearinghouse that contains Medicare patients' personal, medical and insurance information. Hirsch improperly gave LaParl access to that clearinghouse and charged him about \$0.25 per patient eligibility check. Using Hirsch's credentials, LaParl accessed the personal and medical data of more than 350,000 patients.

Hirsch pleaded guilty to violating the HIPAA statute and was sentenced on Sept. 21, 2021, to three years of probation. Hirsch was also ordered to pay a fine of \$2,500. Alexandre pleaded guilty to one count of receiving kickbacks in connection with a federal health care program and was sentenced on Dec. 8, 2021, to three years of probation with the first year spent in home detention. Alexandre was also ordered to pay a fine of \$5,000 and restitution in the amount of \$1.47 million

United States Attorney Rachael S. Rollins; Johnnie Sharp Jr., Special Agent in Charge of the Federal Bureau of Investigation, Birmingham Field Division; Phillip M. Coyne, Special Agent in Charge of the Department of Health and Human Services, Office of the Inspector General, Boston Division; and Ketty Larco Ward, Inspector in Charge of the U.S. Postal Inspection Service made the announcement. Assistant U.S. Attorney Elysa Q. Wan of Rollins' Health Care Fraud Unit prosecuted the case.