UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF GEORGIA WAYCROSS DIVISION

CR521-0008

UNITED STATES OF AMERICA) INDICTMENT NO.
v.) 21 U.S.C. § 846) Conspiracy
WALLACE STEVEN ANDERSON,)
BRIDGETT STEPHANIE TAYLOR,	21 U.S.C. § 841(a)(1)
WANDLE KEITH BUTLER) Unlawful Distribution and
	Dispensation of Controlled
_ 0	Substances Resulting in Death
e –)
COURT 6A.	21 U.S.C. § 841(a)(1)
	Unlawful Distribution and
M2 6	Dispensation of Controlled
) Substances
SEP SEP)
) 18 U.S.C. § 1349
U.S. 2021	Conspiracy to Commit
C)	Health Care Fraud
) Health Care Fraud
) 18 U.S.C. § 1956(h)
	Conspiracy to Launder Monetary
) Instruments

THE GRAND JURY CHARGES THAT:

At all times relevant to this Indictment, unless otherwise stated:

INTRODUCTION

A. The Conspirators

1. Defendant WALLACE STEVEN ANDERSON ("ANDERSON") was a medical doctor licensed by the State of Georgia. ANDERSON was registered with the DEA as a practitioner authorized to prescribe controlled substances in Schedules II, III, IV, and V.

- 2. Defendant WANDLE KEITH BUTLER ("BUTLER") was a physician assistant licensed by the State of Georgia. BUTLER was registered with the DEA as a Mid-Level Practitioner authorized to prescribe controlled substances in Schedules III, IV, and V. BUTLER worked as a physician assistant under the supervision of ANDERSON.
- 3. Defendant BRIDGETT STEPHANIE TAYLOR was a nurse practitioner licensed by the State of Georgia. TAYLOR was registered with the DEA as a Mid-Level Practitioner authorized to prescribe controlled substances in Schedules III, IV, and IV. TAYLOR worked as a nurse practitioner under the supervision of ANDERSON.
- 4. ANDERSON owned and operated two medical practices within the Southern District of Georgia relevant to the prescription of controlled substances: "Steve Anderson PC" located at 1311 Ocilla Road, Douglas, Georgia, and "Steve Anderson Behavioral Health" located at 410 Shirley Avenue, Douglas, Georgia.

B. Federal Controlled Substance Laws and Regulations

- 5. The Controlled Substances Act, 21 U.S.C. § 801 et seq. ("CSA"), governs the manufacture, distribution, and dispensing of controlled substances in the United States.
- 6. With limited exceptions, the CSA makes it "unlawful for any person knowingly or intentionally . . . to manufacture, distribute, or dispense . . . a controlled substance," or conspire to do so. Medical practitioners authorized to prescribe or dispense controlled substances by the jurisdiction in which they are

licensed to practice medicine are authorized under the CSA to write prescriptions for, or otherwise dispense, controlled substances if they obtain a registration from the Attorney General of the United States. Pursuant to Title 21 of the Code of Federal Regulations, Section 1306.04(a), medical practitioners registered with the DEA may lawfully issue a prescription for a controlled substance only if the prescription is "issued for a legitimate medical purpose by an individual practitioner acting in the usual course of professional practice."

- 7. The CSA and its implementing regulations set forth which drugs and other substances are defined by law as "controlled substances," and those controlled substances are then assigned to one of five schedules, Schedule I, II, III, IV, or V, depending on their potential for abuse, likelihood of physical or psychological dependency, accepted medical use, and accepted safety to use under medical supervision.
- 8. The term "Schedule II" means that the drug or other substance has a high potential for abuse; the drug has a currently accepted medical use with severe restrictions; and abuse of the drug or other substance may lead to severe psychological or physical dependence.
- 9. The term "Schedule III" means that the drug or other substance has a high potential for abuse less than the drugs listed in Schedule II; the drug has a currently accepted medical use with severe restrictions; and abuse of the drug or other substance may lead to severe psychological or physical dependence.

- 10. The term "Schedule IV" means the drug or other substance has a low potential for abuse relative to the drugs or other substances in Schedule II; the drug or other substance has a currently accepted medical use in treatment; and abuse of the drug or other substance may lead to limited physical or psychological dependence relative to the drugs or substance in Schedule III.
- 11. Pursuant to the CSA and its implementing regulations, oxycodone is the generic name for a highly addictive prescription analgesic (pain relieving medication). The use of oxycodone in any form can lead to physical and/or psychological dependence, and abuse of the drug may result in addiction. It is classified as a Schedule II controlled substance. It is sold generically or under a variety of brand names, including Roxicodone, OxyContin, and Percocet. If legally prescribed for a legitimate medical purpose, these drugs are typically used to treat moderate to severe pain. Oxycodone and other Schedule II drugs have a high potential for abuse. This abuse can lead to addiction, overdose, and sometimes death.
- 12. Pursuant to the CSA and its implementing regulations, hydrocodone is the generic name for an addictive prescription analgesic. The use of hydrocodone in any form can lead to physical and/or psychological dependence, and abuse of the drug may result in addiction. It is classified as a Schedule II controlled substance. It is sold generically or under a variety of brand names, including Vicodin, Lortab, Lorcet, and Norco. When hydrocodone is legally prescribed for a legitimate medical purpose, it is typically used to combat moderate to moderately severe pain.

Hydrocodone and other Schedule II drugs have a high potential for abuse. This abuse can lead to addiction, overdose, and sometimes death.

- 13. Pursuant to the CSA and its implementing regulations, buprenorphine is classified as a Schedule III controlled substance, and is sold generically or under the brand name Suboxone (if containing naloxone) and Subutex (if without naloxone). When prescribed for a legitimate medical purpose, it is used to treat opioid use disorder and narcotic addiction as part of a comprehensive treatment plan that includes counseling and behavioral therapies. Buprenorphine and other Schedule III drugs have considerable potential for abuse which may lead to physical and psychological dependence.
- 14. Pursuant to the CSA and its implementing regulations, benzodiazepines are a class of drugs that are classified as Schedule IV controlled substances. This class of drugs includes several different types that can be sold under a variety of brand names, including alprazolam (Xanax), temazepam (Restoril), and clonazepam (Klonopin). When prescribed for a legitimate medical purpose, they are used to treat anxiety disorder, panic disorder, and anxiety caused by depression.
- 15. The term "dispense" means to deliver a controlled substance to an ultimate user or research subject by, or pursuant to the lawful order of, a practitioner, including the prescribing and administering of a controlled substance, and the packaging, labeling or compounding necessary to prepare the substance for

such delivery. The term "dispenser" means a practitioner who so delivers a controlled substance to an ultimate user or research subject. 21 U.S.C. § 802(10).

- 16. The term "distribute" means to deliver (other than by administering or dispensing) a controlled substance or a listed chemical. The term "distributor" means a person who so delivers a controlled substance or a listed chemical. 21 U.S.C. § 802(11).
- 17. The term "addict" means any individual who habitually uses any narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is so far addicted to the use of narcotic drugs as to have lost the power of self-control with reference to his addiction. 21 U.S.C. § 802(1)
- 18. The term "pill mill" as used in this indictment means a facility which routinely dispenses controlled substances not for a legitimate medical purpose and not in the usual course of professional practice.

C. Federal Health Care Fraud and Abuse Laws and Regulations

- 19. The Medicare Program, a "health care benefit program" as defined by 18 U.S.C. § 24, provides benefits to certain elderly and disabled individuals.

 Medicare is funded by the federal government and is administered by the United States Department of Health and Human Services ("HHS") through its agency, the Centers for Medicare and Medicaid Services ("CMS").
- 20. The Georgia Medicaid Program, a "health care benefit program" as defined by 18 U.S.C. § 24, provides benefits to certain low-income individuals and families in Georgia. Georgia Medicaid is funded by both the federal government

and through state funds. Medicaid is administrated, at the federal level, by the United States Department of Health and Human Services ("HHS") through its agency, the Centers for Medicare and Medicaid Services ("CMS"). In Georgia, Medicaid is administered by the Georgia Department of Community Health ("GDCH").

- 21. Individuals who receive benefits under Medicare and Georgia Medicaid are commonly referred to as "beneficiaries" or "recipients."
- 22. A Medicare or Medicaid "provider" is any organization, institution, or individual that provides health care services, items, and benefits, to beneficiaries for which payments may be made by a health care benefit program.
- 23. A physician, physician assistant, or nurse practitioner who issues a prescription for a beneficiary to obtain controlled substances provides a health care service, item, or benefit.
- 24. A provider can submit bills, known as "claims," in order to obtain reimbursement for items or services provided to beneficiaries. Claims to Medicare and Medicaid are typically submitted electronically and require certain information, including (a) the beneficiary's name and identification number, (b) identification of the benefit, item or service provided or supplied to the beneficiary, (c) the billing code for the benefit, item or service, (d) the date upon which the benefit, item or health services was provided, and (e) the name and National Provider Identifier ("NPI") of the physician that ordered the service, treatment, benefit, or item.

- 25. When a provider issues a prescription for a drug to a beneficiary, the beneficiary commonly has the prescription filled by a retail pharmacy. The retail pharmacy, in turn, will submit a claim to the beneficiary's health care benefit program to be reimbursed for the drug dispensed. The claim submitted by the pharmacy contains the ordering practitioner's NPI.
- 26. To qualify for payment, the health care benefit, item, or service must have been medically necessary and otherwise comply with all applicable federal and state laws. For prescriptions, this requires a valid prescription issued for a legitimate medical purpose by an authorized individual practitioner acting in the usual course of his professional practice.

COUNT ONE Conspiracy

21 U.S.C. § 846

- 27. Paragraphs 1 through 26 of the Introduction section of this Indictment are re-alleged and incorporated herein by reference.
- 28. From on or about February 1, 2016 and continuing through September 30, 2020, in Coffee County, within the Southern District of Georgia, and elsewhere, the defendants,

WALLACE STEVEN ANDERSON, BRIDGETT STEPHANIE TAYLOR, and WANDLE KEITH BUTLER,

aided and abetted by each other and by others known and unknown, with some joining the conspiracy earlier and others joining later, did knowingly and intentionally combine, conspire, confederate and agree together and with each other, and with others known and unknown, to knowingly and intentionally distribute and dispense, and cause to be distributed and dispensed, quantities of controlled substances, including oxycodone, hydrocodone, and methadone, Schedule II controlled substances, buprenorphine, a Schedule III controlled substance, and alprazolam, temazepam, and clonazepam, Schedule IV controlled substances, not for a legitimate medical purpose and not in the usual course of professional practice.

All in violation of Title 21, United States Code, Sections 841(a)(1) and 846, and Title 18, United States Code, Section 2.

PURPOSE AND OBJECT OF THE CONSPIRACY

29. It was the purpose and object of the conspiracy to generate large cash proceeds and income for the enrichment of the conspirators through the unlawful dispensation and distribution of controlled substances.

MANNER AND MEANS OF THE CONSPIRACY

The manner and means of the conspiracy included the following:

- 30. The conspirators operated and assisted in operating nominal pain management and addiction facilities which dispensed controlled substances without any legitimate medical purpose.
- 31. The conspirators, aided and abetted by each other and others, distributed and dispensed, and caused to be distributed and dispensed, massive quantities of prescription narcotics and other controlled substances, including prescription opioids (oxycodone, hydrocodone, and methadone), benzodiazepines (alprazolam, temazepam, and clonazepam), sleeping medications and muscle relaxers (carisoprodol), as well as scheduled addiction drugs like Suboxone and Subutex.
- 32. The conspirators often required an immediate payment of several hundred dollars per patient visit, typically in cash but at times by credit card, before a patient could receive drugs.
- 33. The conspirators knew of and facilitated patient's use of health care benefit programs, including Medicare and Medicaid, to pay for some or all of the controlled substances distributed and dispensed by conspirators.

- 34. It was part of the conspiracy that the conspirators, by virtue of their medical licenses and DEA registrations, knowingly and intentionally distributed and dispensed, and caused to be distributed and dispensed, controlled substances that were not prescribed for a legitimate medical purpose and which were not distributed and dispensed in the usual course of professional practice, in one or more of the following manners for a significant number of patients:
 - a. By prescribing controlled substances to patients taking illicit substances, such as methamphetamine, cocaine, MDMA, and illicit fentanyl;
 - By prescribing controlled substances even though a patient's drug test
 was either not valid or tampered with;
 - c. By prescribing controlled substances well outside of guidelines established by the Centers for Disease Control and Prevention and the Food and Drug Administration:
 - d. By prescribing controlled substances to patients that defendants knew were also seeking treatment for dependence/addiction to opioids;
 - e. By prescribing controlled substances to patients in quantities and combinations that the conspirators knew were dangerous and could lead to and had in fact led to death, overdoses, addiction, patient harm, or incapacitation;
 - f. By prescribing controlled substances without adequate and reliable patient medical history to verify the accuracy of the patient's statements to the physician or other clinic personnel;

- g. By prescribing controlled substances without performance of a complete or adequate physical or neurological examination;
- h. By prescribing controlled substances without establishment of a true diagnosis or treatment plan;
- i. By prescribing controlled substances without the use of appropriate diagnostic or laboratory testing;
- j. By prescribing controlled substances without sufficient dialogue with the patient regarding treatment options (such as physical therapy or surgery), risks and benefits of such treatments, and alternatives to treatment other than controlled substances;
- k. By failing to refer patients to a specialist in an effort to identify and correct the patient's alleged pain, or treat the patient for psychological dysfunctions by, for example, addiction counseling;
- By prescribing controlled substances without assessment of an individual patient's risk of abuse of controlled substances;
- m. By prescribing inappropriate combinations of drugs to patients; and
- n. By prescribing controlled substances despite repeated warnings of their dangers from insurance companies and pharmacies.
- 35. Conspirators, aided and abetted by each other and others, authorized approximately 150,000 prescriptions for controlled substances, resulting in the distribution of approximately 9 million dosage units of controlled substances within the Southern District of Georgia and elsewhere.

- 36. From January 1, 2016, through April 1, 2020, ANDERSON received in excess of \$6.9 million into accounts associated with his medical practice, with a significant source of these funds being the unlawful distribution of controlled substances outside the usual course of professional practice and without a legitimate medical purpose. Conspirators used these funds to promote the unlawful conspiracy and to enrich themselves.
- 37. The conspiracy resulted in significant harm to federal health benefit programs, specifically including Medicare Part D. From January 1, 2017 through September 9, 2020, Medicare Part D paid out over \$5.7 million to cover the cost of conspirator's prescriptions, including \$926,820 for opioid prescriptions alone.

COUNT TWO

Distribution and Dispensation of Controlled Substances Resulting in Death (Hydrocodone and Alprazolam)
21 U.S.C. § 841(a)(1)

- 38. Paragraphs 1 through 26 of the Introduction section of this Indictment are realleged and incorporated herein by reference.
- 39. On or about November 9, 2017, in Coffee County, within the Southern District of Georgia, and elsewhere, the defendant,

WALLACE STEVEN ANDERSON,

aided and abetted by others known and unknown, did knowingly and intentionally distribute controlled substances, to wit, Hydrocodone-Acetaminophen (Norco) 10-325 MG, a Schedule II controlled substance, and Alprazolam (Xanax) 1 MG, a Schedule IV controlled substance, and death resulted from the use of the controlled substances by R.C.

All in violation of Title 21, United States Code, Sections 841(a)(1), 841(b)(1)(C), and Title 18, United States Code, Section 2.

COUNTS THREE THROUGH FIFTY

Unlawful Distribution and Dispensation of Controlled Substances 21 U.S.C. § 841(a)(1)

- 40. Paragraphs 1 through 26 of the Introduction section of this Indictment are realleged and incorporated herein by reference.
- 41. On or about the dates listed below, in Coffee County, within the Southern District of Georgia, and elsewhere, the defendants listed below, aided and abetted by others known and unknown, did knowingly and intentionally distribute and dispense, and cause to be distributed and dispensed, the controlled substances listed below, not for a legitimate medical purpose and not in the usual course of professional practice, in violation of Title 21, United States Code, Section 841(a)(1), and Title 18, United States Code, Section 2:

PATIENT R.C.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
3	WALLACE S. ANDERSON	R.C.	10/12/2017	Hydrocodone- Acetaminophen 10-325 MG (II)	90
4	WALLACE S. ANDERSON, and W. KEITH BUTLER	R.C.	10/12/2017	Alprazolam 1 MG (IV)	90

PATIENT R.S.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
5	WALLACE S. ANDERSON	R.S.	5/22/2017	Hydrocodone- Acetaminophen 10-325 MG (II)	120

PATIENT S.A.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
6	WALLACE S. ANDERSON	S.A.	5/24/2018	Hydrocodone- Acetaminophen 10-325 MG (II)	100
7	WALLACE S. ANDERSON	S.A.	1/25/2019	Hydrocodone- Acetaminophen 10-325 MG (II)	150
8	WALLACE S. ANDERSON	S.A.	9/17/2019	Buprenorphine 8 MG (III)	150

PATIENT A.M.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
9	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	A.M.	1/23/2019	Oxycodone 20 MG (II)	120
10	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	A.M.	1/24/2019	Alprazolam 1 MG (IV)	90

PATIENT M.M.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
11	WALLACE S. ANDERSON	M.M.	12/13/2018	Hydrocodone- Ibuprofen 7.5-200 MG (II)	120

PATIENT M.W.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
12	WALLACE S. ANDERSON	M.W.	7/14/2020	Methadone 10 MG (II)	60

PATIENT R.E.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
13	WALLACE S. ANDERSON, and W. KEITH BUTLER	R.E.	2/20/2019	Alprazolam 2 MG (IV)	90
14	WALLACE S. ANDERSON	R.E.	2/22/2019	Hydrocodone- Acetaminophen 10-325 MG (II)	120

PATIENT H.N.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
15	WALLACE S. ANDERSON	H.N.	8/7/2017	Oxycodone 20 MG (II)	120
16	WALLACE S. ANDERSON	H.N.	8/25/2017	Oxycodone 30 MG (II)	90

PATIENT B.P.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
17	WALLACE S. ANDERSON	B.P.	9/5/2019	Temazepam 30 MG (IV)	30
18	WALLACE S. ANDERSON	B.P.	9/5/2019	Oxycodone 10 MG (II)	90

PATIENT C.P.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
19	WALLACE S. ANDERSON	C.P.	3/29/2018	Oxycodone- Acetaminophen 10-325 MG (II)	90
20	WALLACE S. ANDERSON	C.P.	3/29/2018	Oxycodone 30 MG (II)	150
21	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	C.P.	4/2/2018	Alprazolam 1MG (IV)	90
22	WALLACE S. ANDERSON	C.P.	9/29/2020	Oxycodone 20 MG (II)	120

PATIENT C.R.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
23	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	C.R.	1/3/2019	Alprazolam 1 MG (IV)	120
24	WALLACE S. ANDERSON	C.R.	1/7/2019	Oxycodone 20 MG (II)	150
25	WALLACE S. ANDERSON	C.R.	9/16/2020	Oxycodone 20 MG (IV)	120
26	WALLACE S. ANDERSON	C.R.	9/16/2020	Alprazolam 1 MG (IV)	120

PATIENT L.R.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
27	WALLACE S. ANDERSON	L.R.	5/29/2018	Hydrocodone- Acetaminophen 10-325 MG (II)	120
28	WALLACE S. ANDERSON	L.R.	5/29/2018	Alprazolam 1 MG (IV)	90
29	WALLACE S. ANDERSON	L.R.	5/29/2018	Carisoprodol 350 MG (IV)	90

PATIENT A.S.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
30	WALLACE S. ANDERSON	A.S.	1/21/2019	Hydrocodone- Acetaminophen 7.5-325 MG (II)	120
31	WALLACE S. ANDERSON	A.S.	1/21/2019	Alprazolam .5 MG (IV)	60
32	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	A.S.	1/21/2019	Carisoprodol 350 MG (IV)	30

PATIENT C.S.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
33	WALLACE S. ANDERSON, and W. KEITH BUTLER	C.S.	9/26/2017	Alprazolam 1 MG (IV)	90
34	WALLACE S. ANDERSON	C.S.	12/18/2017	Hydrocodone- Acetaminophen 10-325 MG (II)	90
35	WALLACE S. ANDERSON	C.S.	12/18/2017	Alprazolam 1 MG (II)	90

PATENT J.W.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
36	WALLACE S. ANDERSON	J.W.	9/24/2020	Oxycodone 20 MG (II)	120
37	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	J.W.	9/23/2020	Temazepam 30 MG (IV)	30

PATIENT C.C.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
38	WALLACE S. ANDERSON	C.C.	7/12/2018	Oxycodone- Acetaminophen 10-325 MG (II)	30
39	WALLACE S. ANDERSON	C.C.	3/14/2019	Suboxone 8 MG (III)	90

PATIENT D.G.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
40	WALLACE S. ANDERSON	D.G.	3/26/2020	Methadone 10 MG (II)	120

PATIENT J.H.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
41	WALLACE S. ANDERSON	J.H.	7/16/2019	Suboxone 8 MG (III)	90
42	WALLACE S. ANDERSON	J.H.	7/17/2019	Methadone 10 MG (II)	45
43	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	J.H.	12/30/2019	Alprazolam .5 MG (IV)	60

PATIENT K.J.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
44	WALLACE S. ANDERSON	K.J.	5/31/2018	Buprenorphine 8 MG (III)	90
45	WALLACE S. ANDERSON	K.J.	5/3/2018	Oxycodone 15 MG (II)	90
46	WALLACE S. ANDERSON	K.J.	5/31/2018	Alprazolam .25 MG (IV)	60

PATIENT H.T.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
47	WALLACE S. ANDERSON	H.T.	9/21/2020	Buprenorphine 8 MG (III)	90
48	WALLACE S. ANDERSON	H.T.	9/21/2020	Alprazolam .5 MG (IV)	60

PATIENT T.C.

COUNT	DEFENDANT	PATIENT	FILL DATE	CONTROLLED SUBSTANCE (SCHEDULE)	QUANTITY
49	WALLACE S. ANDERSON	T.C.	5/27/2020	Suboxone 12 MG (III)	90
50	WALLACE S. ANDERSON, and B. STEPHANIE TAYLOR	T.C.	10/10/2020	Clonazepam 1 MG (IV)	120

COUNT FIFTY-ONE

Conspiracy to Commit Health Care Fraud 18 U.S.C. § 1349

- 42. Paragraphs 1 through 26 of the Introduction section of this Indictment are realleged and incorporated fully herein by reference.
- 43. From on or about February 1, 2016 and continuing through on or about September 30, 2020, the exact date being unknown, in the Southern District of Georgia and elsewhere, the defendants,

WALLACE STEVEN ANDERSON, BRIDGETT STEPHANIE TAYLOR, and WANDLE KEITH BUTLER,

knowingly and willfully did combine, conspire, confederate, and agree with each other and others known and unknown, to violate Title 18, United States Code, Section 1347, that is, to execute a scheme and artifice to defraud a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, Medicare and Medicaid, and to obtain, by means of materially false and fraudulent pretenses, representations and promises, money and property owned by, and under the custody and control of, said health care benefit programs, in connection with the delivery of and payment for health care benefits, items, and services.

PURPOSE OF THE CONSPIRACY

44. It was a purpose of the conspiracy for the conspirators and others, known and unknown, to unlawfully enrich themselves by submitting, and causing to be submitted, false and fraudulent claims to Medicare and Medicaid for

controlled substances dispensed and distributed to beneficiaries for no legitimate medical purpose and outside the usual course of professional practice.

MANNER AND MEANS OF THE CONSPIRACY

- 45. It was part of the scheme and among its manner and means that the conspirators would see Medicare and Medicaid patients.
- 46. It was further part of the conspiracy and among its manner and means that conspirators would enter insurance information into a patient's medical record, including information regarding Medicare and Medicaid coverage.
- 47. It was further part of the conspiracy and among its manner and means that conspirators would provide prescriptions for controlled substances knowing that patients with Medicare or Medicaid would use such benefit programs to pay for some or all of the controlled substances prescribed by conspirators.
- 48. It was further part of the conspiracy and among its manner and means that conspirators would from time to time respond to requests from Medicare and Medicaid requiring prior authorization or information prior to deciding whether to pay for controlled substances prescribed by conspirators.
- 49. It was further part of the conspiracy and among its manner and means that conspirators would falsify and would cause to be falsified responses sent by Medicare and Medicaid in order to induce those programs to pay for unlawfully dispensed controlled substances.

All done in violation of Title 18, United States Code, Sections 1349, 1347, and 2.

COUNT FIFTY-TWO

Conspiracy to Launder Monetary Instruments 18 U.S.C. § 1956(h)

- 50. Paragraphs 1 through 26 of the Introduction of this Indictment are realleged and incorporated fully herein by reference.
- 51. From on or about February 1, 2016 and continuing through on or about September 30, 2020, in Coffee County, within the Southern District of Georgia, and elsewhere, the defendants,

WALLACE STEVEN ANDERSON, BRIDGETT STEPHANIE TAYLOR, and WANDLE KEITH BUTLER,

aided and abetted by each other and by others known and unknown, did knowingly and intentionally combine, conspire, and agree with each other and with other persons known and unknown, to conduct and attempt to conduct financial transactions affecting interstate commerce, with funds which were proceeds of a specific unlawful activity, that is the unlawful dispensation of controlled substances, in violation of Title 21 United States Code, Section 841(a)(1), and the conspiracy to commit health care fraud, in violation of Title 18 United States Code, Section 1349, which the defendants knew to be the proceeds of some form of unlawful activity, and did conspire to do so with the intent to promote the carrying on of the aforesaid specified unlawful activity, in violation of Title 18, United States Code, Section 1956(a)(1)(A)(i).

OVERT ACTS

- 52. In furtherance of the conspiracy, the conspirators committed and caused to be committed in the Southern District of Georgia and elsewhere, financial transactions affecting interstate commerce, using funds which were, and which the defendants knew to be, proceeds of the unlawful dispensation of Schedule II, III, and IV controlled substances, including, but not limited to, the transactions shown below:
 - 1. Between January 1, 2016 through March 30, 2020, conspirators made multiple deposits, by check and cash, to Douglas National Bank account 1003540, with the average total monthly cash deposits ranging from \$24,000 to \$29,000 per month.
 - 2. Between January 1, 2016 through April 1, 2020, conspirators made multiple deposits, by cash and check, to Colony Bank account 231089001, with the average total monthly cash deposits ranging from \$900 to \$18,000 per month.
 - 3. Between January 1, 2016 and April 1, 2020, ANDERSON made multiple deposits to Douglas National Bank account 1133263, a personal bank account associated with ANDERSON.
 - 4. Between January 1, 2016 through April 1, 2020, **ANDERSON** invested approximately \$79,025 into Raymond James personal investment account 27976718.

- Between January 5, 2016 and December 27, 2018, conspirators
 made salary payments by cash or check to STEPHANIE BRIDGETT
 TAYLOR, with an average monthly salary amount of approximately \$6,900.
- 6. Between January 3, 2017 through March 20, 2020, conspirators made salary payments by cash or check to WANDLE KEITH BUTLER, with an average monthly salary amount of approximately \$7,900.
- 7. Between January 1, 2016 through March 30, 2020, conspirators engaged in numerous credit card and debit card transactions, including transactions involving Square Inc. payment systems, to promote the unlawful conspiracy.
- 8. Conspirators engaged in numerous transactions involving payments from medical insurance companies, with payments ranging between approximately \$6 to \$7,000 per transaction.

FORFEITURE ALLEGATION

The allegations contained in Counts 1 through 52 on this Indictment are hereby re-alleged and incorporated by reference for the purpose of alleging forfeitures pursuant to Title 18, United States Code, Section 982(a)(7) and Title 21, United States Code, Section 853.

Upon conviction of one or more of the Title 21 offenses set forth in Counts 1 through 50 of this Indictment, the defendants, WALLACE STEVEN ANDERSON, BRIDGETT STEPHANIE TAYLOR, and WANDLE KEITH BUTLER, shall forfeit to the United States, pursuant to Title 21, United States Code, Section 853, any property (1) constituting or derived from proceeds the defendant obtained directly or indirectly as a result of said offense(s) and all property traceable to such property; and (2) any property used or intended to be used, in any manner or part, to commit or to facilitate the commission of such offense.

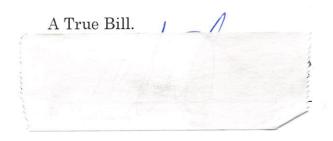
Upon conviction of one or more of the Title 18 offenses set forth in Counts 51 and 52 of this Indictment, pursuant to Title 18, United States Code, Section 982(a)(8), the defendant, WALLACE STEVEN ANDERSON, BRIDGETT STEPHANIE TAYLOR, and WANDLE KEITH BUTLER, shall forfeit to the United States any property, real or personal, that constitutes or is derived directly or indirectly, from gross proceeds traceable to the commission of the offense.

If any of the property described above as being subject to forfeiture, as a result of any act or omission of the Defendant:

(1) cannot be located upon the exercise of due diligence;

- (2) has been transferred or sold to, or deposited with, a third person;
- (3) has been placed beyond the jurisdiction of the Court;
- (4) has been substantially diminished in value; or
- (5) has been commingled with other property which cannot be subdivided without difficulty,

the United States shall be entitled to forfeiture of substitute property pursuant to Title 21, United States Code, Section 853(p), either standing alone or as incorporated by Title 18, United States Code, Section 982(b)(1) and Title 28, United States Code, Section 2561(c).



(Additional signatures on next page)

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