

IN THE UNITED STATES DISTRICT COURT FOR THE  
WESTERN DISTRICT OF OKLAHOMA

**FILED**

JUN 20 2018

UNITED STATES OF AMERICA, )

Plaintiff, )

-vs- )

MELVIN LEE ROBISON, D.O. and )  
MOHEB HALLABA, M.D., )

Defendants. )

CARMELITA REEDER SHINN, CLERK  
U.S. DIST. COURT, WESTERN DIST. OKLA.  
BY Bowen Medina, DEPUTY

CR 18-163 M

Case No. \_\_\_\_\_

Violations: 21 U.S.C. § 846  
21 U.S.C. § 841(a)(1)  
18 U.S.C. § 2  
18 U.S.C. § 1347  
18 U.S.C. § 982(a)(7)  
21 U.S.C. § 853  
28 U.S.C. § 2461(c)

INDICTMENT

The Federal Grand Jury charges:

INTRODUCTION

1. At all times material to this Indictment, **MOHEB HALLABA, M.D.** and **MELVIN LEE ROBISON, D.O.** were licensed to practice medicine in the State of Oklahoma and practiced medicine.

2. In 2015, the Oklahoma State Board of Osteopathic Examiners (hereinafter the “Board”) began to investigate **MELVIN LEE ROBISON, D.O.**’s practice of medicine—in particular, his prescription writing of controlled substances.

3. In or about September 2015, **MELVIN LEE ROBISON, D.O.** hired **MOHEB HALLABA, M.D.** to write prescriptions in the Robison Clinic in Sayre, Oklahoma.

4. On October 1, 2015, **MOHEB HALLABA, M.D.** began working at the Robison Clinic.

5. In June 2016, the Board restricted **MELVIN LEE ROBISON, D.O.'s** license to practice medicine so that he could no longer write prescriptions for controlled drugs.

6. Opioids are a class of narcotic pain relievers available by prescription only. Types of opioids include hydrocodone, morphine, fentanyl, oxycodone, and oxycontin. Opioids are Schedule II controlled substances.

7. Benzodiazepines are a class of drugs that are central nervous system depressants available by prescription only. Benzodiazepines include Alprazolam, diazepam, lorazepam, and clonazepam. Benzodiazepines are Schedule IV controlled substances.

8. When opioids are taken with benzodiazepines, there is a greatly increased risk of respiratory depression and death.

9. A doctor who distributes federally controlled prescription drugs must dispense such substances within the usual course of professional medical practice and for a legitimate medical purpose.

**COUNT 1**  
**(Drug Conspiracy)**

10. From in or about September 2015, through on or about April 3, 2017, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

knowingly and intentionally combined, conspired, and confederated, together with each other and with others known and unknown to the Federal Grand Jury, to interdependently dispense and distribute controlled substances to their patients outside the usual course of professional medical practice and without legitimate medical purpose, resulting in the deaths of C.H., L.J.K., D.A.S., C.D., and J.R.B., in violation of Title 21, United States Code, Section 841(a)(1).

**MANNER AND MEANS OF THE CONSPIRACY**

11. The manner and means by which the conspiracy was to be accomplished were as follows:

- A. During the period of the conspiracy, **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** were licensed medical doctors in the State of Oklahoma employed at the Robison Clinic in Sayre, Oklahoma. One of the purposes of the conspirators' association was to facilitate the writing of Schedule II and IV controlled substance prescriptions as pain relievers for clinic patients. Up to 90 to 100 patients visited the clinic a day.
- B. During the period of the conspiracy **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** signed hundreds of prescriptions a week without reviewing patient files or seeing the patients. During this period the Nurse Practitioners saw nearly all of the patients. Nurse Practitioners are not licensed to prescribe for Schedule II controlled substances.

- C. During the period of the conspiracy, **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** required all patients to get urinalysis and allergy testing, regardless of whether the Nurse Practitioners believed they were warranted. Notwithstanding these required urinalysis screenings, the results, many of which showed aberrant drug behavior by their patients, were not addressed. Rather, **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** ignored the results and prescribed additional Schedule II and Schedule IV controlled substances.
- D. During the period of the conspiracy, **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** concurrently prescribed large amounts of opioids with benzodiazepines. It is well established in medical literature that this combination can cause respiratory depression and increase the risk of lethal overdose.
- E. During the period of the conspiracy, **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** dispensed and distributed highly addictive Schedule II controlled substances without medical necessity and outside the usual course of professional medical practice. These Schedule II controlled substances, or opioids, included oxycodone, oxycontin, hydrocodone, and morphine.
- F. During the period of the conspiracy, **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** at times dispensed and distributed highly addictive Schedule IV controlled substances without medical necessity and outside the usual course of professional medical practice. These Schedule IV controlled substances,

or benzodiazepines, included alprazolam, diazepam, lorazepam, and clonazepam.

12. The Federal Grand Jury incorporates by reference the statements and allegations contained in Counts 2 through 55 inclusive, as though fully set forth herein.

All in violation of Title 21, United States Code, Section 846, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 2-5**  
**(Distribution of a Controlled Substance)**

13. From on or about July 28, 2015, to on or about October 5, 2015, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O.** -----  
knowingly and intentionally distributed and dispensed controlled substances to C.H. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

<b>Count</b>	<b>Date</b>	<b>Controlled Substance</b>
2	07/28/2015	Oxycodone and Oxycontin
3	08/24/2015	Oxycodone and Oxycontin
4	09/29/2015	Oxycodone and Oxycontin
5	10/05/2015	Oxycodone and Oxycontin

All in violation of Title 21, United States Code, Section 841(a)(1), the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNT 6**

**(Distribution of a Controlled Substance Resulting in Death)**

14. On or about October 30, 2015, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed oxycodone and oxycontin, Schedule II controlled substances, to C.H. outside the usual course of professional medical practice and without legitimate medical purpose, resulting in the death of C.H. from acute oxycodone toxicity on or about November 9, 2015.

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 7-12**

**(Distribution of a Controlled Substance)**

15. From on or about November 9, 2015, to on or about March 30, 2016, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

knowingly and intentionally distributed and dispensed controlled substances to L.J.K. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

<b>Count</b>	<b>Date</b>	<b>Controlled Substance</b>
7	11/09/2015	Oxycodone
8	12/07/2015	Oxycodone
9	01/05/2016	Oxycodone
10	02/02/2016	Oxycodone and Clonazepam
11	03/01/2016	Oxycodone
12	03/30/2016	Oxycodone

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNT 13**  
**(Distribution of a Controlled Substance Resulting in Death)**

16. On or about April 22, 2016, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed oxycodone, a Schedule II controlled substance, to L.J.K. outside the usual course of professional medical practice and without legitimate medical purpose, resulting in the death of L.J.K. from acute oxycodone toxicity on or about May 19, 2016.

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 14-22**  
**(Distribution of a Controlled Substance)**

17. From on or about January 14, 2016, to on or about August 25, 2016, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed controlled substances to D.A.S. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

<b>Count</b>	<b>Date</b>	<b>Controlled Substance</b>
14	01/14/2016	Fentanyl, Diazepam, Hydrocodone
15	02/11/2016	Fentanyl, Diazepam, Hydrocodone
16	03/08/2016 to 03/09/2016	Fentanyl, Diazepam, Hydrocodone
17	04/06/2016	Fentanyl, Diazepam, Hydrocodone
18	05/04/2016	Fentanyl and Hydrocodone
19	06/02/2016	Fentanyl, Diazepam, Hydrocodone
20	06/30/2016	Fentanyl and Hydrocodone
21	07/22/2016	Fentanyl and Hydrocodone
22	08/25/2016	Fentanyl and Hydrocodone

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).



**COUNT 23**

**(Distribution of a Controlled Substance Resulting in Death)**

18. On or about September 22, 2016, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and  
MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed fentanyl and hydrocodone, Schedule II controlled substances, as well as diazepam, a Schedule IV controlled substance, to D.A.S. outside the usual course of professional medical practice and without legitimate medical purpose, resulting in the death of D.A.S. from fentanyl toxicity on or about September 28, 2016.

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 24-29**

**(Distribution of a Controlled Substance)**

19. From on or about June 30, 2016, to on or about January 2, 2017, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and  
MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed controlled substances to C.D. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

<b>Count</b>	<b>Date</b>	<b>Controlled Substance</b>
24	06/30/2016	Morphine, Oxycodone, Diazepam
25	08/01/2016	Morphine, Oxycodone, Diazepam
26	09/08/2016	Morphine and Oxycodone
27	10/28/2016	Morphine and Oxycodone
28	11/30/2016	Morphine and Oxycodone
29	01/02/2017	Morphine

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNT 30**  
**(Distribution of a Controlled Substance Resulting in Death)**

20. On or about February 6, 2017, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----  
aided and abetted one another and knowingly and intentionally distributed and dispensed morphine and oxycodone, Schedule II controlled substances, as well as diazepam, a Schedule IV controlled substance, to C.D. outside the usual course of professional medical practice and without legitimate medical purpose, resulting in the death of C.D. from an acute combined drug toxicity on or about February 10, 2017.

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 31-37**  
**(Distribution of a Controlled Substance)**

21. From on or about January 20, 2016, to on or about March 1, 2017, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed controlled substances to J.R.B. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

Count	Date	Controlled Substance
31	01/20/2016	Fentanyl
32	09/27/2016	Fentanyl and Hydrocodone
33	10/19/2016	Fentanyl and Hydrocodone
34	11/22/2016	Fentanyl and Hydrocodone
35	12/22/2016	Fentanyl
36	01/25/2017	Fentanyl
37	03/01/2017	Fentanyl

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNT 38**  
**(Distribution of a Controlled Substance Resulting in Death)**

22. On or about March 20, 2017, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed fentanyl, a Schedule II controlled substance, to J.R.B. outside the usual course of professional medical practice and without legitimate medical purpose, resulting in the death of J.R.B. from fentanyl toxicity on or about April 3, 2017.

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 39-46**  
**(Distribution of a Controlled Substance)**

23. From on or about October 19, 2015, to on or about May 11, 2016, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed controlled substances to L.V. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

<b>Count</b>	<b>Date</b>	<b>Controlled Substance</b>
39	10/19/2015	Oxycodone and Lorazepam
40	11/16/2015	Oxycodone and Lorazepam
41	12/17/2015	Oxycodone and Lorazepam
42	01/15/2016	Oxycodone, Lorazepam, Morphine
43	02/12/2016	Oxycodone, Diazepam, Oxycontin
44	03/11/2016	Oxycodone, Diazepam, Oxycontin
45	04/08/2016	Oxycodone, Alprazolam, Oxycontin
46	05/11/2016	Oxycontin

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**COUNTS 47-55**  
**(Distribution of a Controlled Substance)**

24. From on or about September 9, 2015, to on or about November 29, 2016, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O. and**  
**MOHEB HALLABA, M.D.** -----

aided and abetted one another and knowingly and intentionally distributed and dispensed controlled substances to J.B. outside the usual course of professional medical practice and without legitimate medical purpose on or about the following dates:

Count	Date	Controlled Substance
47	09/09/2015	Oxycodone
48	10/06/2015	Oxycodone
49	12/02/2015	Oxycodone
50	01/07/2016	Oxycodone
51	07/21/2016	Oxycodone
52	08/29/2016	Oxycodone
53	09/30/2016	Oxycodone
54	10/28/2016	Oxycodone
55	11/29/2016	Oxycodone

All in violation of Title 21, United States Code, Section 841(a)(1) and Title 18, United States Code, Section 2, the penalty for which is found in Title 21, United States Code, Section 841(b)(1)(C).

**GENERAL ALLEGATIONS:**  
**HEALTH CARE FRAUD**

At all times relevant to this Indictment:

**The Medicare Program**

25. The Medicare Program (“Medicare”) was a federal health care benefit program, affecting commerce, that provided federal funds to pay for health care benefits for certain individuals, primarily those who were over the age of 65, the blind, and the disabled. Medicare was administered by the Centers for Medicare and Medicaid Services (“CMS”), a federal agency under the United States Department of Health and Human Services (“HHS”). Medicare was a “health care benefit program” as defined by 18 U.S.C. § 24(b).

26. Individuals who qualified for Medicare benefits were referred to as Medicare “beneficiaries.” Each beneficiary was assigned a unique health insurance claim number (“HICN”).

27. Only individuals and entities that were officially approved to participate in Medicare were permitted to submit claims to Medicare for reimbursement of the health care benefits, items, and services they furnished to beneficiaries. To participate in Medicare, health care providers were required to submit applications in which they agreed to comply with all Medicare-related laws and regulations. If Medicare approved a provider’s application, Medicare assigned the provider a unique National Provider Identifier (“NPI”), which was then used for the processing and payment of claims. Physicians and other health care providers approved to participate in Medicare were referred to as Medicare “providers.”

28. To receive reimbursement from Medicare, providers submitted or caused the submission of claims for reimbursement for health care benefits, items, and services provided to beneficiaries. Providers could submit the claims themselves, or use a third-party billing company to do so. Claims could be submitted on paper or by electronic means.

29. CMS contracted with regional contractors to process and pay Medicare claims. Novitas was the contractor that processed and paid claims for outpatient services in Oklahoma.

30. To bill Medicare for services, a provider was required to submit a claim form, Form 1500, to Novitas. When a Form 1500 was submitted, the provider was required to certify: (a) that the contents of the form were true, correct, and complete; (b) that the form was prepared in compliance with the laws and regulations governing Medicare; and (c) that the services being claimed were medically necessary.

31. A claim to Medicare for payment was required to contain certain information including, but not limited to: the beneficiary's name and HICN; the name and NPI of the provider who rendered the services; the type of services provided to the beneficiary; and the date the services were provided.

32. The amount of reimbursement that health care providers received from Medicare was determined with reference to predetermined fee schedules based on the type of service. Services rendered by a physician were paid under the Medicare Physician Fee Schedule. Services rendered by a nurse practitioner were paid at 85% of the physician's reimbursement amount. Under Medicare regulations, a physician could submit claims to Medicare under his own NPI – and thereby receive the full reimbursement under the Physician

Fee Schedule – for services rendered by a nurse practitioner only if the nurse practitioner’s services were rendered “incident to the services of the physician.” This meant that the nurse practitioner’s services were performed under the direct supervision of the physician as an integral part of the physician’s personal in-office service; specifically, the physician had to be physically present in the same office suite and immediately available to render assistance to the nurse practitioner if it became necessary. If the nurse practitioner’s services were not rendered incident to the services of the physician, the services had to be billed under the nurse practitioner’s NPI and reimbursed at 85% of the Physician Fee Schedule.

33. **MELVIN LEE ROBISON, D.O.** was an approved Medicare provider.

**COUNTS 56-106**  
**(Health Care Fraud)**

34. The Federal Grand Jury re-alleges and incorporates by reference paragraphs 25 through 33, as though fully set forth herein.

**The Scheme to Defraud**

35. Beginning at least by August 8, 2013, and continuing through at least October 31, 2017, **MELVIN LEE ROBISON, D.O.**, together with others known and unknown to the Federal Grand Jury, devised a scheme and artifice to defraud Medicare and to obtain money from Medicare by means of materially false and fraudulent pretenses, representations, and promises, in connection with the delivery of and payment for health care benefits, items, and services.



**Manner and Means of the Scheme to Defraud**

36. It was part of the scheme and artifice to defraud that **MELVIN LEE ROBISON, D.O.** submitted and caused to be submitted false and fraudulent claims to Medicare under his NPI for services **MELVIN LEE ROBISON, D.O.** purportedly provided to beneficiaries at his clinic on dates when he was, in fact, traveling out of the state or country.

37. Based on these false and fraudulent claims, Medicare paid **MELVIN LEE ROBISON, D.O.** for services that he did not, in fact, personally render.

**Purpose of the Scheme**

38. It was the purpose of the scheme and artifice for **MELVIN LEE ROBISON, D.O.** to unlawfully enrich himself through the submission of false and fraudulent Medicare claims for services that he did not personally render.

**Executions of the Scheme**  
**COUNTS 56-106**

39. On or about the dates specified as to each count below, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O.** -----  
knowingly and willfully executed and attempted to execute the above-described scheme and artifice to defraud Medicare, a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), and to obtain money from Medicare by means of materially false and fraudulent pretenses, representations, and promises, all in connection with the delivery of and payment for health care benefits, items, and services. In particular, **MELVIN LEE ROBISON, D.O.** submitted and caused to be submitted the following false

and fraudulent claims for reimbursement to Medicare, under his NPI, for services he purportedly rendered, on dates he was, in fact, traveling out of the state or country, which resulted in the payments indicated:

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
56	10/17/2014	M.V.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
57	10/17/2014	S.H.	10/10/2014	New patient office or other outpatient visit, typically 45 minutes	\$121.42
58	10/17/2014	M.S.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
59	10/17/2014	K.N.K	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
60	10/17/2014	C.Ho.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
61	10/17/2014	S.T.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
62	10/17/2014	K.G.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
63	10/17/2014	B.Hi.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
64	10/17/2014	K.W.	10/10/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
65	10/17/2014	V.R.	10/13/2014	New patient office or other outpatient visit, typically 30 minutes	\$78.44
66	10/17/2014	D.R.N.	10/13/2014	New patient office or other outpatient visit, typically 30 minutes	\$78.44
67	10/17/2014	J.Br.	10/13/2014	New patient office or other outpatient visit, typically 45 minutes	\$121.42
68	10/22/2014	A.M.	10/16/2014	New patient office or other outpatient visit, typically 45 minutes	\$121.42
69	01/20/2015	E.K.	12/30/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
70	01/12/2015	R.W.	12/30/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
71	01/12/2015	C.Hi.	12/30/2014	Established patient office or other outpatient visit, typically 15 minutes	\$53.06
72	01/13/2015	M.B.	12/30/2014	Annual wellness visit; includes a personalized prevention plan of service, initial visit	\$155.39
73	04/18/2016	V.W.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
74	04/18/2016	L.A.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
75	04/18/2016	C.P.	04/11/2016	Established patient office or other outpatient visit, typically 25 minutes	\$79.24

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
76	04/18/2016	R.H.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
77	04/18/2016	F.Es.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
78	04/18/2016	T.H.	04/11/2016	Established patient office or other outpatient visit, typically 25 minutes	\$79.24
79	04/18/2016	L.Cl.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$30.68
80	04/20/2016	J.H.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
81	04/20/2016	N.G.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
82	04/20/2016	R.R.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
83	04/20/2016	E.E.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
84	04/20/2016	M.T.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
85	04/20/2016	S.F.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
86	04/20/2016	T.T.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
87	04/20/2016	R.C.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
88	04/20/2016	B.He.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
89	04/20/2016	A.E.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
90	04/20/2016	C.Mo.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
91	04/20/2016	C.A.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
92	04/20/2016	F.Ea.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
93	04/20/2016	B.S.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
94	04/20/2016	D.S.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
95	04/20/2016	G.T.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
96	04/20/2016	C.S.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
97	04/20/2016	E.By.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
98	04/20/2016	S.By.	04/11/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
99	05/25/2016	D.M.C.	05/13/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
100	05/25/2016	H.M.	05/13/2016	Established patient office or other outpatient visit, typically 25 minutes	\$79.24
101	05/25/2016	Y.C.	05/13/2016	Established patient office or other outpatient visit, typically 25 minutes	\$79.24
102	05/25/2016	B.E.	05/13/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
103	05/25/2016	V.M.	05/13/2016	Established patient office or other outpatient visit, typically 25 minutes	\$79.24
104	08/24/2016	J.E.	05/17/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61
105	06/8/2016	R.C.A	05/26/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
106	06/08/2016	E.K.	05/26/2016	Established patient office or other outpatient visit, typically 15 minutes	\$53.61

All in violation of Title 18, United States Code, Section 1347 and Title 18, United States Code, Section 2.

**COUNTS 107-159**  
**(Health Care Fraud)**

40. The Federal Grand Jury re-alleges and incorporates by reference paragraphs 25 through 39, as though fully set forth herein.

**The Scheme to Defraud**

41. Beginning in approximately August 2014, and continuing through approximately June 2016, **MELVIN LEE ROBISON, D.O.**, together with others known and unknown to the Federal Grand Jury, devised a scheme and artifice to defraud Medicare and to obtain money from Medicare by means of materially false and fraudulent pretenses, representations, and promises, in connection with the delivery of and payment for health care benefits, items, and services.

**Manner and Means of the Scheme to Defraud**

42. It was part of the scheme and artifice to defraud that **MELVIN LEE ROBISON, D.O.** submitted and caused to be submitted false and fraudulent claims to Medicare under his NPI for services that **MELVIN LEE ROBISON, D.O.** purportedly provided to beneficiaries in nursing homes when, in fact, a nurse practitioner employed by

**MELVIN LEE ROBISON, D.O.** was providing the services and **MELVIN LEE ROBISON, D.O.** was not directly supervising the services.

43. Based on the false and fraudulent claims, Medicare paid **MELVIN LEE ROBISON, D.O.** for services that he did not, in fact, personally render.

**Purpose of the Scheme**

44. It was the purpose of the scheme and artifice for **MELVIN LEE ROBISON, D.O.** to unlawfully enrich himself through the submission of false and fraudulent Medicare claims for services that were rendered by a nurse practitioner rather than by **MELVIN LEE ROBISON, D.O.** himself and that were not subject to his direct supervision.

**Executions of the Scheme**  
**COUNTS 107-159**

45. On or about the dates specified as to each count below, in Sayre, Oklahoma, in the Western District of Oklahoma,

----- **MELVIN LEE ROBISON, D.O.** -----

knowingly and willfully executed and attempted to execute the above-described scheme and artifice to defraud Medicare, a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), and to obtain money from Medicare by means of materially false and fraudulent pretenses, representations, and promises, all in connection with the delivery of and payment for health care benefits, items, and services. In particular, **MELVIN LEE ROBISON, D.O.** submitted and caused to be submitted the following false and fraudulent claims for reimbursement to Medicare, under his NPI, for services rendered by a nurse practitioner, and not directly supervised by him, which resulted in the payments



indicated:

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
107	10/14/2014	J.V.	08/25/2014	Subsequent nursing facility visit, typically 15 minutes per day	\$51.12
108	10/14/2014	N.L.	08/25/2014	Subsequent nursing facility visit, typically 15 minutes per day	\$51.12
109	04/30/2015	P.Ru.	10/14/2014	Subsequent nursing facility visit, typically 35 minutes per day	\$74.48
110	04/30/2015	Z.K.	10/14/2014	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
111	03/31/2015	B.C.	10/14/2014	Subsequent nursing facility visit, typically 35 minutes per day	\$74.48
112	03/31/2015	E.D.	10/14/2014	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
113	06/10/2015	C.Me.	10/14/2014	Subsequent nursing facility visit, typically 35 minutes per day	\$100.43
114	04/02/2015	G.P.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
115	04/28/2015	D.M.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
116	04/02/2015	M.O.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
117	04/02/2015	B.C.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
118	04/02/2015	E.Bo.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
119	04/28/2015	D.P.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
120	04/02/2015	R.F.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
121	04/28/2015	R.S.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
122	04/02/2015	E.D.	01/27/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$66.64
123	05/21/2015	G.P.	04/17/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
124	05/21/2015	M.O.	04/17/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
125	05/21/2015	B.C.	04/17/2015	Subsequent nursing facility visit, typically 15 minutes per day	\$50.52

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
126	05/21/2015	E.Bo.	04/17/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
127	05/21/2015	R.F.	04/17/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
128	05/21/2015	S.Bl.	04/17/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
129	05/21/2015	B.A.	04/17/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.05
130	04/20/2016	P.Ra.	11/24/2015	Subsequent nursing facility visit, typically 15 minutes per day	\$50.77
131	03/07/2016	H.S.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
132	03/07/2016	G.P.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
133	03/07/2016	D.M.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
134	03/07/2016	J.C.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
135	03/07/2016	R.F.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
136	03/07/2016	I.W.	11/24/2015	Subsequent nursing facility visit, typically 15 minutes per day	\$50.77
137	06/16/2016	R.D.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
138	03/07/2016	R.B.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
139	03/07/2016	E.D.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
140	03/07/2016	P.M.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
141	03/07/2016	B.A.	11/24/2015	Subsequent nursing facility visit, typically 25 minutes per day	\$67.38
142	06/16/2016	P.Ra.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
143	11/15/2016	B.R.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
144	06/16/2016	H.S.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
145	06/16/2016	G.P.	04/13/2016	Subsequent nursing facility visit, typically 25 minutes per day	\$68.40

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
146	06/16/2016	D.M.	04/13/2016	Subsequent nursing facility visit, typically 25 minutes per day	\$68.40
147	06/16/2016	C.T.	04/13/2016	Subsequent nursing facility visit, typically 25 minutes per day	\$68.40
148	06/16/2016	J.C.	04/13/2016	Subsequent nursing facility visit, typically 25 minutes per day	\$68.40
149	06/16/2016	R.F.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
150	06/16/2016	J.Be.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
151	06/16/2016	I.W.	04/13/2016	Subsequent nursing facility visit, typically 25 minutes per day	\$68.40
152	06/16/2016	L.W.	04/13/2016	Initial nursing facility visit, typically 35 minutes per day	\$98.17
153	06/16/2016	R.D.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
154	06/16/2016	W.K.	04/13/2016	Initial nursing facility visit, typically 35 minutes per day	\$98.17
155	06/16/2016	R.B.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84

<b>Count</b>	<b>Date Claim Submitted</b>	<b>Beneficiary</b>	<b>Purported Date of Service</b>	<b>Type of Services Claimed</b>	<b>Amount Paid by Medicare</b>
156	06/16/2016	L.Co.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
157	06/16/2016	E.D.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
158	06/16/2016	P.M.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84
159	06/16/2016	B.A.	04/13/2016	Subsequent nursing facility visit, typically 15 minutes per day	\$51.84

All in violation of Title 18, United States Code, Section 1347 and Title 18, United States Code, Section 2.

### **FORFEITURE**

A. The allegations contained in this Indictment are hereby re-alleged and incorporated for the purpose of alleging forfeiture.

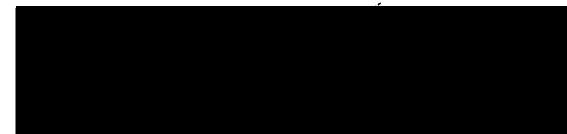
B. Upon conviction of any of the offenses alleged in Counts 1 – 159 of this Indictment, defendants **MELVIN LEE ROBISON, D.O.** and **MOHEB HALLABA, M.D.** shall forfeit to the United States any property real or personal, constituting, or derived from, any proceeds obtained, directly or indirectly, as a result of such offenses, and any property used, or intended to be used, in any manner or part, to commit or to facilitate the commission of such offenses, including but not limited to:

1. A money judgment in an amount representing the amount of proceeds obtained as a result of the offenses.

C. Pursuant to Title 21, United States Code, Section 853(p), as adopted by Title 28, United States Code, Section 2461(c), the defendant shall forfeit substitute property, up to the value of the property described above if, by any act or omission of defendant, the property described above, or any portion thereof, cannot be located upon the exercise of due diligence; has been transferred or sold to, or deposited with, a third person; has been placed beyond the jurisdiction of the Court; has been substantially diminished in value; or has been commingled with other property that cannot be subdivided without difficulty.

All pursuant to Title 18, United States Code, Section 982(a)(7), Title 21, United States Code, Section 853, and Title 28, United States Code, Section 2461(c).

A TRUE BILL:



FOREPERSON OF THE GRAND JURY

ROBERT J. TROESTER  
Acting United States Attorney



JACQUELYN M. HUTZELL  
AMANDA MAXFIELD GREEN  
DAVID P. PETERMANN  
Assistant U.S. Attorneys