#### Case 1:21-cr-00263-JLT-SKO Document 7 Filed 10/28/21 Page 1 of 8

PHILLIP A. TALBERT 1 **FILED** Acting United States Attorney VINCENTE A. TENNERELLI 2 Oct 28, 2021 MELANIE L. ALSWORTH CLERK, U.S. DISTRICT COURT EASTERN DISTRICT OF CALIFORNI Assistant United States Attorney 3 2500 Tulare Street, Suite 4401 Fresno, CA 93721 Telephone: (559) 497-4000 5 Facsimile: (559) 497-4099 6 Attorneys for Plaintiff United States of America 7 8 IN THE UNITED STATES DISTRICT COURT 9 EASTERN DISTRICT OF CALIFORNIA 10 1:21-cr-00263 NONE-SKO CASE NO. 11 UNITED STATES OF AMERICA, Plaintiff. 18 U.S.C. § 1347 – HEALTH CARE FRAUD (TEN 12 COUNTS); 18 U.S.C. § 1028A – AGGRAVATED IDENTITY THEFT (2 COUNTS); 18 U.S.C. 13 V. §982(A)(7) – CRIMINAL FORFÉITURE 14 TRAVIS CHRISTIAN GOBER 15 Defendant. 16 17 INDICTMENT 18 COUNTS ONE THROUGH TEN: [18 U.S.C. § 1347 – HEALTH CARE FRAUD] 19 20 The Grand Jury charges: 21 TRAVIS CHRISTIAN GOBER defendant herein, as follows: 22 23 I. INTRODUCTION At all times relevant to this Indictment: 24 25 A. Relevant Individuals and Entities 1. Defendant TRAVIS CHRISTIAN GOBER resided in Hanford and Visalia, both within 26 the State and Eastern District of California, and elsewhere. GOBER owned, operated, and served as 27 chief executive officer of VIP SLEEP CENTER. 28

2. VIP SLEEP CENTER was a California corporation registered with the California Secretary of State in or about September 2009. Until on or about February 2018, VIP SLEEP CENTER operated sleep disorder clinics in Fresno and Visalia in the State and Eastern District of California.

- 3. H.R. was a cardiologist who practiced in Hanford, in the State and Eastern District of California.
- 4. Y.C. was a nephrologist who practiced in Fresno, in the State and Eastern District of California.
- 5. K.I. is an Irvine, California-based software company that provides an online billing and practice-management platform for health care providers including sleep disorder clinics.
- 6. Sleep disorder clinics are diagnostic testing facilities in which certain conditions such as sleep apnea and narcolepsy are diagnosed through the study of sleep.

### B. Background on the Medicare Program and Sleep Disorder Clinics

- 7. The Medicare Program ("Medicare") was a federal health care insurance program providing benefits to persons who were aged 65 or older or disabled, and it was a "health care benefit program" as defined by 18 U.S.C. § 24(b). Medicare was administered by the Centers for Medicare and Medicaid Services, a federal agency under the United States Department of Health and Human Services. Individual patients who received benefits under Medicare were commonly referred to as Medicare "beneficiaries." Medicare was funded through federal funds.
- 8. Medicare paid claims submitted by participating health care providers for covered medical services, including diagnostic testing at sleep disorder clinics, provided to patients who were Medicare beneficiaries.
- 9. There were different types of Medicare benefits, including "Medicare Part B." Medicare Part B provided reimbursement of certain medically-necessary services including diagnostic tests at sleep disorder clinics.
- 10. To obtain reimbursement from Medicare, a provider of medical goods and services, including a provider of diagnostic testing at a sleep disorder clinic, was required to first apply to participate in the Medicare Program. If approved, Medicare issued the provider a Medicare identification number, which was used for the provider to submit, and for Medicare to process and pay,

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Medicare claims. By signing the application, the provider agreed to comply with Medicare's rules and regulations.

- Once approved by Medicare, the provider would typically begin performing medical 11. services to treat or diagnose patients who were Medicare beneficiaries and submitting claims to Medicare to receive payment for those services. In submitting each claim, the provider certified that the information on the claim form was truthful and accurate and that the services provided were reasonable and necessary to the health of the beneficiary. Medicare had additional payment rules restricting when it would pay for certain services or supplies. Medicare also would deny and would not pay a provider's claim for a service that the provider did not perform.
- 12. When submitting claims for reimbursement, Medicare required providers to specify the beneficiary who received services, the date services were received, and the types of services received. For certain services, including services provided by sleep disorder clinics, Medicare required providers to specify the physician or health care professional who referred the beneficiary for the service. Medicare determined whether to allow each claim, and the amount it paid for each claim, based on the information the provider submitted in the claim itself.
- Medicare covers reasonable and necessary diagnostic tests given at sleep disorder clinics 13. only where specific requirements are met. One such requirement is that the patient was referred to the sleep disorder clinic for diagnostic sleep testing by the patient's attending physician. The clinic is required to maintain a record of the attending physician's orders. When a sleep disorder clinic submits claims to Medicare, it must include the referring physician's name and National Provider Identification number on the claim.
- 14. After each claim was approved for payment, Medicare or a Medicare contractor responsible for processing claims would send the reimbursement to the provider by mail or directly to the provider's bank account via an Electronic Funds Transfer ("EFT").

#### II. THE SCHEME TO DEFRAUD

15. Beginning on a date unknown to the grand jury, but no later than in or around January 2015 and continuing until in or around September 2021, in the State and Eastern District of California and elsewhere, defendant TRAVIS CHRISTIAN GOBER knowingly and willfully executed, and

attempted to execute, a scheme and artifice to defraud a health care benefit program and to obtain and attempt to obtain, by means of false and fraudulent pretenses, representations, and promises, money and property owned by and under the custody and control of, a health care benefit program, namely Medicare and the United States, in connection with the delivery of and payment for health care benefits, items, and services, by submitting false and fraudulent claims to Medicare and the United States on behalf of VIP SLEEP for sleep disorder tests that VIP SLEEP did not perform and that the patients' physicians had not referred.

### III. MANNER AND MEANS

- 16. GOBER carried out his scheme and artifice to defraud by using the following manner and means, among others:
- 17. VIP SLEEP was registered as a Medicare provider since at least on or about May 6, 2012. VIP SLEEP was registered under the provider type "Independent Diagnostic Testing Facility". VIP SLEEP operated as Good Night Sleep Center and Good Night Sleep Center of Fresno. From at least in or about May 2012, GOBER operated, controlled, and was the Chief Executive Officer of VIP SLEEP.
- 18. Until no later than approximately February 2018, VIP SLEEP operated a sleep disorder clinic, though the clinic's business location changed over time and included business locations in Fresno and Visalia. From in or about June 2013 to in or about February 2018, one of VIP SLEEP's business locations was 4118 S. Demaree St., Visalia, California, in the State and Eastern District of California. VIP SLEEP was evicted from that business location in or about February 2018. After that date, VIP SLEEP no longer operated sleep disorder clinics.
- 19. GOBER obtained and possessed the names, dates of birth, social security numbers, Medicare beneficiary identification numbers, and other identifying information of Medicare beneficiaries who received sleep studies from VIP SLEEP. GOBER also obtained and possessed the same information for Medicare beneficiaries who received sleep studies at other sleep disorder clinics.
- 20. In addition to obtaining and possessing the names and personal identifying information of Medicare beneficiaries, GOBER also obtained and possessed the names, National Provider Identification ("NPI") numbers, and other identifying information of various physicians.
  - 21. Using the identifying information of Medicare beneficiaries and physicians in his

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possession, GOBER used and caused others to use K.I.'s online billing platform to submit false claims to Medicare for sleep studies purportedly rendered to Medicare beneficiaries by VIP SLEEP. To do this, GOBER either logged onto the platform himself and submitted the claims, or he directed and caused others to do so. For each claim, GOBER or others acting at his direction input the beneficiary's identifying information, the date VIP SLEEP purportedly provided services to the beneficiary, the type of diagnostic test the beneficiary purportedly received, and the physician who purportedly referred the beneficiary for the sleep study, among other information. K.I. electronically transmitted the claims to Medicare for processing and payment.

- 22. GOBER submitted, and caused to be submitted, false and fraudulent claims to Medicare for sleep studies that VIP SLEEP did not perform and which the patients' physicians had not referred. These false and fraudulent claims included, but were not limited to, the following categories:
  - False and fraudulent claims for sleep studies that were not performed and that listed dates of service after the beneficiary had died.
  - b) False and fraudulent claims for sleep studies that were not performed and that listed dates of service after VIP SLEEP ceased operations in or about February 2018.
  - c) False and fraudulent claims for sleep studies that were not performed and that listed referring physicians who had either never referred patients to VIP SLEEP or who had stopped referring patients to VIP SLEEP before the date of service.
- 23. As an example of the false and fraudulent claims GOBER submitted and caused others to submit, patient S.K., who was a Medicare beneficiary, received one sleep study from VIP SLEEP in approximately January 2015. Nonetheless, GOBER caused VIP SLEEP to bill false and fraudulent claims to Medicare for nine dates of service between on or about June 1, 2016, and on or about July 26, 2019, for diagnostic testing services that were not actually performed and that had not been referred by S.K.'s physician.
- 24. As another example, L.N. received one sleep study in approximately 2014 near L.N.'s former home in San Luis Obispo, California. Nonetheless, GOBER caused VIP SLEEP to bill false and fraudulent claims to Medicare for eight dates of service between on or about May 9, 2018 and June 25. 2019, a time period during which L.N. was not living in California.

25. Medicare paid VIP SLEEP on the claims through EFT to VIP SLEEP's JPMorgan Chase checking account ending in 2757. Beginning on or about May 13, 2016, GOBER had exclusive control over that checking account and was the account's only authorized signer.

- 26. As a result of GOBER's scheme to defraud, GOBER caused false and fraudulent claims exceeding \$10,000,000 to be submitted to Medicare and the United States and caused Medicare and the United States to pay over \$1,300,000 to VIP SLEEP for false and fraudulent claims.
- 27. In carrying out his scheme to defraud, GOBER acted at all relevant times willfully and with the intent to defraud.
- 28. On or about the dates set forth below, in the State and Eastern District of California and elsewhere, defendant TRAVIS CHRISTIAN GOBER knowingly and willfully executed, and attempted to execute, the scheme and artifice to defraud Medicare and the United States, by submitting, and causing to be submitted, to Medicare and the United States materially false claims for services despite GOBER well knowing that the services had not been provided:

Count	Patient Initials	Approx. Date Service Allegedly Provided	Approx. Date Claim Received by Medicare	Claim Number	Approx. Amount Billed to Medicare	Service Claimed	
ONE	S.F.	8/17/2016	7/21/2017	540217202687540	\$ 3,600	Sleep Study	
TWO	D.F.	8/17/2016	7/21/2017	540217202687590	\$ 3,600	Sleep Study	
THREE	V.M.	6/18/2016	6/15/2017	540217166699110 \$ 3,600		Sleep Study	
FOUR	B.O.	3/6/2018	1/25/2019	540219025193970	\$ 3,600	Sleep Study	
FIVE	J.S.C.	3/7/2016	2/21/2017	540917052409460	\$ 3,600	Sleep Study	
SIX	L.N.	12/27/2018	12/18/2019	540919352122320	\$ 3,600	Sleep Study	
SEVEN	S.K.	11/3/2018	8/12/2019	540219224422820	\$ 3,600	Sleep Study	
EIGHT	L.K.	1/29/2020	12/21/2020	540220356485130	\$ 3,600	Sleep Study	
NINE	P.L.	7/6/2020	6/1/2021	540221152576000	\$ 3,600	Sleep Study	
TEN	EN J.C. 7/22/2020 6/4/2021		6/4/2021	540221155320150	\$ 3,600	Sleep Study	

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All in violation of Title 18, United States Code, Section 1347(a)(1) and (a)(2).

COUNTS ELEVEN AND TWELVE: [18 U.S.C. §§ 1028A and 2 – Aggravated Identity Theft]

The Grand Jury further charges:

#### TRAVIS CHRISTIAN GOBER

defendant herein, as follows:

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- 29. The Grand Jury realleges and incorporates by reference the allegations set forth in paragraphs 1 through 28 of this indictment.
- 30. On or about the dates set forth below, in the State and Eastern District of California and elsewhere, defendant TRAVIS CHRISTIAN GOBER did knowingly transfer and use a means of identification of another person without lawful authority during and in relation to an unlawful activity that constitutes a violation of federal law, to wit, health care fraud in violation of 18 U.S.C. § 1347; that is, he knowingly transferred and used the means of identification of another person, including but not limited to the names and NPI numbers of H.R. and Y.C., to commit health care fraud in violation of 18 U.S.C. § 1347, as follows:

COUNT ON OR **ACTUAL MEANS OF IDENTIFICATION CORRESPONDING ABOUT PERSON** COUNT Name and NPI number of Y.C. listed **ELEVEN** Y.C. 6/1/2021 **NINE** as referring provider on claim number 540221152576000 for services purportedly rendered to P.L. Name and NPI number of H.R. listed TWELVE 6/4/2021 H.R. **TEN** as referring provider on claim number 540221155320150 for services purportedly rendered to J.C.

#### FORFEITURE ALLEGATION: [18 U.S.C. § 982(a)(7) - Criminal Forfeiture]

31. Upon conviction of the offenses alleged in Count One through Ten of this Indictment, the defendant shall forfeit to the United States, pursuant to Title 18, United States Code, Section 982(a)(7), any property, real or personal, that constitutes or is derived, directly or indirectly, from gross proceeds

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1	traceable to th	ne commission of the offense.
2	32.	If any of the property described above, as a result of any act or omission of the defendant:
3		a) cannot be located upon the exercise of due diligence;
4		b) has been transferred or sold to, or deposited with, a third party;
5		c) has been placed beyond the jurisdiction of the court;
6		d) has been substantially diminished in value; or
7		e) has been commingled with other property which cannot be divided without
8	difficu	alty, the United States of America shall be entitled to forfeiture of any other property of the
9	defend	lants, up to the value of the property subject to forfeiture, including but not limited to a
10	person	al forfeiture money judgment, pursuant to Title 21, United States Code, Section 853(p), as
11	incorp	orated by Title 18, United States Code, Section 982(b)(1).
12		A TRUE BILL.
13		/s/ Signature on file w/AUSA
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15		FOREPERSON
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18		TALBERT
19		States Attorney
20	KIKKE	. SHERRIFF
21	KIRK E. SHE	
22	Assistant Unit Chief, Fresno	ted States Attorney Office
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No.					

### UNITED STATES DISTRICT COURT

FILED
Oct 28, 2021
CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA

Eastern District of California

Criminal Division

# THE UNITED STATES OF AMERICA vs.

TRAVIS CHRISTIAN GOBER

1:21-cr-00263 NONE-SKO

#### INDICTMENT

VIOLATION(S): 18 U.S.C. § 1347 – HEALTH CARE FRAUD (TEN COUNTS); 18 U.S.C. § 1028A – AGGRAVATED IDENTITY THEFT (2 COUNTS); 18 U.S.C. §982(A)(7) – CRIMINAL FORFEITURE

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Encir P. Grosp	
	Foreman. day, A.D. 20  Clerk.  OUSLY SET

GPO 863 525

AO 257 (Rev. 9/92)

PER 18 U.S.C. 3170

DEFENDANT INFORMATION RI	ELATIVE TO A CI	RIMINAL ACTION IN U.S. DISTRICT COURT
BY   COMPLAINT  INFORMATION  SUPERSEDING: Case No.		Name of District Court, and/or Judge/Magistrate Judge Location (City) UNITED STATES DISTRICT COURT EASTERN DISTRICT OF CALIFORNIA
See Indictment		EASTERN DISTRICT OF CALIFORNIA
	□ Petty	DEFENDANT – U.S. vs.  TRAVIS CHRISTIAN GOBER
	☐ Misdemeanor	Address { 1:21-cr-00263 NONE-SKO
	□ Felony	
Place of offense U.S.	C. Citation	Birth Male Alien
FRESNO COUNTY See Indictment		Date
		(Optional unless a juvenile)
PROCEEDING  Name of Complainant Agency, or Person (& Title, if	2001)	
Name of Complaniant Agency, of Person (& Title, II	any)	DEFENDANT IS NOT IN CUSTODY
FBI - TFO JULIA COSTELLO		1) Has not been arrested, pending outcome of this proceeding
□ person is awaiting trial in another Federal or State of court □ this person/proceeding is transferred from anothe FRCrP □ 20 □ 21 □ 40. Sho		If not detained, give date any prior summons was served on above charges  2) □ Is a Fugitive 3) ⋈ Is on Bail or Release from (show District)  EASTERN DISTRICT OF CALIFORNIA  IS IN CUSTODY
<ul> <li>□ this is a reprosecution of charges previously dismissed which were dismissed on motion of:</li> <li>□ U.S. Att'y □ Defense</li> <li>□ this prosecution relates to a pending case involving this same defendant</li> </ul>	SHOW DOCKET NO.	4)  On this charge 5)  On another conviction 6)  Awaiting trial on other charges } Fed'l State If answer to (6) is "Yes," show name of institution
	MAGISTRATE UDGE CASE NO. 1-mj-00115-BAM-1	Has detainer been filed?  No Silf "Yes," give date filed  Mo. Day Year  DATE OF
		ARREST 7 10/26/2021
Name and Office of Person Furnishing Information on		Or if Arresting Agency & Warrant were not Federal  Mo. Day Year
THIS FORM DEBRA DE LA PE	ENA	DATE TRANSFERRED
⊠ U.S. Att'y [	☐ Other U.S. Agency	TO U.S. CUSTODY
Name of Asst. U.S. Att'y (if assigned)   VINCENTE TEN		☐ This report amends AO 257 previously submitted
ΑΓ	DITIONAL INFORMA	ATION OR COMMENTS

X ADD FORFEITURE UNIT (Check if Forfeiture Allegation)

# United States v. Travis GOBER Penalties for Indictment

# **Defendant TRAVIS GOBER**

#### **COUNTS 1-10:**

**VIOLATION:** 

18 U.S.C. § 1347

PENALTIES:

10 years imprisonment

\$250,000 fine

3 years supervised release \$100 special assessment

## COUNTS 11 and 12

**VIOLATION:** 

18 U.S.C. § 1028A

PENALTIES:

Mandatory 2-year sentence, consecutive to other counts

SPECIAL ASSESSMENT: \$100 (mandatory on each count)

## **FORFEITURE ALLEGATION:**

**VIOLATION:** 

18 U.S.C. § 982(A)(7)

PENALTIES:

As stated in the charging document