

PRESS RELEASE

# Four defendants plead guilty to defrauding Virginia Medicaid

Tuesday, September 3, 2024

## For Immediate Release

U.S. Attorney's Office, Eastern District of Virginia

RICHMOND, Va. – The final defendant pled guilty on Aug. 29 in a healthcare fraud scheme that resulted in nearly \$1 million in loss.

The Virginia Medicaid Program provides medical assistance to indigent individuals who meet certain eligibility requirements. Under its consumer directed care program, Medicaid authorizes the provision of personal and respite care services to eligible Medicaid recipients by a personal care attendant (PCA). Personal care services include a range of support services to enable Medicaid recipients to remain at or return home rather than enter a nursing facility and include assistance with activities of daily living, access to the community, self-administration of medication, or other medical needs, supervision, and the monitoring of health status and physical condition.

According to court documents, from May 2015 through at least November 2023, Jamahl Rennelle Burch, aka Jarod or Jerrod Burch, 43, of Hampton, identified and selected Medicaid recipients to sign up for Medicaid reimbursed personal care or respite care services. Burch and his co-conspirators executed agreements that designated numerous different individuals as PCAs for those recipients. The conspirators used the personal identifying information (PII) of the Medicaid recipients and purported PCAs to create accounts for the submission of timesheets for purported personal care and respite care services.

For over eight years, the conspirators submitted fraudulent timesheets to Medicaid showing thousands of hours of personal care and respite care services. Burch and his coconspirators approved these timesheets attesting that services were provided, when the conspirators knew that none of the PCAs provided any personal or respite care services to the Medicaid recipients.

In total, Burch and his co-conspirators knowingly caused Medicaid to pay at least \$936,950.70 in fraudulent reimbursements for personal care and respite care services that never occurred.

Burch pled guilty Aug. 29 to conspiracy to commit healthcare fraud, healthcare fraud, and aggravated identity theft. He is scheduled to be sentenced on Jan. 9, 2025, and faces up to 10 years in prison for the healthcare fraud counts and a minimum of two years in prison to be served consecutive to any other term of imprisonment for aggravated identity theft.

Tonisha Staton, 36, of Hampton, and William Carter Jr., 40, of Newport News, were Medicaid recipients and acquaintances of Burch.

In 2015, Carter signed up to receive personal care and respite care services, and purportedly hired seven PCAs. None of the seven PCAs provided any services to Carter. In total, the conspirators submitted \$262,373.27 in fraudulent timesheets to Medicaid for services that had never been provided to Carter. Similarly, in 2016, Staton signed up to receive personal care and respite care services, and purportedly hired 10 different PCAs, none of whom ever provided any services to her. The conspirators submitted \$228,972.44 in fraudulent timesheets to Medicaid for services that had never been provided to Staton.

In 2017, Jesse Jerome Hendren, 46, of Henrico, signed up his relative, a Medicaid recipient identified in court records as Recipient 1, to receive personal care and respite care services. Hendren and his co-conspirators purportedly hired two people as PCAs, neither of whom provided any services to Recipient 1. The conspirators submitted \$150,425.99 in fraudulent timesheets to Medicaid for services that had never been provided to Recipient 1.

Staton, Carter, and Hendren pled guilty in February to conspiracy to commit healthcare fraud. Each faces up to 10 years in prison when sentenced in 2025.

Actual sentences for federal crimes are typically less than the maximum penalties. A federal district court judge will determine any sentence after considering the U.S. Sentencing Guidelines and other statutory factors.

Jessica D. Aber, U.S. Attorney for the Eastern District of Virginia; Jason Miyares, Attorney General of Virginia; Stanley M. Meador, Special Agent in Charge of the FBI's Richmond Field Office; Maureen R. Dixon, Special Agent in Charge of the Office of Inspector General for the U.S. Department of Health and Human Services (HHS); and Troy W. Springer, Special Agent in Charge, National Capital Region, U.S. Department of Labor, Office of Inspector General, made the announcement after Senior U.S. District Judge John A. Gibney Jr. accepted Burch's plea.

Assistant U.S. Attorneys Carla Jordan-Detamore and Brian R. Hood are prosecuting the case.

The Virginia Department of Medical Assistive Services Fraud and Abuse Referral Hotline is available for concerned citizens to report allegations related to inappropriate use of Medicaid benefits. Follow [this link](#) for more information.

A copy of this press release is located on the website of the [U.S. Attorney's Office](#) for the Eastern District of Virginia. Related court documents and information are located on the website of the [District Court](#) for the Eastern District of Virginia or on [PACER](#) by searching for Case Nos. 3:23-cr-151 (Burch), 3:24-CR-6 (Carter), 3:24-CR-7 (Hendren) and 3:24-cr-8 (Staton).

### **Contact**

Press Officer

[USAVAE.Press@usdoj.gov](mailto:USAVAE.Press@usdoj.gov)

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### **Topic**

**HEALTH CARE FRAUD**

### **Components**

[Federal Bureau of Investigation \(FBI\)](#)

[USAO - Virginia, Eastern](#)