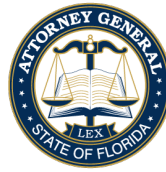


Apr 16, 2021

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OFFICE OF
ATTORNEY GENERAL
ASHLEY MOODY
— *Stronger, Safer Florida* —

Attorney General Ashley Moody News Release



TALLAHASSEE, Fla.—Attorney General Ashley Moody’s Medicaid Fraud Control Unit and the Leon County Sheriff’s Office today arrested the owner of a home and community-based service provider for more than \$50,000 in Medicaid fraud. Quantara Clarke, 49, is the owner of Golden Angels Professional Services, LLC in Gadsden County and allegedly over-billed Medicaid for services not provided. The investigation also revealed that Clarke, on multiple occasions, did not provide quality care or one-on-one support to patients.

Attorney General Ashley Moody said, “This defendant is expected to provide daily support services that are essential for vulnerable patients and are meant to make their lives easier. Not only did she bilk the Medicaid program for services that were physically not possible to provide, she overstated the quality of care and, in some instances, scared her patients. That is unacceptable and my Medicaid Fraud Control Unit won’t stand for it.”

Clarke is responsible for providing home and community-based services for Medicaid recipients and is specialized in traumatic brain injury, developmental disabilities, Autism specifications and aged or disabled adults. Clarke and her employees are intended to provide homemaker services, supported living coaching and life skills development. These services can range from helping with household upkeep, running errands, assisting with paying bills, taking patients to doctor appointments and more.

MFCU’s investigation revealed that Clarke billed Medicaid in excess of time limits set by the Medicaid program and for unauthorized services to patients who were in a hospital or

incarcerated. Pursuant to Florida Medicaid regulations, the billed services must be provided to recipients at their home, a family member's home or in the community. Clarke also overstated the time spent with patients, and several victims allege that Clarke and her employees intimidated them. In one instance, Clarke and employees brought multiple patients together in one home to make it "easier" to provide services, although one-on-one supported living coaching services were billed to Medicaid.

Clarke is charged with one count of Medicaid provider fraud \$50,000 or more, a first-degree felony. If convicted, Clarke faces up to 30 years in prison and more than \$300,000 in fines and restitution.

The Attorney General's MFCU will prosecute the case through an agreement with the State Attorney's Office in the Second Judicial Circuit.

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The Florida Attorney General's Medicaid Fraud Control Unit investigates allegations of patient abuse, neglect and exploitation in facilities receiving payments under the Medicaid program. Additionally, MFCU investigates and prosecutes providers that intentionally defraud the state's Medicaid program through fraudulent billing practices. Medicaid fraud essentially steals from Florida's taxpayers.

The Florida MFCU is funded through a grant totaling \$26,329,510, for Federal Fiscal Year 2021, from the U.S. Department of Health and Human Services Office of Inspector General. The Federal Share of these funds is 75% totaling \$19,747,136. The State Matching Share of these funds is 25% totaling \$6,582,374 and is funded by Florida.