

AFFIDAVIT FOR ARREST WARRANT

STATE OF FLORIDA)
COUNTY OF DUVAL)

S.A. NO. 14 AF 19079 Case NO. 14-216
DIVISION CR C JUDGE John Moran
ASST. STATE ATTY. Licandro, J

PLEASE PRINT LEGIBLY - ALL SPACES

Before me, the undersigned Judge of the Fourth Judicial Circuit, in and for Duval County Florida, personally came Detective Paul Robbins, who, being duly sworn deposes and says that he has reason to and does believe that one STEVEN LLOYD RHODES, described as follows: Last known address: 926 2ND STREET SOUTH, JACKSONVILLE BEACH, FL 32250; Race: White Sex: Male; DOB: 12/15/1951 / [REDACTED] Ht 6'0"; Wt: 180 Hair: Brown; Eyes: Blue; Scars, Marks: Unknown; did in Duval County, Florida, from June 2013 to February 2014, commit the crime(s) of (1) False and fraudulent insurance claims (7x), and (2) Schemes to Defraud, contrary to the provisions of Section(s) (1) 817.234 (1)(a)1 (F3) and (2) 817.034(4)(a)(3) (F3) Florida Statutes:

Your Affiant is a Law Enforcement Detective with the Florida Department of Financial Services, Division of Insurance Fraud (DIF). Your Affiant has over 30 years of Law enforcement experience and states:

On February 4, 2014, O [REDACTED] V. [REDACTED] filed a complaint in reference to possible fraudulent billing by Chiropractic Physician STEVEN RHODES. RHODES is the owner of OCEAN VIEW HEALTH, INC, located at 320 North 1st St, Suite 709, Jacksonville Beach, FL 32250. The complaint dates are from September 2013 to January 2014.

V. [REDACTED] said she had expressed concern several times when signing paper work for services that were not rendered. RHODES and his staff personally assured her that the paper work would be submitted correctly to the insurance company, but it was not. V. [REDACTED] sent RHODES correspondence asking him to correct the billing situation but instead he called her asking her to meet to discuss this in person. RHODES told her that he would "make me happy".

On February 18, 2014, another complaint was filed by Kemper Direct Insurance Company, SIU David Kunz. Kunz reported that his insured driver, A [REDACTED] R [REDACTED] N [REDACTED] was seeking treatment with RHODES at OVH due to injuries sustained in an automobile accident. Kunz reported that OVH is billing for manual therapy under CPT 97140 but the Subjective, Objective, Assessment, and Plan (SOAP) notes reveal treatment by a massage therapist with an expired massage license.

The investigation revealed that RHODES allowed LISA JACKMORE and CYNTHIA PEREZ to provide treatment/therapies to patients knowing that PEREZ had an expired LMT license and that JACKMORE was not licensed. PEREZ and JACKMORE provided treatment, which required being a Licensed Massage Therapist or a Registered Chiropractic Assistant. By doing so, bills were submitted to numerous insurance companies for services that should not have been performed.

The investigation revealed RHODES was submitting his notes for billing which indicated more units of treatment than what was actually provided. RHODES also directed MELISSA ROSS to show more units of manual therapy treatment on her notes so it matched what RHODES put in his notes. ROSS would put two (2) units of therapy although she only provided one (1) unit.

By doing this RHODES caused bills to be submitted to the insurance companies for services that were not rendered.

RHODES would also complete his notes showing patients were receiving electrical stimulation, manual therapy and traction when in fact they never received this treatment.

According to ROSS she conducted a license search on PEREZ through the Department of Health website. She printed out the page showing that PEREZ'S license was expired and gave it to RHODES. This was in or about September 2013.

During the investigation seven (7) patients were interviewed. All of the patients had unauthorized billing submitted to their insurance companies for treatment/therapies they never received.

At this time a total of \$11,836.00 of unauthorized treatment has been billed to Kemper Insurance, State Farm Insurance, Nationwide Insurance, Optum (United Health Care) Progressive Insurance and Esurance.

O [REDACTED] V. [REDACTED]

A total of \$2,734.00 in unauthorized treatment was submitted to Nationwide Insurance. The treatment consisted of Ultrasound Therapy, Traction Therapy and Manual Therapy

D [REDACTED] B [REDACTED]

There was \$1,432.00 in unauthorized bills submitted to OPTUM Insurance for Traction Therapy, Electrical Muscle Stimulation, Massage Therapy and Manual Therapy. B [REDACTED] has been pregnant since May 2013. She has not had electrical stimulation since then but her insurance company has been billed for the service.

R [REDACTED] G [REDACTED]

There was \$2,665.00 in unauthorized bills submitted to State Farm Insurance for Traction Therapy and Manual Therapy. G [REDACTED] said she never started receiving traction therapy until February 2014.

M [REDACTED] & H [REDACTED] S [REDACTED]

There was \$880.00 in unauthorized bills submitted to ESURANCE for Manual Therapy.

B [REDACTED] L [REDACTED]

There was \$1,890.00 in unauthorized bills submitted to Progressive Insurance for Ultrasound Therapy, Traction Therapy and Manual Therapy. L [REDACTED] said RHODES told her he will not bill her insurance company for future treatments on the roller table (traction). L [REDACTED] said RHODES told her this because he has been billing the insurance company for the roller table treatment and she was not receiving the treatment.

H [REDACTED] C [REDACTED]

A total of \$1,080.00 in unauthorized treatment was billed to State Farm Insurance for Manual Therapy and Massage Therapy.

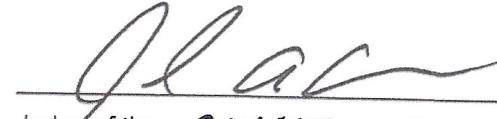
A [REDACTED] N [REDACTED]

A total of \$1,155.00 of unauthorized treatment was billed to Kemper Insurance for Manual Therapy.



Affiant: Paul Robbins ID No. 895227
Agency: Florida Department of Financial Services – Fraud Division
Duty Section: Jacksonville, Florida
Phone: 904-798-4874

Sworn to and subscribed before me this 7 day of April, 2014, by the aforementioned Affiant
who is personally known to me or who has produced State Police Identification
as identification and who did take an oath.



Judge of the Court Court of the Fourth
Judicial Circuit in and for Duval County, Florida

ARREST WARRANT

S.A. No. 14-AF-19079 CCR No. 14-216
DIVISION CR-6 JUDGE John Moran
ASST. STATE ATTY. J. Licandro

IN THE NAME OF THE STATE OF FLORIDA
TO ALL SINGULAR THE SHERIFFS OR DEPUTY
SHERIFFS OF THE STATE OF FLORIDA

WHEREAS, upon the sworn affidavit, complaint or other sworn testimony of Detective Paul Robbins, the undersigned Judge of the Fourth Judicial Circuit of Florida, in and for Duval County, has found that there exists probable cause to believe that one STEVEN LLOYD RHODES, did from June 2013 to February 2014 in Duval County, Florida, commit the offense(s) of ((1) False and fraudulent insurance claims (7x), and (2) Schemes to Defraud, contrary to the provisions of Section(s) (1)) 817.234 (1)(a)(1) (F3) and (2) 817.034(4)(a)(3) (F3) Florida Statutes:

You are HEREBY COMMANDED to arrest STEVEN LLOYD RHODES, described as follows: Last known address: 926 2ND STREET SOUTH, JACKSONVILLE BEACH, FL 32250; Race: White; Sex: Male DOB: 12/15/1951 /
Ht 6'0"; Wt: 180; Hair: Brown; Eyes: Blue; Scars, Marks: Unknown; if he/she be found in your county, and safely keep him/her so that you have his/her body before a Judge of the Duval County Circuit Court, at the Courthouse in Jacksonville, instanter, to be dealt with according to law. Appearance bond is fixed at:

Bond Charge#1 5.001
Bond Charge#2 5.001
Bond Charge #3 5.001

Bond Charge#4 5.007
Bond Charge#5 5.007
Bond Charge#6 5.007

Bond Charge#7 5,007
Bond Charge#8 10,007

Given under my hand and seal this 7 day of April, 2014

Judge of the Court Court of the Fourth
Judicial Circuit in and for Duval County, Florida

Entered in NCIC or FCIC Yes No (Check [] One)
If YES, Extradition Code: C / E / O / S / (Circle One)
ASA Approval: W. Collins Coyle

Received this Arrest Warrant the _____ day of _____, 2014 _____, and executed it on the _____ day of _____, 2014 _____, by arresting the within named _____, and having him / her now before the Court this _____ day of _____, 2014 _____.

Arresting Officer: _____ ID No. _____
Agency: _____
Duty Section: _____

JAIL DOCKET NO: