



1 Information directly in District Court, pursuant to Mont. Code Ann. § 46-11-201, alleging the Defendant  
2 committed offenses in Hill County, based upon information set forth herein that was developed through  
3 an investigation conducted by a criminal justice investigator. More specifically, the Information alleges  
4 the Defendant committed the following offenses: COUNT I: INSURANCE FRAUD/THEFT, (Common  
5 Scheme), a FELONY, in violation of Mont. Code Ann. §§ 33-1-1202(1), 33-1-1211(2), and 45-6-  
6 301(6)(a); COUNT II: FORGERY (Common Scheme), a FELONY, in violation of Mont. Code Ann. §  
7 45-6-325.  
8

9       3. A criminal justice investigator has made a full and careful investigation of all the facts  
10 and circumstances surrounding the commission of said offenses, so far as they are known or  
11 ascertainable, and your Affiant believes it a proper case for the filing of the Information that  
12 accompanies this affidavit.  
13

14       The facts establishing probable cause are as follows:

15       On or about May 1, 2006, Defendant obtained accident coverage with American Family  
16 Assurance Company (AFLAC) through a State of Montana Group Plan. The insurance policy covered  
17 the Defendant, her husband, and her son.  
18

19       In 2014, AFLAC audited Defendant's claims history beginning August 19, 2011, through  
20 December 12, 2013. Upon audit, AFLAC claims specialist Lara Barlett (Barlett) discovered concerns  
21 with Defendant's claims including a high number of fractures. Additionally, Barlett contacted several  
22 medical providers to verify hospital stays claimed by Defendant and was informed that none occurred.  
23 Moreover, during the audit period, Barlett determined that Defendant made a total of 31 claims on the  
24 policy and received more claim benefits than any policyholder under AFLAC's State of Montana Group  
25 Plan. Barlett referred the matter to AFLAC's Special Investigative Unit (SIU).  
26  
27  
28

1 SIU investigator Robert Robinson (Robinson) contacted the four medical providers purported to  
2 have provided services relating to Defendant's claims. The medical providers were Benefis Health  
3 System, Great Falls Orthopedic, Northern Montana Health Care, and Down Under Physical Therapy.  
4 Benefis Health System reported that one of the claims submitted by Defendant was valid. Great Falls  
5 Orthopedic reported that two of the claims were valid. Northern Montana Health Care reported that  
6 three of the claims were valid. Down Under Physical Therapy reported that none of the claims were  
7 valid.  
8 valid.

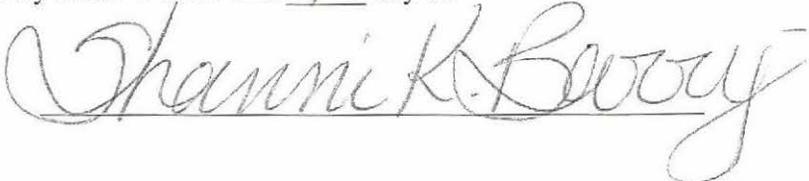
9 Robinson contacted Defendant who admitted to submitting 25 false claims to AFLAC, totaling  
10 \$84,965, by altering old medical provider bills during the period beginning August 19, 2011, and ending  
11 December 12, 2013. Defendant agreed to, and did, repay AFLAC for the false claims by taking out a  
12 loan. Defendant admitted to falsify bills and submitting false claims to State Investigator Bryan Stanley.  
13

14 WHEREFORE, the undersigned moves the Court for its Order granting leave to file an  
15 Information directly in District Court.

16 DATED this 7<sup>th</sup> day of October, 2015.

17  
18  
19   
20 MIKE WINSOR  
21 Special Assistant Attorney General  
22 Special Assistant Gallatin County Attorney

23 SUBSCRIBED and SWORN to before me by Mike Winsor this 17<sup>th</sup> day of  
October, 2015.

24   
25

