

U.S. DISTRICT COURT
DISTRICT OF VERMONT
FILED

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF VERMONT

SEP 16 PM 1 26

UNITED STATES OF AMERICA)
)
 v.)
)
 DAVID S. CHASE,)
 Defendant.)

CLERK
BY [Signature]
DEPUTY CLERK

Criminal No.

INDICTMENT

The Grand Jury charges that:

INTRODUCTION TO ALL COUNTS

A. Background

1. At all times relevant to this Indictment, the defendant DAVID S. CHASE was a licensed, practicing ophthalmologist in Vermont who regularly performed cataract surgery and other eye surgery on his patients.

2. At all times relevant to this Indictment, the defendant DAVID S. CHASE maintained offices located in the Mansfield Professional Building, 183 Saint Paul Street in Burlington, Vermont ("the Mansfield Professional Building"). CHASE's offices at the Mansfield Professional Building included a reception area, examination rooms, staff offices, file rooms, and an outpatient surgical facility. CHASE's surgical facility included a surgery room, a recovery room, and equipment for performing eye surgery. CHASE was the only doctor who used this facility for cataract surgery.

3. At all times relevant to this Indictment, the defendant DAVID S. CHASE employed a staff to assist in his ophthalmology and surgical practice. The staff included

receptionists, technicians, nurses, billing and personnel staff, an optical manager, and, at times, an optician. The clinical staff, those responsible for providing medical care to patients, were supervised by CHASE.

i. Diagnosis of Cataracts

4. A cataract is the clouding of the natural lens of the eye that may effect a person's vision. The cause of a cataract and its rate of development are unique for each person. During the early stages of cataract development, there may be no perceptible effect on a person's vision. Over time, the severity of a cataract may range from being a "trace" cataract with little or no effect on vision to being a "dense" cataract with significant effect on vision.

5. A cataract is diagnosed from a comprehensive eye examination that includes, among other things, a patient's medical history, a patient's assessment of their own vision and visual needs, testing a patient's vision including any need for refractive correction, and a slit lamp microscopic examination of the patient's lens and other portions of the eye. A patient's medical history and vision are assessed by asking the patient questions prior to examination to understand their vision problems (if any) and their current visual needs.

6. A patient's vision is generally tested by asking a patient to read a standardized letter chart (commonly known as a "Snellen chart"). A standard Snellen letter chart consists of rows of block letters (or symbols) in gradually decreasing sizes, and a patient is asked to read down the chart as many rows of letters as possible. A patient's vision is then recorded as a Snellen fraction: the first number represents the standard test distance (20 feet) and the second number represents the distance that a person with normal vision can see the letters on the Snellen chart. So, a person with 20/20 vision has normal vision. A person with 20/40 vision

can only see the letters on the Snellen chart from 20 feet away that a person with normal vision can see standing 40 feet away. On this scale, a person with 20/50 vision is not permitted to drive in Vermont; a person with 20/200 vision is considered functionally blind.

7. In many cases, a person's vision can be improved with refractive correction, either by wearing glasses, contact lens, or other visual aids. The amount of refractive correction can be determined using automated equipment, manual equipment, or both. With automated equipment, a patient is asked to look into a computerized, electronic machine (commonly known as an "auto refractor") that automatically assesses the patient's need for correction and determines the corrected vision for the patient (the patient is asked to read a Snellen letter chart inside the auto refractor with refractive correction). The auto refractor then prints out a slip of paper with the patient's refractive correction (commonly known as a "prescription") and his or her corrected vision as a Snellen fraction (20/20, 20/30, 20/40, etc.). With manual equipment, a patient is asked to look through a series of optical lenses set in a machine (commonly known as a "phoropter") at a standard Snellen letter chart and asked which lens gives the patient his or her corrected vision. A technician then records the prescription and the corrected vision in the patient's medical chart.

8. A slit lamp is a special microscope that allows an ophthalmologist to look into a patient's eye and examine the lens and other areas within a patient's eye. Using a slit-lamp examination, an ophthalmologist can see if the lens has any cloudiness and can identify if the patient has a cataract, its type, and its severity. There are several types of cataracts, including nuclear, cortical, posterior subcapsular (known as "PSC"), and mixed, depending on the location of the cloudiness within the lens. The diagnosis of a cataract is based on the results of

the comprehensive eye examination.

ii. **Treatment of Cataracts**

9. A cataract may or may not require surgery. Treatment of a cataract depends on the severity of the cataract, the patient's visual needs, and the patient's assessment of alternatives to cataract surgery. A cataract does not require surgery where a patient's vision meets his or her visual needs for daily activities. Where appropriate, a cataract should be treated with a new prescription for glasses or contact lenses to restore acceptable vision for daily activities. Where correction cannot restore acceptable vision for daily activities, a cataract may be treated by surgery.

10. Cataract surgery is generally an elective procedure and the patient, not the ophthalmologist, needs to make the decision to have surgery. A patient should be advised of the risks of surgery, the options to surgery (new glasses, contact lens, or other visual aids), and the elective nature of the surgery. Cataract surgery should not be performed where the patient does not want surgery; glasses, contact lens, or visual aids provide vision that meets the patient's needs; the patient's quality of life is not compromised by the cataract; surgery will not improve the patient's vision; or the patient is unfit for safe surgical intervention.

11. Cataract surgery is a procedure where an ophthalmologist removes a patient's natural lens, which has lost its clarity, and replaces it with a synthetic, clear lens. Cataract surgery requires a patient to be anesthetized. Incisions are then made into the eye, and a specialized surgical instrument (called a "phacoemulsifier") is used to break down the patient's natural lens, which is then removed with suction. The new, synthetic lens (called an "intraocular lens") is fitted into the patient's eye through the same incision.

iii. Secondary Cataracts, Diagnosis and Treatment

12. Following cataract surgery, a secondary cataract may develop in the back of the capsule that holds the newly-implanted lens. Over time, this secondary cataract may cause a gradual decrease in visual function. Secondary cataracts generally do not develop within the first two months after surgery and may take up to five or ten years to develop.

13. A secondary cataract, just like a cataract, is diagnosed as a result of a comprehensive eye examination. A secondary cataract may or may not be treated by surgery. A secondary cataract does not require surgery where a patient's vision meets their needs for daily activities. As with cataract surgery, a secondary cataract surgery is an elective procedure and the patient, not the ophthalmologist, needs to make the final decision to have surgery after being advised of the risks and complications of surgery.

14. A secondary cataract surgery is performed with a YAG laser procedure. Using a non-invasive laser, an ophthalmologist can eliminate the cloudiness caused by the secondary cataract. The procedure only requires topical anesthesia and may take minutes to perform.

iv. Billing Procedures

15. At all times relevant to this Indictment, the defendant DAVID S. CHASE submitted and caused to be submitted claims for reimbursement of medical services provided by him and his staff to federally funded health care benefit programs, including Medicare, Medicaid, Tricare, Blue Cross Blue Shield Federal Employees Program ("BCBS Federal"), The Mail Handlers Benefit Plan ("Mail Handlers"), and private health care benefit programs, including Blue Cross and Blue Shield of Vermont ("BCBS"), MVP Healthcare ("MVP"), American Association of Retired Persons Health Care Options ("AARP"), Capital Blue Cross

("CBC"), Comprehensive Benefits Administrator, Inc. ("CBA"), CIGNA Health Care, North American Health Plans, Inc. ("CIGNA"), and Vermont Managed Care - Employers Mutual, Inc. ("VMC"), as defined by Title 18, United States Code, Section 24(b).

16. At all times relevant to the Indictment, the defendant DAVID S. CHASE submitted his claims for reimbursement to health care benefit programs on a standard Health Insurance Claim Form (known as a "HCFA-1500 form"), which described the dates of service, the procedure and services claimed, and the diagnosis justifying the claim. In submitting the HCFA-1500 form, CHASE certified that "the services shown on this form were medically indicated and necessary for the health of the patient."

17. At all times relevant to the Indictment, federally-funded health care programs, including Medicare, Medicaid, Tricare, BCBS Federal, and Mail Handlers, reimbursed physicians for services and procedures that were medically necessary. For example, under federal law, Medicare only reimburses for medical services that are "reasonable and necessary for the diagnosis or treatment of an illness or injury." In contracts with Medicare, CHASE agreed to "abide by all Medicare laws, regulations and program instructions" and pledged that "I will not knowingly present or cause to be presented a false or fraudulent claim for payment by Medicare, and will not submit claims with deliberate ignorance or reckless disregard of their truth or falsity." CHASE also agreed to allow audits of all original source documents, including medical records, supporting his claims and to maintain those documents for six years. In contracts with other federally-funded health care benefit programs, CHASE similarly agreed to receive reimbursement only for medically necessary services, to maintain medical records supporting his claims, and produce those medical records, if requested, for audits of his claims.

18. At all times relevant to this Indictment, private health benefit programs, including BCBS, MVP, AARP, CBC, CBA, CIGNA, and VMC, only reimbursed physicians for services and procedures that were medically necessary. For example, in contracts with BCBS, Chase agreed to “provide only medically necessary care” and that was “appropriate and necessary for the symptoms, diagnosis and treatment of the medical condition” and “within standards of good medical practice with the organized medical community.” Similarly, in contracts with MVP, Chase agreed to “provide medically necessary covered services in his or her specialty of a quality of care that is in conformity with accepted medical and surgical practices and which meet or exceed that which is prevailing in the area where they practice.” In contracts with other private health care benefit programs, CHASE similarly agreed to receive reimbursement only for medically necessary services, to maintain medical records supporting his claims, and produce those medical records, if requested, for audits of his claims.

19. At all times relevant to this Indictment, the defendant DAVID S. CHASE was an individual providing medical benefits, items, and services for which payment may be made under a public or private health benefit plan and, under federal law, CHASE was also a health care benefit program, as defined by Title 18, United States Code, Section 24(b).

20. At all times relevant to this Indictment, the defendant DAVID S. CHASE used and caused to be used interstate facilities, including the U.S. mails, the telephone, and electronic wire transfers, to submit and receive payment for his claims for reimbursement of medical services, including HCFA-1500 forms, provided by him and his staff to and from health care benefit programs.

THE SCHEME TO DEFRAUD

21. In or about and between October 1996 and July 2003, both dates being approximate and inclusive, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE did knowingly and willfully devise, execute, and attempt to execute a scheme and artifice to defraud health care benefit programs and to obtain money and property owned by and under the custody and control of health care benefit programs by means of false and fraudulent pretenses, representations, and promises, in connection with the delivery of and payment for health care benefits, items, and services.

22. It was part of the scheme and artifice that the defendant DAVID S. CHASE offered, recommended, and performed cataract surgery and secondary cataract surgery that was not medically necessary.

23. It was further part of the scheme and artifice that the defendant DAVID S. CHASE fraudulently diagnosed the severity of his patients' cataracts and secondary cataracts, often describing the cataracts and secondary cataracts as "dense" when, in fact, the severity of the cataracts was not "dense."

24. It was further a part of the scheme and artifice that the defendant DAVID S. CHASE did conduct and cause to be conducted misleading and fraudulent supplemental vision tests to support his diagnoses of cataracts and secondary cataracts.

25. It was further part of this scheme and artifice that the defendant DAVID S. CHASE exaggerated and created patient complaints about their vision and, at times, misrepresented their desire to have cataract surgery to support his diagnosis of cataracts and secondary cataracts.

26. It was further part of the scheme and artifice that the defendant DAVID S. CHASE did record and direct others to record false, fraudulent, and misleading statements, test results, and diagnoses in his patient's medical charts to support his diagnoses of cataracts and secondary cataracts.

27. It was further part of the scheme and artifice that the defendant DAVID S. CHASE did destroy and cause others to destroy results of certain medical tests and certain medical records that did not support his diagnoses of cataracts and secondary cataracts.

28. It was further part of the scheme and artifice that the defendant DAVID S. CHASE discouraged patients from seeking second opinions prior to surgery and did not fully advise patients of the alternatives to surgery.

29. It was further part of the scheme and artifice that the defendant DAVID S. CHASE did submit and direct others to submit claims to health care benefit programs for reimbursement of medical services, including cataract surgery, secondary cataract surgery, related surgical testing, and surgical facility fees, that were not medically necessary.

MANNER AND MEANS OF THE SCHEME TO DEFRAUD

30. To execute the above referenced scheme and artifice, the defendant DAVID S. CHASE used the following manner and means, among others:

B. Chase's Diagnosis and Treatment of Cataracts

31. At various times relevant to this Indictment, the defendant DAVID S. CHASE exaggerated the severity of his patients' cataracts and told his patients that they needed cataract surgery when, in fact, the patient had no significant visual loss and no significant difficulty with their daily activities. In general, CHASE did not attempt to assess whether glasses, contact

lenses, or other visual aids would provide corrected vision to meet his patients' needs for daily activities. CHASE often fraudulently diagnosed patients with normal vision (20/20 vision) as having a "dense" cataract that required surgery. CHASE often advised patients that they should have cataract surgery immediately and often did not review the alternatives to surgery with his patients.

32. At various times relevant to this Indictment, the defendant DAVID S. CHASE exaggerated and created patient complaints to support his diagnosis of cataracts. At times, CHASE would exaggerate or create patient complaints about driving in difficult lighting conditions, such as facing oncoming headlights at night or in the rain, and record or cause those exaggerated or created complaints to be recorded in a patient's medical record. At times, CHASE misrepresented his patient's desire to have cataract surgery by writing or causing to be written in their medical record that the patient "wants cataracts removed" or "wants cataracts removed ASAP" when, in fact, the patient had not yet agreed to the surgery or did not want surgery at all.

33. At various times relevant to this Indictment, the defendant DAVID S. CHASE discouraged his patients from getting a second opinion for his recommendation of cataract surgery. At times, CHASE advised patients that he, not another doctor, would give the patient a second opinion. CHASE advised patients that if they went to another doctor, the other doctor would not see the cataracts because they did not have the expertise and qualifications of CHASE. In his "second opinion," CHASE would then recommend cataract surgery for his patients a second time. CHASE directed his staff to record in the patient's medical chart that the patient had been "given a 2nd opinion."

34. At various times relevant to this Indictment, CHASE misrepresented his medical qualifications and certifications to encourage patients to have cataract surgery and discourage them from seeking a second opinion. At times, CHASE misled his patients to believe that he was the only surgeon in Vermont certified to do cataract surgery.

35. At all times relevant to this Indictment, the defendant DAVID S. CHASE directed his staff to maintain a schedule of performing nine cataract surgeries every week, regardless of the number of patients he examined. CHASE expressed anger with his staff if he did not have nine surgeries scheduled for the upcoming week. At times, when his schedule was not full, CHASE would contact patients if they elected not to undergo surgery or wanted to wait to have surgery, and CHASE attempted to convince his patients to have surgery as soon as possible in order to fill his schedule.

36. From in or about July 2002 to July 2003, the defendant DAVID S. CHASE performed cataract surgeries on more than 210 of his patients. For approximately 30 percent of those surgeries, the patients had corrected vision of 20/20 or better in their eye prior to surgery. For approximately 50 percent of those surgeries, the patients had corrected vision of 20/30 or better in their eye prior to surgery. With limited exceptions, standard medical practice does not support the need for cataract surgery unless a patient's corrected vision is 20/40 or worse.

C. Chase's Supplemental Vision Tests

37. At all times relevant to this Indictment, the defendant DAVID S. CHASE used supplemental vision tests to support his diagnosis of cataracts and his recommendation for cataract surgery. Among other things, these supplemental vision tests were conducted contrary to standard medical practice, had the effect of making a patient's vision appear to be

significantly worse than it was, and were used by CHASE to support his fraudulent diagnosis of cataracts.

i. **Brightness Acuity Testing**

38. Beginning in or about October 1996 and continuing until in or about July 2003, the defendant DAVID S. CHASE directed and trained his staff to conduct brightness acuity testing on all patients over 45 who had not previously had cataract surgery and to record the results of the tests contrary to standard medical practice.

39. Brightness acuity testing is designed to assess a patient's vision under various light conditions and is administered by using the Brightness Acuity Tester (BAT). The BAT is a handheld instrument with a cup that fits over the eye and can be illuminated by a light of varying intensity. The patient is directed to look through the hole in the cup on the BAT and read the letters from a standard Snellen letter chart.

40. The BAT has three light settings: low, medium, and high. The "low" setting approximates bright overhead fluorescent lighting, the "medium" setting approximates indirect sunlight while outdoors, and the "high" setting approximates direct, overhead sunlight while outdoors. The intensity of the "high" setting is four times that of the "medium" setting, and more than 30 times greater than the "low" setting.

41. The instructions for the BAT direct that a patient be tested with their glasses or contact lenses (if needed) in place, at first with the light in the BAT turned off. Then, the patient should be tested with the BAT set to the "low" light setting, then set to the "medium" light setting, and then set to the "high" light setting. With each setting, the patient should be given approximately 30 seconds to allow their eye to adjust to the light intensity before reading

from the Snellen chart. The results of the BAT at each setting should be recorded in the patient's medical chart, and the results should be clearly marked as being done with the BAT.

42. At all times relevant to the Indictment, the defendant DAVID S. CHASE directed and trained his staff to only use the BAT with the "high" light setting, contrary to the BAT instructions and standard medical practice, and to record results from BAT with no notation of the light setting used, contrary to standard medical practice. At times, CHASE also directed and trained his staff to conduct testing with the BAT on the "high" light setting after a patient's eyes were dilated, contrary to standard medical practice. Furthermore, CHASE always used the BAT in conjunction with contrast sensitivity testing.

ii. **Contrast Sensitivity Testing (CST)**

43. From in or about October 1996 and continuing until in or about July 2003, the defendant DAVID S. CHASE directed and trained his staff to conduct contrast sensitivity testing (CST) in conjunction with the BAT on all patients over 45 who had not previously had cataract surgery and record the results of CST with the BAT contrary to standard medical practice.

44. Contrast sensitivity testing (CST) is designed to test a patient's ability to see varying degrees of contrast, and CHASE used the Vector Vision CSV-1000 test for CST. The CSV-1000 test is administered in two phases. First, the patient is asked to look at a letter chart, similar to a standard Snellen letter chart, and asked to read rows of letters which get smaller and smaller as the patient reads down the chart. Unlike a standard Snellen letter chart, however, the CSV-1000 test had sets of letters with three, varying degrees of contrast: one with 100 percent contrast (black letters), one with 25 percent contrast (gray letters), and one with 12.5 percent

contrast (light gray letters). Second, the patient is asked to look at two rows of small circles with lines that appear as fuzzy gray bars. The width and clarity of the bars within the circles change as the patient reads across the chart, and the patient is asked to say whether the bars are in the upper or lower circle in each row. According to its instructions, when conducting CST with the BAT, the CSV-1000 test is to be administered first without the BAT and then with the BAT. To evaluate the test, the results from the CSV-1000 test with the BAT are then compared to the test results without the BAT.

45. At all times relevant to the Indictment, the defendant DAVID S. CHASE directed and trained his staff to conduct the first and second phases of the CSV-1000 test only while looking through the BAT on the "high" light setting, contrary to test instructions and standard medical practice. CHASE also directed and trained his staff to conduct the first phase of the CSV-1000 test only using the lowest contrast letters (12.5 percent) on the Snellen chart. Following these procedures, the test results from CST with the BAT set on the "high" light setting made a patient's vision appear to be significantly worse than it was.

D. Chase's Fraudulent Recording of Test Results

46. From in or about October 1996 and continuing until in or about August 2002, for any patient over 45 who had not had cataract surgery, the defendant DAVID S. CHASE directed and trained his staff to write the test results from the standard Snellen letter test on a yellow "sticky" note or slip of paper that could be removed from the patient's medical chart. CHASE directed and trained his staff to record CST with the BAT test results in place of the standard Snellen letter test results in a patient's medical chart under the heading "1. Vision" with no notation that it was, in fact, CST with the BAT test results. Then, after testing by his

staff, CHASE would review a patient's medical chart, read the results of the standard Snellen letter test on the "sticky" note or slip of paper, and would destroy or cause others to destroy the "sticky" note or slip of paper with the results of the standard Snellen letter test. As a result, a patient's vision in their medical chart under the heading "1. Vision" would appear to be significantly worse than it was.

47. Beginning in or about August 2002 and continuing until in or about July 2003, for any patient over 45 who had not had cataract surgery, the defendant DAVID S. CHASE directed and trained his staff to record the test results both from the standard Snellen letter test and from CST with the BAT on the yellow "sticky" note or slip of paper that could be removed from the medical chart, leaving a portion of the patient's medical chart blank. After testing by his staff and during his review of the chart, CHASE then personally wrote the test results from CST with the BAT in place of results from the standard Snellen letter test under the heading "1. Vision" in the patient's medical chart. CHASE continued to destroy or direct others to destroy the "sticky" note or slip of paper with the results of the standard Snellen letter test and CST with the BAT.

E. Chase's Diagnosis and Treatment of Secondary Cataracts

48. At various times relevant to the Indictment, the defendant DAVID S. CHASE exaggerated the severity of his patients' secondary cataracts and told his patients that they needed secondary cataract surgery, when, in fact, the patient had no significant visual loss and no difficulty with their daily activities. CHASE routinely advised patients that they should have secondary cataract surgery immediately, often on the same day of his diagnosis. CHASE often exaggerated and created patient complaints to support his diagnosis and, at times,

misrepresented patient's desire to have the surgery. CHASE directed and trained his staff to conduct CST with the BAT, as described in paragraphs 37 to 47 above, in order to justify his diagnosis of secondary cataracts, and he regularly submitted claims to health care benefit programs using these fraudulent test results to justify secondary cataract surgery.

49. From January 2002 to July 2003, the defendant DAVID S. CHASE performed secondary cataract surgery on approximately 75 percent of his patients who had cataract surgery in 2002, often performing secondary cataract surgery in less than two months from the initial surgery. With limited exceptions, standard medical practice usually requires secondary cataract surgery on 40 percent or less of cataract surgery patients over several years.

COUNT 1

(Patient JS - False Statement)

50. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

51. On or about June 11, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient JS's medical chart that she was not able to drive due to glare at night when Patient JS did not have difficulty driving at night; (b) recording and causing to be recorded the corrected vision of Patient JS as 20/100 in the right eye and 20/100 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for both eyes in Patient JS's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 2
(Patient JS - Health Care Fraud)

52. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

53. On or about June 11 and July 15, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient JS's medical chart, as described in paragraph 51(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient JS's medical chart, as described in paragraph 51(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient JS's medical chart, as described in paragraph 51(c) above; (d) offer and recommend cataract surgery for Patient JS that was not medically necessary; and (e) perform cataract surgery on Patient JS that was not medically necessary.

(18 U.S.C. § 1347, 2)

COUNT 3
(Patient SL-1 - False Statement)

54. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

55. On or about June 30, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient SL-1's medical chart that she was not able to drive safely due to glare when Patient SL-1 did not have difficulty driving safely; (b) recording and causing to be recorded the corrected vision of Patient SL-1 as 20/100 in the right eye and 20/70 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical "pp" cataract for both eyes in Patient SL-1's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 4
(Patient SL-1 - Health Care Fraud)

56. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

57. On or about June 30 and July 15, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient SL-1's medical chart, as described in paragraph 55(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient SL-1's medical chart, as described in paragraph 55(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient SL-1's medical chart, as described in paragraph 55(c) above; (d) offer and recommend cataract surgery for Patient SL-1 that was not medically necessary; and (e) perform cataract surgery on Patient SL-1 that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 5

(Patient MM - False Statement)

58. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

59. On or about August 29, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient MM's medical chart that she "can't see to drive safely" at nighttime that "interferes" with her vision and she "wants cataracts removed" when, in fact, Patient MM did not have difficulty driving safely at nighttime and did not want cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient MM as 20/80 in both eyes on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts in Patient MM's medical chart knowing the severity of her cataracts was not "dense," for the left eye, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 6

(Patient MM - False Statement)

60. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

61. On or about June 13, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded the vision of Patient MM as 20/100 in both eyes on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for the left eye in Patient MM's medical chart knowing the severity of her cataracts was not "dense," for the left eye, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 7
(Patient MM - Health Care Fraud)

62. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

63. On or about August 29, 2001 and June 13 and July 1, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient MM's medical chart, as described in paragraph 59(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient MM's medical chart, as described in paragraphs 59(b) and 61(a) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient MM's medical chart, as described in paragraphs 59(c) and 61(b) above; (d) offer and recommend cataract surgery for Patient MM that was not medically necessary; and (e) perform cataract surgery on Patient MM that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 8
(Patient ST - False Statement)

64. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

65. On or about June 20, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient ST's medical chart that she "wants cataracts removed" in her right eye "ASAP" when, in fact, Patient ST did not want cataract surgery; (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical lens opacity for the right eye in Patient ST's medical chart knowing the severity of her cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 9
(Patient ST - False Statement)

66. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

67. On or about June 30, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient ST's medical chart that she had decreased vision for reading and driving in her right eye when, in fact, she was complaining about her vision in her left eye; (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical "post pol" cataracts for the right eye in Patient ST's medical chart knowing the severity of her cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 10
(Patient ST - Health Care Fraud)

68. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

69. On or about May 8, June 17, June 20, and June 30, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient ST's medical chart, as described in paragraphs 65(a) and 67(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient ST's medical chart, as described in paragraphs 65(b) and 67(b) above; (c) offer and recommend cataract surgery for Patient ST that was not medically necessary; and (d) perform cataract surgery for Patient ST that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 11

(Patient TM - False Statement)

70. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

71. On or about April 23, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient TM that his left eye had decreased vision “for reading and driving” and he “wants cataract removed” from his left eye when, in fact, Patient TM did not have any changes to his reading and driving vision in his left eye and did not want cataract surgery; (b) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataracts for the left eye in Patient TM's medical chart knowing the severity of his cataract was not “dense” in the left eye, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 12

(Patient TM - False Statement)

72. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

73. On or about June 24, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient TM that his left eye had decreased vision “for reading and driving” and he “wants cataract removed” from his left eye “ASAP” when, in fact, Patient TM did not have any changes to his reading and driving vision with his left eye and did not want cataract surgery; (b) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataracts for the left eye in Patient TM's medical chart knowing the severity of his cataract was not “dense” in the left eye, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 13
(Patient TM - Health Care Fraud)

74. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

75. On or about April 9, April 22, April 23, and June 24, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient TM's medical chart, as described in paragraphs 71(a) and 73(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient TM's medical chart, as described in paragraph 71(b) and 73(b) above; (c) offer and recommend cataract surgery for Patient TM that was not medically necessary; and (d) perform cataract surgery on Patient TM that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 14
(Patient JP - False Statement)

76. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

77. On or about July 11, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient JP's medical chart that she wanted her cataract removed from her left eye "ASAP" when, in fact, Patient JP did not want cataract surgery; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for the left eye in Patient JP's medical chart knowing the severity of her cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 15
(Patient JP - False Statement)

78. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

79. On or about October 10, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient JP's medical chart that she wanted her cataract removed from her left eye when, in fact, Patient JP did not want cataract surgery; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for the left eye in Patient JP's medical chart knowing the severity of her cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 16
(Patient JP - Health Care Fraud)

80. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

81. On or about June 13, July 2, July 11, and October 10, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient JP's medical chart, as described in paragraphs 77(a) and 79(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient JP's medical chart, as described in paragraphs 77(b) and 79(b) above; (c) offer and recommend cataract surgery for Patient JP that was not medically necessary; and (d) perform cataract surgery for Patient JP that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 17
(Patient BD - False Statement)

82. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

83. On or about July 12, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient BD's medical chart that she "wants cataracts [left eye] removed ASAP" when, in fact, Patient BD did not want cataract surgery for her left eye; (b) recording and causing to be recorded the corrected vision for Patient BD as 20/100 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for her left eye in Patient BD's medical chart knowing the severity of her left eye cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 18
(Patient BD - Health Care Fraud)

84. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

85. On or about August 3, 2000 and July 12, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded false and fraudulent statements in Patient BD's medical chart, as described in paragraph 83(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient BD's medical chart, as described in paragraph 83(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient BD's medical chart, as described in paragraph 83(c) above; and (d) offer and recommend cataract surgery for Patient BD that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 19
(Patient SS - False Statement)

86. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

87. On or about January 11, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient SS's medical chart that he "wants cataracts removed" in his right eye "ASAP" when, in fact, Patient SS did not want cataract surgery as soon as possible; (b) recording and causing to be recorded the corrected vision of Patient SS as 20/50 in the right eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for the right eye in Patient SS's medical chart knowing the severity of his cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 20
(Patient SS - Health Care Fraud)

88. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

89. On or about January 7 and January 11, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient SS's medical chart, as described in paragraph 87(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient SS's medical chart, as described in paragraph 87(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient SS's medical chart, as described in paragraph 87(c) above; and (d) offer and recommend cataract surgery for Patient SS that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 21

(Patient KW - False Statement)

90. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

91. On or about October 2, 2000, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: recording and causing to be recorded in Patient KW's medical chart that he wanted the cataract removed in his right eye when, in fact, he did not want cataract surgery, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 22

(Patient KW - False Statement)

92. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

93. On or about August 3, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient KW's medical chart that he "wants cataracts removed" in his right eye when, in fact, Patient KW did not want cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient KW as 20/50 in the right eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for the right eye in Patient KW's medical chart knowing the severity of his cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 23
(Patient KW - Health Care Fraud)

94. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

95. On or about January 31, August 15, September 15, and October 2, 2000 and August 3, 2001, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient KW's medical chart, as described in paragraphs 91 and 93(a) above; (b) record and cause to be recorded fraudulent and misleading test results test results in Patient KW's medical chart, as described in paragraph 93(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient KW's medical chart, as described in paragraph 93(c) above; (d) offer and recommend cataract surgery for Patient KW that was not medically necessary; and (e) perform cataract surgery on Patient KW that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 24
(Patient DL - False Statement)

96. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

97. On or about August 16, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient DL's medical chart that she had blurred vision in her left eye and wanted her left eye cataract removed "ASAP" when, in fact, Patient DL did not have blurred vision in her left eye and did not want cataract surgery; (b) recording and causing to be recorded the vision for Patient DL as 20/50-1 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for the left eye in Patient DL's medical chart knowing the severity of her left eye cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 25
(Patient DL - Health Care Fraud)

98. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

99. On October 3, 2000 and February 5 and August 16, 2001, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient DL's medical chart, as described in paragraph 97(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient DL's medical chart, as described in paragraph 97(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient DL's medical chart, as described in paragraph 97(c) above; and (d) offer and recommend cataract surgery for Patient DL that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 26
(Patient ML - False Statement)

100. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

101. On or about May 25, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: recording and causing to be recorded in Patient ML's medical chart that she "wants cataract surgery" in her right eye "ASAP" when, in fact, Patient ML did not want cataract surgery in her right eye, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 27

(Patient ML - False Statement)

102. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

103. On or about June 14, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded the vision for Patient ML as 20/40+1 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (b) recording and causing to be recorded the diagnosis of "dense" central capsular opacity in the left eye knowing the severity of her left eye opacity was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 28
(Patient ML - False Statement)

104. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

105. On or about June 18, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient ML's medical chart that she had blurred vision in her right eye and wanted her right eye cataract removed "ASAP" when, in fact, Patient ML did not have blurred vision in her right eye and did not want cataract surgery in her right eye; (b) recording and causing to be recorded the corrected vision for Patient ML as 20/50 in the right eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision in the right eye was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for the right eye in Patient ML's medical chart knowing the severity of her right eye cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 29
(Patient ML - Health Care Fraud)

106. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

107. On or about March 30, May 15, May 25, June 14, and June 18, 2001, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient ML's medical chart, as described in paragraphs 103(a) and 105(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient ML's medical chart, as described in paragraph 105(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient ML's medical chart, as described in paragraph 103(b) and 105(c) above; (d) offer and recommend cataract surgery and secondary cataract surgery for Patient ML that was not medically necessary; and (e) perform cataract surgery and secondary cataract surgery on Patient ML that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 30
(Patient DP - False Statement)

108. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

109. On or about August 16, 2000, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: recording and causing to be recorded in Patient DP's medical chart that she wanted her cataract removed from her left eye "ASAP" when, in fact, Patient DP did not want cataract surgery, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 31

(Patient DP - False Statement)

110. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

111. On or about October 19, 2000, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: recording and causing to be recorded in Patient DP's medical chart that she wanted her cataract removed from her left eye "ASAP" when, in fact, Patient DP did not want cataract surgery, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 32
(Patient DP - Health Care Fraud)

112. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

113. On April 26, August 15, August 16, 2000 and October 19, 2000, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient DP's medical chart, as described in paragraphs 109 and 111 above; (b) offer and recommend cataract surgery for Patient DP that was not medically necessary; and (c) perform cataract surgery on Patient DP that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 33

(Patient RS - False Statement)

114. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

115. On or about July 3, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded the corrected vision of Patient RS as 20/70 in each eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for both eyes in Patient RS's medical chart knowing the severity of his cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 34
(Patient RS - Health Care Fraud)

116. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

117. On or about July 3, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded fraudulent and misleading test results in Patient RS's medical chart, as described in paragraph 115(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient RS's medical chart, as described in paragraph 115(b) above; and (c) offer and recommend cataract surgery for Patient RS that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 35

(Patient JL - False Statement)

118. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

119. On or about June 18, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient JL's medical chart that she "wants cataracts removed" when, in fact, Patient JL did not want cataract surgery; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for both eyes in Patient JL's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 36
(Patient JL - Health Care Fraud)

120. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

121. On or about June 18, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient JL's medical chart, as described in paragraph 119(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient JL's medical chart, as described in paragraph 119(b) above; and (c) offer and recommend cataract surgery for Patient JL that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 37
(Patient RM - False Statement)

122. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

123. On or about May 21, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient RM's that he "can't see to drive safely in glare conditions" when, in fact, Patient RM did not have difficulty driving in glare conditions; (b) recording and causing to be recorded the corrected vision of Patient RM as 20/70 in the right eye and 20/70 in the left eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for both eyes in Patient RM's medical chart knowing the severity of his cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 38
(Patient RM - Health Care Fraud)

124. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

125. On or about May 21, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient RM's medical chart, as described in paragraph 123(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient RM's medical chart, as described in paragraph 123(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient RM's medical chart, as described in paragraph 123(c) above; and (d) offer and recommend cataract surgery for Patient RM that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 39
(Patient GM - False Statement)

126. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

127. On or about May 21, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient GM that she was “unable to drive safely at night” and “can’t see to do work” when, in fact, Patient GM did not have difficulty driving safely at night and did not have difficulty seeing to do work; (b) recording and causing to be recorded the corrected vision of Patient GM as 20/50 in each eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataract for both eyes in Patient GM's medical chart knowing the severity of her cataracts was not “dense,” all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 40
(Patient GM - Health Care Fraud)

128. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

129. On or about May 21, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient GM's medical chart, as described in paragraph 127(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient GM's medical chart, as described in paragraph 127(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient GM's medical chart, as described in paragraph 127(c) above; and (d) offer and recommend cataract surgery for Patient GM that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 41
(Patient JM - False Statement)

130. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

131. On or about May 16, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient JM's that she "can't see to drive safely in glare conditions" when, in fact, Patient JM did not have difficulty driving safely in glare conditions; (b) recording and causing to be recorded the corrected vision of Patient JM as 20/100 in the right eye and 20/50 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for both eyes in Patient JM's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 42
(Patient JM - Health Care Fraud)

132. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

133. On or about May 16, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient JM's medical chart, as described in paragraph 131(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient JM's medical chart, as described in paragraph 131(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient JM's medical chart, as described in paragraph 131(c) above; and (d) offer and recommend cataract surgery for Patient JM that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 43
(Patient RH - False Statement)

134. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

135. On or about May 8, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient RH that he “can’t see to drive safely” at nighttime and that he “wants cataracts removed” when, in fact, Patient RH did not have difficulty driving at night and he did not want cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient RH as 20/50 in each eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical “pp” subcapsular cataract in the medical chart for Patient RH knowing the severity of his cataracts was not “dense,” all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 44
(Patient RH - Health Care Fraud)

136. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

137. On or about May 8, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient RH's medical chart, as described in paragraph 135(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient RH's medical chart, as described in paragraph 135(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient RH's medical chart, as described in paragraph 135(c) above; and (d) offer and recommend cataract surgery for Patient RH that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 45
(Patient LS - False Statement)

138. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

139. On or about May 2, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient LS that she “wanted cataracts removed” when, in fact, Patient LS did not want cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient LS as 20/100 in both eyes on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataract for both eyes in Patient LS's medical chart knowing the severity of her cataracts was not “dense,” all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 46
(Patient LS - Health Care Fraud)

140. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

141. On or about May 2, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient LS's medical chart, as described in paragraph 139(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient LS's medical chart, as described in paragraph 139(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient LS's medical chart, as described in paragraph 139(c) above; and (d) offer and recommend cataract surgery for Patient LS that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 47

(Patient PW - False Statement)

142. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

143. On or about April 9, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient PW that she “can’t see to drive safely” at nighttime “in glare” and she “wanted cataracts removed” when, in fact, Patient PW did not have difficulty driving safely at night in glare and did not want cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient PW as 20/50 in the right eye and 20/70 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataract for both eyes in Patient PW's medical chart knowing the severity of her cataracts was not “dense,” all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 48

(Patient PW - Health Care Fraud)

144. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

145. On or about April 9, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient PW's medical chart, as described in paragraph 143(a) above; (b) record and cause to be recorded fraudulent and misleading test results test results in Patient PW's medical chart, as described in paragraph 143(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient PW's medical chart, as described in paragraph 143(c) above; and (d) offer and recommend cataract surgery for Patient PW that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 49

(Patient HN - False Statement)

146. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

147. On or about January 17, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient HN that she had difficulty driving safely at night and she “wants cataracts removed” when, in fact, Patient HN did not have difficulty driving safely at night and did not want cataract surgery, and (b) recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataract for both eyes in Patient HN's medical chart knowing the severity of her cataracts was not “dense,” all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 50
(Patient HN - Health Care Fraud)

148. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

149. On or about January 17, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient HN's medical chart, as described in paragraph 147(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient HN's medical chart, as described in paragraph 147(b) above; and (c) offer and recommend cataract surgery for Patient HN that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 51
(Patient DA - False Statement)

150. The allegations of paragraphs 1 through 57 are hereby realleged as if fully set forth herein.

151. On or about December 2, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient DA's medical chart that she "can't see to drive safely" and "wants cataracts removed" when, in fact, Patient DA was able to drive safely and did not want cataract surgery; (b) recording and causing to be recorded the vision for Patient DA as 20/100 in the right eye and 20/70 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for both eyes in Patient DA's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 52
(Patient DA - Health Care Fraud)

152. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

153. On or about December 2, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded false and fraudulent statements in Patient DA's medical chart, as described in paragraph 151(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient DA's medical chart, as described in paragraph 151(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient DA's medical chart, as described in paragraph 151(c) above; and (d) offer and recommend cataract surgery for Patient DA that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 53
(Patient JK - False Statement)

154. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

155. On or about November 20, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient JK's medical chart that she "wants cataracts removed" when, in fact, Patient JK did not want cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient JK as 20/100 in the right eye and 20/70 in the left eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical opacity for both eyes in Patient JK's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 54
(Patient JK - Health Care Fraud)

156. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

157. On or about November 20, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient JK's medical chart, as described in paragraph 155(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient JK's medical chart, as described in paragraph 155(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient JK's medical chart, as described in paragraph 155(c) above; and (d) offer and recommend cataract surgery for Patient JK that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 55

(Patient WA - False Statement)

158. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

159. On or about October 30, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient WA's medical chart that he "wants cataracts removed" when, in fact, Patient WA did not want cataract surgery; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical "pp" cataracts for both eyes in Patient WA's medical chart knowing the severity of his cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 56

(Patient WA - Health Care Fraud)

160. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

161. On or about October 30, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded false and fraudulent statements in Patient WA's medical chart, as described in paragraph 159(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient WA's medical chart, as described in paragraph 159(b) above; and (c) offer and recommend cataract surgery for Patient WA that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 57
(Patient JN - False Statement)

162. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

163. On or about September 30, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient JN's medical chart that he "wants cataracts removed" when, in fact, Patient JN did not want cataract surgery; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for both eyes in Patient JN's medical chart knowing the severity of his cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 58
(Patient JN - Health Care Fraud)

164. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

165. On or about September 30, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient JN's medical chart, as described in paragraph 163(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient JN's medical chart, as described in paragraph 163(b) above; and (c) offer and recommend cataract surgery for Patient JN that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 59
(Patient MG - False Statement)

166. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

167. On or about September 24, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: recording and causing to be recorded the diagnosis of “dense” central nuclear cortical cataract for both eyes in Patient MG’s medical chart knowing the severity of her cataracts was not “dense,” all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 60
(Patient MG - Health Care Fraud)

168. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

169. On or about September 24, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient MG's medical chart, as described in paragraph 167 above and (b) offer and recommend cataract surgery for Patient MG that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 61

(Patient WC - False Statement)

170. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

171. On or about September 24, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false, fictitious, and fraudulent statement and a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient WC's medical chart that he "wants cataract removed" when, in fact, Patient WC did not want cataract surgery; (b) recording and causing to be recorded the corrected vision for Patient WC as 20/80 in the right eye and 20/100 in the left eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts in Patient WC's medical chart knowing the severity of his cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 62

(Patient WC - Health Care Fraud)

172. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

173. On or about September 24, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded false and fraudulent statements in Patient WC's medical chart, as described in paragraph 171(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient WC's medical chart, as described in paragraph 171(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient WC's medical chart, as described in paragraph 171(c) above; and (d) offer and recommend cataract surgery for Patient WC that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 63

(Patient SL-2 - False Statement)

174. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

175. On or about July 29, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient SL-2 that she had difficulty driving in glare conditions when, in fact, Patient SL-2 did not have difficulty driving in glare conditions; (b) recording and causing to be recorded the corrected vision of Patient SL-2 as 20/50 in the right eye and 20/50+1 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for both eyes in Patient SL-2's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 64
(Patient SL-2 - Health Care Fraud)

176. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

177. On or about July 29, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient SL-2's medical chart, as described in paragraph 175(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient SL-2's medical chart, as described in paragraph 175(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient SL-2's medical chart, as described in paragraph 175(c) above; and (d) offer and recommend cataract surgery for Patient SL-2 that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 65
(Patient RD - False Statement)

178. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

179. On or about June 13, 2002, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded the corrected vision for Patient RD as 20/63 in the right eye and 20/40-1 in the left eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical lens opacity for both eyes in Patient RD's medical chart knowing the severity of his lens opacities was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 66

(Patient RD - Health Care Fraud)

180. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

181. On or about June 13, 2002, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded false and fraudulent statements in Patient RD's medical chart, as described in paragraph 179(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient RD's medical chart, as described in paragraph 179(b) above; and (c) offer and recommend cataract surgery for Patient RD that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 67
(Patient EH - False Statement)

182. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

183. On or about December 12, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient EH's medical chart that she "wants cataracts removed" when, in fact, Patient EH did not want cataract surgery; (b) recording and causing to be recorded the vision of Patient EH as 20/32 in the right eye and 20/50 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataract for both eyes in Patient EH's medical chart knowing the severity of Patient EH's cataract was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 68

(Patient EH - Health Care Fraud)

184. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

185. On or about December 12, 2001, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient EH's medical chart, as described in paragraph 183(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient EH's medical chart, as described in paragraph 183(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient EH's medical chart, as described in paragraph 183(c) above; and (d) offer and recommend cataract surgery for Patient EH that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 69
(Patient CB - False Statement)

186. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

187. On or about August 13, 2001, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in Patient CB's medical chart that she "wants cataracts removed" when, in fact, Patient CB did not want cataract surgery; (b) recording and causing to be recorded the vision for Patient CB as 20/50 in the right eye and 20/40 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for both eyes in Patient CB's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 70

(Patient CB - Health Care Fraud)

188. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

189. On or about August 13, 2001, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded false and fraudulent statements in Patient CB's medical chart, as described in paragraph 187(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient CB's medical chart, as described in paragraph 187(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient CB's medical chart, as described in paragraph 187(c) above; and (d) offer and recommend cataract surgery for Patient CB that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 71

(Patient PF - False Statement)

190. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

191. On or about September 6, 2000, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: recording and causing to be recorded in Patient PF's medical chart that Patient PF's vision in glare conditions "interferes with life" and that he "wants his cataracts removed" when, in fact, Patient PF's vision in glare conditions was not interfering with his life and he did not want cataract surgery, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 72
(Patient PF - Health Care Fraud)

192. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

193. On or about September 6, 2000, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient PF's medical chart, as described in paragraph 191 above and (b) offer and recommend cataract surgery for Patient PF that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 73
(Patient HP - False Statement)

194. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

195. On or about February 11, 2000, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient HP that he "can't see to drive safely" at night when, in fact, Patient HP did not have difficulty driving at night, and (b) recording and causing to be recorded the corrected vision of Patient HP as 20/100 in the right eye and 20/70 in the left eye on his medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better, all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 74
(Patient HP - Health Care Fraud)

196. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

197. On or about February 11, 2000, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient HP's medical chart, as described in paragraph 195(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient HP's medical chart, as described in paragraph 195(b) above; and (c) offer and recommend cataract surgery for Patient HP that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 75
(Patient NL - False Statement)

198. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

199. On or about June 16, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded in the medical chart for Patient NL's that "retinal surgeon recommended cataract surgery" when, in fact, Patient NL's retinal surgeon had not recommended cataract surgery; (b) recording and causing to be recorded the corrected vision of Patient NL as 20/50 in the right eye and 20/100 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (c) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical "pp sub caps" cataract for both eyes in Patient NL's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 76

(Patient NL - Health Care Fraud)

200. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

201. On or about June 16 and July 1, 2003 for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did (a) record and cause to be recorded false and fraudulent statements in Patient NL's medical chart, as described in paragraph 199(a) above; (b) record and cause to be recorded fraudulent and misleading test results in Patient NL's medical chart, as described in paragraph 199(b) above; (c) record and cause to be recorded false and fraudulent diagnoses in Patient NL's medical chart, as described in paragraph 199(c) above; (d) offer and recommend cataract surgery for Patient NL that was not medically necessary; and (e) perform cataract surgery that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 77
(Patient LF - False Statement)

202. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

203. On or about April 28, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded the corrected vision for Patient LF as 20/100 in the right eye and 20/50 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better and (b) recording and causing to be recorded the diagnosis of "dense" central nuclear cortical cataracts for both eyes in Patient LF's medical chart knowing the severity of her cataracts was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 78

(Patient LF - Health Care Fraud)

204. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

205. On or about April 28, May 6, and May 13, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded fraudulent and misleading test results in Patient LF's medical chart, as described in paragraph 203(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient LF's medical chart, as described in paragraph 203(b) above; (c) offer and recommend cataract surgery for Patient LF that was not medically necessary; and (d) perform cataract surgery on Patient LF that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 79

(Patient LF - False Statement)

206. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

207. On or about June 5, 2003, in the District of Vermont and elsewhere, the defendant DAVID S. CHASE, in a matter involving a health care benefit program, did knowingly and willfully falsify, conceal, and cover up by trick, scheme, and device a material fact and make a materially false writing knowing the same to contain a materially false, fictitious, and fraudulent statement, to wit: (a) recording and causing to be recorded the corrected vision for Patient LF as 20/100 in the right eye and 20/70 in the left eye on her medical chart under the heading "1. Vision" when, in fact, the patient's vision was significantly better; and (b) recording and causing to be recorded the diagnosis of "dense" central capsular opacity for both eyes in Patient LF's medical chart knowing the severity of her opacity was not "dense," all in connection with the delivery of and payment for health care benefits, items, and services.

(18 U.S.C. §§ 1035, 2)

COUNT 80
(Patient LF - Health Care Fraud)

208. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

209. On or about June 5, 2003, for purposes of executing and attempting to execute the scheme and artifice to defraud and to obtain money by means of false and fraudulent pretenses, as described in paragraphs 21 through 29 above, the defendant DAVID S. CHASE did: (a) record and cause to be recorded fraudulent and misleading test results in Patient LF's medical chart, as described in paragraph 207(a) above; (b) record and cause to be recorded false and fraudulent diagnoses in Patient LF's medical chart, as described in paragraph 207(b) above; (c) offer and recommend secondary cataract surgery for Patient LF that was not medically necessary; and (d) perform secondary cataract surgery on Patient LF that was not medically necessary.

(18 U.S.C. §§ 1347, 2)

COUNT 81
(Forfeiture Allegations)

210. The allegations of paragraphs 1 through 209 are hereby realleged as if fully set forth herein.

211. Upon conviction of one or more federal health care offenses in Counts 1 through 80, the defendant DAVID S. CHASE shall forfeit to the United States all property, real and personal, that constitutes or is derived, directly or indirectly, from gross proceeds traceable to the commission of the offense, including but not limited to the following:

- a. United States funds in the minimum amount of \$1,000,000;
- b. DAVID S. CHASE's interest in a certain tract or parcel of land, with buildings situated thereon known and designated as 173-193 St. Paul Street, Burlington, Vermont, the legal description of which may be found in Volume 516 at Page 722 in the City of Burlington Land Records.

Being the same property conveyed to Mansfield Professional Building by Quit Claim Deed of 173 St. Paul Street Associates, a Vermont Partnership of Burlington, dated October 20, 1994 and recorded on October 31, 1994 in Volume 516 at Page 722 of the City of Burlington Land Records;

- c. DAVID S. CHASE's interest in a certain condominium parcel located in Nassau County, Florida, composed of Villa Unit No. 6545 and an undivided share in those common elements appurtenant thereto, also known as 6545 Beachwood Road, Fernandina Beach (Amelia Island), Florida, the legal description may be found in Book 750 at Page 294 in the Nassau County, Florida Official Records.

Being the same property conveyed to Brianne E. Chase and David S. Chase by Warranty Deed of Catherine K. Arrix, dated January 24, 1996 and recorded on January 31, 1996 in Book 750 at Page 294 of the Nassau County, Florida Official Records.

- d. DAVID S. CHASE's interest in a certain tract or parcel of land, with buildings thereon, located at 4854 Spear Street, Shelburne, Vermont and consists of 3.8 acres of land, the legal description of which may be found in Volume 45 at Page 289 in the Town of Shelburne Land Records.

Being the same property conveyed to Brianne E. Chase and David S. Chase by

Warranty Deed of James R. Hagadone and Gloria G. Hagadone dated May 28, 1970 and recorded on June 1, 1970 in Volume 45 at Page 289 of the Town of Shelburne Land Records; and

- e. DAVID S. CHASE's interest in a certain tract or parcel of land, with buildings thereon, located at 451 Appletree Point Road, Burlington, Vermont and consists of .81 acres of land, the legal description of which may be found in Volume 705 at Page 329 of the City of Burlington Land Records.

Being the same property conveyed to Brianne E. Chase and David S. Chase by Warranty Deed of Susan Shepherd dated November 7, 2001 and recorded on November 9, 2001 in Volume 705 at Page 329 of the City of Burlington Land Records.

212. If any of the above-described property, as a result of any act or omission of the defendant:

- a. cannot be located upon exercise of due diligence;
- b. has been placed beyond the jurisdiction of the Court;
- c. has been transferred or sold to, or deposited with a third party;
- d. has been substantially diminished in value; or
- e. has been commingled with other property which cannot be divided without difficulty; it is the intent of the United States to seek forfeiture of any other property of the defendant up to the value of such property pursuant to 21 U.S.C. § 853(p), incorporated by 18 U.S.C. § 982(b)(1), including but not limited to the following:

- i. DAVID S. CHASE's interest in a certain tract or parcel of land, with buildings situated thereon known and designated as 173-193 St. Paul Street, Burlington, Vermont, the legal description of which may be found in Volume 516 at Page 722 in the City of Burlington Land Records.

Being the same property conveyed to Mansfield Professional Building by Quit Claim Deed of 173 St. Paul Street Associates, a Vermont Partnership of Burlington, dated October 20, 1994 and recorded on October 31, 1994 in Volume 516 at Page 722 of the City of Burlington Land Records;

- ii. DAVID S. CHASE's interest in a certain condominium parcel located in

Nassau County, Florida, composed of Villa Unit No. 6545 and an undivided share in those common elements appurtenant thereto, also known as 6545 Beachwood Road, Fernandina Beach (Amelia Island), Florida, the legal description may be found in Book 750 at Page 294 in the Nassau County, Florida Official Records.

Being the same property conveyed to Brianne E. Chase and David S. Chase by Warranty Deed of Catherine K. Arrix, dated January 24, 1996 and recorded on January 31, 1996 in Book 750 at Page 294 of the Nassau County, Florida Official Records.

- iii. DAVID S. CHASE's interest in a certain tract or parcel of land, with buildings thereon, located at 4854 Spear Street, Shelburne, Vermont and consists of 3.8 acres of land, the legal description of which may be found in Volume 45 at Page 289 in the Town of Shelburne Land Records.

Being the same property conveyed to Brianne E. Chase and David S. Chase by Warranty Deed of James R. Hagadone and Gloria G. Hagadone dated May 28, 1970 and recorded on June 1, 1970 in Volume 45 at Page 289 of the Town of Shelburne Land Records;

- iv. DAVID S. CHASE's interest in a certain tract or parcel of land, with buildings thereon, located at 451 Appletree Point Road, Burlington, Vermont and consists of .81 acres of land, the legal description of which may be found in Volume 705 at Page 329 of the City of Burlington Land Records.

Being the same property conveyed to Brianne E. Chase and David S. Chase by Warranty Deed of Susan Shepherd dated November 7, 2001 and recorded on November 9, 2001 in Volume 705 at Page 329 of the City of Burlington Land Records;

(18 U.S.C. §§ 982(a)(7), 982(b)(1), 1035, and 1347; 21 U.S.C. § 853(p))

NOTICE OF SENTENCING ENHANCEMENTS

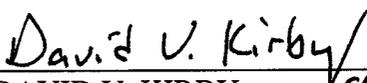
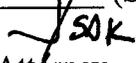
213. The allegations of paragraphs 1 through 49 are hereby realleged as if fully set forth herein.

214. As to Counts 1 through 80 of this Indictment,

- a. The offenses and relevant conduct caused a loss of more than \$1,000,000.00 (U.S.S.G. § 2B1.1(b)(1));
- b. The offenses involved more than 250 victims (U.S.S.G. § 2B1.1(b)(2));
- c. The offenses involved sophisticated means (U.S.S.G. § 2B1.1(b)(8)(C));
- d. The defendant DAVID S. CHASE knew and should have known that a large number of the victims of the offenses were vulnerable (U.S.S.G. § 3A1.1(b));
- e. The defendant DAVID S. CHASE abused a position of private trust and using special skill in a manner that significantly facilitated the commission and concealment of the offense (U.S.S.G. § 3B1.3); and
- f. The defendant DAVID S. CHASE did willfully obstruct and impede and attempt to obstruct and impede the administration of justice during the course of the investigation and the obstructive conduct related to offenses and relevant conduct (U.S.S.G. § 3C1.1).

A TRUE BILL


FOREPERSON

 (SDK)
DAVID V. KIRBY 
Acting United States Attorney

Burlington, Vermont
September 16, 2004