

UNITED STATES DISTRICT COURT
DISTRICT OF MINNESOTA

UNITED STATES OF AMERICA,

Court File No.

10sc2148 DSD (JK)

ex rel.

Amanda Jackson (RELATOR),

Plaintiffs,

**FALSE CLAIMS ACT COMPLAINT
AND DEMAND FOR A JURY TRIAL**

v.

Best Care Home Health, Inc. ("Best Care")
and Dr. Hyder M. Kahn and Nazneen H.
Khatoon, individuals,

**FILED UNDER SEAL AND IN
CAMERA PURSUANT TO 31 U.S.C. §
3730(b)(2)**

Defendants.

**DO NOT PLACE IN PRESS BOX
DO NOT ENTER ON PACER OR
CM/ECF**

Plaintiff and Relator Amanda Jackson, through her attorneys, **JOHN A. KLASSEN, P.A.**, 700 Lumber Exchange, 10 South Fifth Street, Minneapolis, Minnesota 55402, and **MULLER & MULLER, P.L.L.C.**, 3109 West 50th Street, Suite 362, Minneapolis, Minnesota 55410, states and alleges for her False Claims Act Complaint as follows:

NATURE OF CLAIM

1. Amanda Jackson ("Relator") brings this action on behalf of the United States of America against Defendants for treble damages and civil penalties arising from Defendants' false statements and false claims in violation of the False Claims Act, 31 U.S.C. §§ 3730(b)(2).

2. The violations of the False Claims Act arise out of Defendants' false claims whereby, Defendants, in connection with Medicare and Medicaid, falsely and

FILED 05/25/10
RICHARD D. SLETTEN

JUDGMENT ENTD
DEPUTY CLERK 735

fraudulently billed the Federal Government for healthcare services that were never performed or were overbilled.

3. As a consequence of these false billings, the Federal Government has paid (and continues to pay) Defendant Best Care Home Health, Inc. ("Best Care") for services even though Defendant Best Care was (and is) not legitimately entitled to receive such fees.

4. The submission of these false and fraudulent claims violates the False Claims Act, 31 U.S.C. §§ 3730(b)(2).

5. Individual Defendants at Defendant Best Care, owners Dr. Hyder Khan and Nazneen Khatoon, have knowingly, or with deliberate ignorance and reckless disregard of the truth or falsity of information, undertaken actions to implement, condone, and continue the submission of these false claims to the Federal Government.

6. As required by the False Claims Act, 31 U.S.C. § 3730(b)(2), Relator has provided to the Attorney General of the United States, and to the United States Attorney for the District of Minnesota, a statement of all material evidence and information related to the Complaint. This disclosure statement was supported by material evidence known to the Relator at the time of her filing, establishing the existence of Defendants' false claims. Because the statement included attorney-client communications and work product of the Relator's attorneys, and was submitted to the United States Attorney General and to the United States Attorney in their capacity as potential co-counsel in this litigation, the Relator understood and intended this disclosure to be confidential.

7. Pursuant to the False Claims Act, 31 U.S.C. § 3730(e)(4)(B), on or about January 4, 2010, and prior to filing this Complaint, the Relator voluntarily provided to a

Special Agent of the United States Department of Health and Human Services (“HHS”), Office of Inspector General, documentary and testimonial evidence of the bases for these claims against Defendants. This evidence known to the Relator and provided to the Federal Government on that date included work product of Relator’s attorneys, and was submitted to the HHS Office of Inspector General, the United States Attorney General and to the United States Attorney in their capacity as potential co-counsel in this litigation, and the Relator understood and intended this disclosure to be confidential.

JURISDICTION AND VENUE

8. This action arises under the False Claims Act, 31 U.S.C. §§ 3729 et seq. This Court has jurisdiction over this case pursuant to 31 U.S.C. §§ 3732(a) and 3730(b) and because at least one of the Defendants resides or transacts business in this District. This Court also has jurisdiction pursuant to 28 U.S.C. § 1345 and 28 U.S.C. § 1331.

9. Venue is proper in this District pursuant to 31 U.S.C. § 3732(a), because the acts proscribed by 31 U.S.C. §§ 3729 et seq. and complained of herein took place in this District. Venue is also proper in this District pursuant to 28 U.S.C. § 1391(b) and (c), because at all times material and relevant, at least one of the Defendants resided or transacted business in this District.

PARTIES

10. Relator Amanda Jackson is an adult female who at all times relevant was a resident and citizen of the United States. Relator is currently a resident of St. Paul, Minnesota. At all times material herein, Relator was an “employee” of Defendant Best Care. Relator brings this action based on her direct, independent, and personal knowledge and also on information and belief.

11. Relator is an original source of this information to the United States. She has direct and independent knowledge of the information on which the allegations are based and has voluntarily provided the information to the United States Government before filing this action under the False Claims Act which is based on the information.

12. Defendant Best Care is a Minnesota corporation with its principal place of Business in Hennepin County, Minnesota. Its primary business is to provide home-based medical and health care to vulnerable patients in and around Hennepin County. Defendant Best Care also operates an assisted living facility in Hennepin County. It is a licensed "home care provider" under the laws of Minnesota and a "certified provider" for purposes of participating in the Medicare and Medicaid programs. Defendant Best Care employs more than 100 individuals including registered nurses ("RN"), licensed practical nurses ("LPN"), and home health aides ("HHA"). Defendant Best Care was at all times material to this lawsuit the employer of Relator.

13. Defendant Nazneen Khatoon, an individual, was at all times relevant the Chief Administrator and principal owner of Defendant Best Care. Defendant Khatoon was in charge of all of Defendant Best Care's Medicare and Medicaid services at its Minneapolis location. She is a resident of the State of Minnesota. Defendant Khatoon has knowingly, or with deliberate ignorance and reckless disregard of the truth or falsity of information, undertaken actions to implement, condone, and continue the submission of these false claims to the Federal Government.

14. Defendant Dr. Hyder Khan, an individual, was at all times relevant Defendant Best Care's Medical Director. Defendant Khan is the husband of Defendant Khatoon, and is a co-owner of Defendant Best Care. He is a pediatrician licensed in the

State of Minnesota. He is a resident of the State of Minnesota. Defendant Khan has knowingly, or with deliberate ignorance and reckless disregard of the truth or falsity of information, undertaken actions to implement, condone, and continue the submission of these false claims to the Federal Government.

FALSE CLAIMS ACT

15. The False Claims Act provides, in pertinent part that:

- (a) Any person who (1) knowingly presents, or causes to be presented, to an officer or employee of the United States Government or a member of the Armed Forces of the United States a false or fraudulent claim for payment or approval; (2) knowingly makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved by the Government; ... or (7) knowingly makes, uses, or causes to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the Government,

is liable to the United States Government for a civil penalty of not less than \$5,500 and not more than \$11,000, plus 3 times the amount of damages which the Government sustains because of the act of that person....

- (b) For purposes of this section, the terms "knowing" and "knowingly" mean that a person, with respect to information (1) has actual knowledge of the information; (2) acts in deliberate ignorance of the truth or falsity of the information; or (3) acts in reckless disregard of the truth or falsity of the information, and no proof of specific intent to defraud is required. 31 U.S.C. § 3729.

FACTS

16. Relator became employed by Defendant Best Care as Director of Nursing in January 2002. She served in that position until she was terminated on December 31, 2009.

17. Commencing on or about January 2009 and continuing until the date of her unlawful termination, Relator witnessed and reported Defendants' systematic failures and actions that jeopardized patient safety, including without limitation the following: providing professionally incompetent patient care; rendering care in a manner that demonstrated a willful disregard for patient safety; improper handling, dispensing and tracking of narcotics; and, improper maintenance and handling of medical records.

18. During this time, Relator also witnessed and reported internally to Defendant Khatoon Defendant Best Care's systematic violations of federal law and illegal billing practices. During this time, Defendants Dr. Kahn and Khatoon actively participated in and/or sought to cover up the systematic violations of law committed by Defendant Best Care. They also actively threatened Relator's employment whenever she reported and opposed these practices.

The False Claims Practices

19. While employed at Defendant Best Care in 2009, Relator witnesses several types of fraud and false claims engaged in by Defendants. These types of fraud are described as examples herein below:

20. Between May 2009 until her last day of employment, Relator discovered an ongoing pattern and practice of illegal and fraudulent actions committed by Defendants.

21. Relator discovered that one of Defendant Best Care's employees, Amy Wazwaz, LPN, regularly and systematically failed to perform in-home visits with patients who required regular medical attention and medications. Although Wazwaz was not visiting these patients, Wazwaz submitted nursing notes (which were the instruments

through which Defendants based billings to Medicaid/Medicare) as if the visits had actually occurred and as if she performed services for which Defendant Best Care could lawfully bill Medicaid/Medicare. Defendant Best Care, with the knowledge of Defendants Dr. Kahn and Khatoon, regularly, systematically and fraudulently billed Medicaid/Medicare for the services that Wazwaz never actually performed.

22. Relator also discovered in 2009 that Wazwaz would visit patients once and during this single visit force the patients to sign a stack of nursing notes. Thereafter, Wazwaz would fill out and submit the same stack of nursing notes that she had forced the patients to sign and then submit these nursing notes as if subsequent visits had occurred when, in fact, Wazwaz had performed no further services or made any subsequent visit to these patients.

23. Defendant Best Care, with the knowledge of Defendants Dr. Kahn and Khatoon, regularly, systematically and fraudulently billed Medicaid/Medicare for the services specified on the stack of forged nursing notes submitted by Wazwaz, with full knowledge that that Wazwaz had never actually performed these services. Defendants had been informed by Relator that these nursing notes were fraudulent but Defendants submitted them to the United States for payment anyway.

24. In another instance, in August 2009, Relator discovered that Wazwaz had submitted nursing notes falsely representing that she had performed services during in-home visits with a particular vulnerable patient whose initials were "JB." During the dates for which Wazwaz submitted nursing notes for in-home visits with "JB," JB was hospitalized; thus, Wazwaz could not have, and did not, perform the services set forth in the nursing notes. Knowing that Wazwaz had not actually performed the services for JB

during this particular timeframe, Defendant Best Care, with the knowledge of Defendants Dr. Khan and Khatoon, fraudulently billed Medicaid/Medicare for these in-home services.

25. In other instances that Relator discovered, Wazwaz visited vulnerable patients' homes when the patients were not present. On these visits, Wazwaz would leave medications with the individuals who had granted her access to the vulnerable patients' home, without actually seeing the patients. Then, Wazwaz would have these individuals sign the nursing notes for the visits as if she had performed services entitling Defendant Best Care to payment from Medicaid/Medicare. Knowing that Wazwaz had not actually seen these vulnerable patients or rendered any billable services to these patients, Defendant Best Care, with the knowledge of Defendants Dr. Khan and Khatoon, fraudulently billed Medicaid/Medicare for these in-home services.

26. Between Spring 2009 and her last day of employment, Relator in good faith regularly documented and reported to Defendant Khatoon that Wazwaz was not actually performing certain in-home visits (as described above).

27. During this same time period, Relator in good faith regularly documented and reported that Defendant Best Care was fraudulently billing Medicaid/Medicare for these services that Defendant Best Care had not actually performed.

28. Also during this timeframe, Relator regularly opposed the fraudulent and illegal conduct of Defendants taken in furtherance of these fraudulent and illegal practices.

29. Between Spring 2009 and her last day of employment, whenever Relator in good faith opposed and reported to Defendant Khatoon the unlawful actions of

Defendants as set forth above, Defendant Khatoon threatened Relator with adverse employment actions, including but not limited to termination of employment.

30. Also during this same time frame, in response to Relator's good faith opposition to and reporting of these same unlawful actions, Defendant Khatoon refused to take any corrective actions as recommended by Relator. Moreover, Defendant Khatoon actively prevented Relator from performing her duties as Director of Nursing of Best Care by forbidding her from implementing measures that would prevent these fraudulent and illegal actions of Defendants. Furthermore, Defendants Dr. Kahn and Khatoon took steps to hide these fraudulent and illegal acts of Defendants.

31. Between March 2009 until her last day of employment, Relator also discovered and documented that Defendant Best Care and Wazwaz were violating standards established by state and federal law or professionally recognized clinical and ethical standards that placed the public at risk of harm, which resulted in the submission of false claims to the United States.

32. These actions of Defendants and Wazwaz included the failure to perform needed health care services to vulnerable patients, the misappropriation and mishandling of medications/narcotics resulted in fraudulent billing for services that were never performed or that were substandard and should not have been billed under Medicaid/Medicare.

33. Three examples, of many, of how the Defendants' actions adversely affected patient safety are as follows:

- a. After Wazwaz misappropriated and failed to deliver medications/narcotics to a particular vulnerable patient who had chronic pain, the patient

severely injured herself due to a fall caused by her not receiving the required medication. The United States was billed for these services and medications.

- b. After Wazwaz misappropriated and failed to deliver medications/narcotics to another particular vulnerable patient who had chronic pain, the patient ended up being hospitalized and experiencing the painful symptoms of withdrawal because he had not received the required medication. The United States was billed for these services and medications.
- c. Upon information and belief, when Dr. Khan (as Medical Director of Defendant Best Care) learned of these medication/narcotic-related incidences of misconduct that placed patient safety and the public at risk of harm, he dismissed them as non-consequential.

34. Between March 2009 and her last day of employment, Relator in good faith regularly reported to Defendant Khatoon that Defendants were violating laws and standards relating to the ethical and effective delivery of healthcare services and placing the public at risk of harm. She also reported and opposed the fact that Medicaid/Medicare should not have been billed for these services and medications which were substandard, and/or not delivered to the patients.

35. Between March 2009 and her last day of employment, whenever Relator in good faith opposed and reported to Defendant Khatoon the unlawful actions of Defendants as set forth above, Defendant Khatoon threatened Ms. Jackson with adverse employment actions, including but not limited to termination of employment. Also during this same time frame, in response to Relator's good faith opposition to and

reporting of these same unlawful actions, Defendant Khatoon refused to take any corrective actions as recommended by Relator. Moreover, Defendant Khatoon actively prevented Relator from performing her duties as Director of Nursing of Defendant Best Care by forbidding her from implementing measures that would prevent these illegal actions. Furthermore, Defendants Dr. Kahn and Khatoon took steps to hide these illegal acts of Defendants and thereby, placed the patients of Defendant Best Care and the public at risk of harm. The United States was billed for these services and medications.

**DEFENDANTS' RETALIATORY EMPLOYMENT ACTIONS—
TERMINATION/CONSTRUCTIVE DISCHARGE**

36. The adverse actions perpetrated by Defendants against Relator in response to and in retaliation for her good faith reports and opposition of the Defendants unlawful actions, created intolerable working conditions for her and were designed to force Relator into resigning her position.

37. Finally, on or about December 15, 2009, after Defendants refused to take any steps to abate or remedy their unlawful actions, and after Defendants continued to pressure Relator to act in complicity with their unlawful actions, Relator submitted her resignation effective in 30 days.

38. Relator's decision to tender her resignation was a direct and reasonable response by her to escape an intolerable workplace and thus amounts to a non-voluntary "constructive discharge" as provided for by *Navarre v. S. Washington County Schools*, 652 N.W.2d 9, 32 (Minn. 2002).

39. On December 29, 2009, prior to the effective date of her resignation, while still actively employed by Defendant Best Care as its Director of Nursing, Relator

informed Defendant Khatoon that she was reporting Defendants' and Wazwaz's unlawful actions to the authorities.

40. On December 30, 2009, Relator met with the Minneapolis Police Department and in good faith reported Wazwaz's theft of medications/narcotics, Defendants' mishandling of medications/narcotics, and Wazwaz's and Defendants' fraudulent billing practices.

41. On December 30, 2009, after Relator disclosed to Defendant Khatoon that she had met with the Minneapolis Police Department to report the unlawful actions of Wazwaz and Defendants, Defendant Khatoon terminated Relator's employment by stating, "You are done. Come with me and pack up your things." Then, Defendant Khatoon ordered Relator to remove her belongings and had her escorted from Defendant Best Care's facilities with instructions to never return.

42. Relator's termination was in retaliation for her opposing and reporting the false claims and fraudulent practices of Defendants.

43. As a direct and proximate result of Defendants' false claims to Medicaid/Medicare and other actions taken in violation of the False Claims Act, the United States Government has been damaged.

COUNT ONE
FALSE CLAIMS ACT VIOLATIONS
31 U.S.C. § 3729(a)(1) and (a)(2)

44. Relator re-alleges the foregoing paragraphs as though fully set forth herein.

45. Defendants, by and through their officers, agents, supervisors, owners, shareholders and employees, knowingly presented or caused to be presented to the United

States Government false claims for payment of services and medications under Medicaid/Medicare, in violation of 31 U.S.C. § 3729(a)(1).

46. Defendants, by and through their officers, agents, supervisors, owners, shareholders and employees, knowingly made, used, or caused to be made or used, false records or statements to get false claims paid or approved by the United States Government, for payment of services and medications under Medicaid/Medicare, in violation of 31 U.S.C. § 3729(a)(2).

47. Defendants, by and through their officers, agents, supervisors, owners, shareholders and employees, authorized the various officers, agents, supervisors, and employees of Defendants to take the unlawful actions set forth above and below.

48. Defendants knowingly hid and otherwise failed to disclose to the United States, the HHS, and other Federal agencies that Defendants have been submitting false claims for payment of services and medications under Medicaid/Medicare.

49. Defendants falsely represented to the United States Government that the invoices Defendant Best Care submitted for payment of services and medications under Medicaid/Medicare were proper and valid. This resulted in the submission of false claims for payment to the United States Government.

50. These actions by Defendants resulted in the submission of false claims for payment to the United States Government.

51. Defendants' course of conduct violated the False Claims Act, 31 U.S.C. §§ 3729 et seq.

52. The United States has been damaged as a result of Defendants' violations of the False Claims Act to the extent that the United States, unaware of the falsity of the

claims and/or statements of Defendants, and in reliance on the accuracy thereof, made payments for which Defendant Best Care was not entitled.

COUNT TWO
FALSE CLAIMS ACT RETALIATION
31 U.S.C. § 3730(h)

53. Relator re-alleges the foregoing paragraphs as though fully set forth herein.

54. Throughout Relator's employment at Defendant Best Care, she complained to Defendant Best Care's management about false and fraudulent billings related to Medicaid/Medicare.

55. During her employment at Defendant Best Care, Relator refused to participate in the false and fraudulent billings related to services and medications under Medicaid/Medicare and took active steps to stop and cease and correct these unlawful practices.

56. Relator's actions of internally reporting Defendant Best Care's false and fraudulent claims against the United States were protected activities within the meaning of 31 U.S.C. § 3730(h).

57. Defendant Best Care was aware of Relator's complaints about its false and fraudulent claims to the United States.

58. Relator's complaints about Defendant Best Care's practice of submitting false and fraudulent claims to the United States put Defendant Best Care on notice that Relator's complaints could lead to a *qui tam* action.

59. Defendant Best Care discharged Relator in retaliation for her investigation into and complaints of Defendant Best Care's False Claims Act violations.

60. Defendant Best Care terminated Relator in an effort to threaten, harass, and discriminate against her, in violation of 31 U.S.C. § 3730(h), in order to intimidate her and prevent her from further investigating and reporting Defendant Best Care's False Claims Act violations.

61. Defendant Best Care's actions damaged Relator in violation of 31 U.S.C. § 3730(h) in an amount in excess of \$75,000, an amount to be determined at trial.

62. Pursuant to 31 U.S.C. § 3730(h), Relator is entitled to litigation costs and reasonable attorneys' fees incurred in the vindication of her reputation and in the pursuit of this retaliation claim.

PRAYER FOR RELIEF

WHEREFORE, Relator, on behalf of herself and the United States Government, respectfully prays:

A. That this Court enter judgment against the above-named Defendants in an amount equal to three times the amount of damages the United States Government has sustained because of Defendants' actions;

B. That this Court impose on Defendants a civil penalty of \$5,500 to \$11,000 for each action in violation of 31 U.S.C. §§ 3729 et seq.;

C. That this Court order Defendants to pay the costs of this litigation, with interest, incurred by both the Relator and the United States Government;

D. That the Relator be awarded all costs incurred, including reasonable attorneys' fees;

E. That, in the event the United States Government continues to proceed with this action, the Relator be awarded an amount for bringing this action of at least 15% but not more than 25% of the proceeds of the action or settlement of the claim;

F. That, in the event the United States Government does not proceed with this action, the Relator be awarded an amount that the Court decides is reasonable for collecting the civil penalty and damages, which shall be not less than 25% nor more than 30% of the proceeds of the action or settlement of the claim;

G. That the United States Government and the Relator be awarded prejudgment interest; and

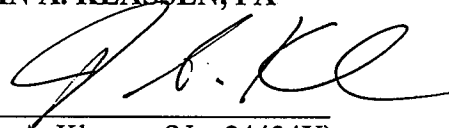
H. That the United States Government and the Relator receive all relief, both in law and in equity, to which they may reasonably appear entitled.

JURY DEMAND

Relator, on behalf of herself and the United States Government, hereby demands a trial by jury of all issues triable of right by a jury.

Date: May 24, 2010

JOHN A. KLASSEN, PA



John A. Klassen (No. 24434X)
700 Lumber Exchange Building
10 South Fifth Street
Minneapolis, MN 55402
(612) 204-4533

MULLER & MULLER, PLLC

/s/ Andrew P. Muller

Andrew P. Muller (No. 32467X)
3109 West 50th Street, No. 362
Minneapolis, MN 55410-2102
(612) 604-5341

**ATTORNEYS FOR PLAINTIFF AND
RELATOR AMANDA JACKSON**

JS 44 (Rev. 3/99)

CIVIL COVER SHEET

The JS-44 civil cover sheet and information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

1. (a) PLAINTIFFS

USA ex rel. Amanda Jackson

DEFENDANTS

Best Care Home Health, Inc.

(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF
(EXCEPT IN U.S. PLAINTIFF CASES)

COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

(c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)

John A. Klagsch, P.A. 10 South 5th St.
Andrew P. Muller, Suite 700, Naples 34102
(612) 204-4533

ATTORNEYS (IF KNOWN)

II. BASIS OF JURISDICTION

(PLACE AN "X" IN ONE BOX ONLY)

- ☒ 1 U.S. Government Plaintiff
☐ 2 U.S. Government Defendant
☐ 3 Federal Question (U.S. Government Not a Party)
☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES

(PLACE AN "X" IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT)

(For Diversity Cases Only)

- | | | | | | |
|---|----------------------------|----------------------------|---|----------------------------|----------------------------|
| | PTF | DEF | | PTF | DEF |
| Citizen of This State | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

IV. NATURE OF SUIT (PLACE AN "X" IN ONE BOX ONLY)

CONTRACT	TORTS		FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault Libel & Slander <input type="checkbox"/> 330 Federal Employers Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury	PERSONAL INJURY <input type="checkbox"/> 362 Personal Injury - Med. Malpractice <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth In Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 810 Agriculture <input type="checkbox"/> 820 Other Food & Drug <input type="checkbox"/> 825 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 830 Liquor Laws <input type="checkbox"/> 840 R.R. & Truck <input type="checkbox"/> 850 Airline Regs. <input type="checkbox"/> 860 Occupational Safety/Health <input type="checkbox"/> 890 Other	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 840 Trademark	<input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commercial/ICC Rates/etc. <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 810 Selective Service <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 875 Customer Challenge 12 USC 3410 <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 892 Economic Stabilization Act <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 894 Energy Allocation Act <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice <input checked="" type="checkbox"/> 950 Constitutionality of State Statutes <input checked="" type="checkbox"/> 890 Other Statutory Actions
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All other Real Property	CIVIL RIGHTS <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing Accommodations <input type="checkbox"/> 444 Welfare <input type="checkbox"/> 440 Other Civil Rights	PRISONER PETITIONS <input type="checkbox"/> 510 Motions to Vacate Sentence HABEAS CORPUS: <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition	<input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Mgmt Relations <input type="checkbox"/> 730 Labor/Mgmt Reporting & Disclosure Act <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Empl Ret Inc. Security Act	SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSD Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS - Third Party 26 USC 7609	

V. ORIGIN

(PLACE AN "X" IN ONE BOX ONLY)

- ☒ 1 Original Proceeding
☐ 2 Removed from State Court
☐ 3 Remanded from Appellate Court
☐ 4 Reinstated or Reopened
☐ 5 Transferred from another district (specify)
☐ 6 Multidistrict Litigation
☐ 7 Appeal to District Judge from Magistrate Judgment

VI. CAUSE OF ACTION

(CITE THE U. S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE BRIEF STATEMENT OF CAUSE. DO NOT CITE JURISDICTIONAL STATUTES UNLESS DIVERSITY.)

False Claims Act

31 U.S.C. § 3730 (6) (2)

VII. REQUESTED IN COMPLAINT:

CHECK IF THIS IS A CLASS ACTION
☐ UNDER F.R.C.P 23

DEMAND \$

75,000 +

CHECK YES only if demanded in Complaint

JURY DEMAND: ☒ YES ☐ NO

VIII. RELATED CASE(S) (See instructions): IF ANY

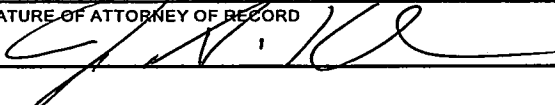
JUDGE

DOCKET NUMBER

DATE

5/25/10

SIGNATURE OF ATTORNEY OF RECORD



FOR OFFICE USE ONLY

RECEIPT # _____ AMOUNT _____ APPLYING IFP _____ JUDGE _____ MAG. JUDGE _____

5198

JOHN A. KLASSEN, P.A.
ATTORNEY AT LAW
700 LUMBER EXCHANGE
10 SOUTH FIFTH STREET
MINNEAPOLIS, MINNESOTA 55402
TELEPHONE (612) 204-4533
FACSIMILE (612) 204-4534
EMAIL JAKLaw@aol.com

RECEIVED

MAY 25 2010

CLERK
U.S. DISTRICT COURT
MINNEAPOLIS, MINNESOTA

May 25, 2010

Clerk Of Court
United States District Court
300 South Fourth Street
Minneapolis, MN 55415

**RE: United States ex rel. Amanda Jackson v. Best Care Home Health, Inc., et al.
False Claims Act Complaint - Case Filed Under Seal and *In Camera***

CASE TO BE FILED UNDER SEAL AND *IN CAMERA*

Dear Madam/Sir:

Enclosed for filing are the following documents:

1. Civil Cover Sheet;
2. An original copy of the Plaintiff/Relator's Civil False Claims Act Complaint and Demand for a jury trial;
3. Request to Withhold Issue of Summons; and
4. Civil Filing Fee in the amount of \$350.00.

Pursuant to 31 U.S.C. § 3730(b)(2), these papers are filed *in camera* and under seal. Accordingly, please withhold issuance of a summons, and assure that no copies are placed in the press box and that the action is not noted on PACER, CM/ECF, or otherwise on the public docket.

Please telephone me if you have any questions.

Very truly yours,

JOHN A. KLASSEN, P.A.

A handwritten signature in black ink, appearing to read 'J.A. Klassen', written over the printed name.

John A. Klassen

Enc.

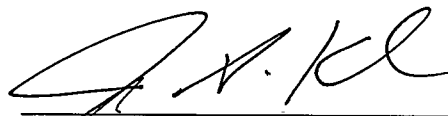
cc: Andrew P. Muller, Esq.
Amanda Jackson

RE: United States ex rel. Amanda Jackson v. Best Care Home Health, Inc., et al.
False Claims Act Complaint - Case Filed Under Seal and *In Camera*

PROOF OF SERVICE

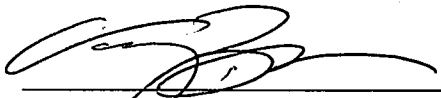
The undersigned certifies that the foregoing instrument was served upon all parties to the above cause to each of the attorneys of record herein at their respective addresses disclosed in the pleadings on the 25th day of May, 2010.

☒ US Mail ☐ Fax ☐ Express Mail ☒ Messenger


John A. Klassen

Subscribed and sworn to before me

this 25th day of May, 2010.


Notary Public

