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OFFICE OF THE
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Florida Attorney General's Office News Release

Florida Nurse Arrested for Exploiting a Senior



TALLAHASSEE, Fla.—Attorney General Ashley Moody's Medicaid Fraud Control Unit and the Alachua County Sheriff's Office arrested a Licensed Practical Nurse for exploitation of an elderly person. According to an investigation by Attorney General Moody's MFCU, Amy Latasha Curtis took advantage of an elderly person who resided as a patient in the Gainesville nursing home where Curtis worked as an LPN—stealing nearly \$2,000 from the senior victim.

Attorney General Ashley Moody said, "Many seniors rely on Licensed Practical Nurses to take care of their physical needs and act in their best interests. So, it seems even more egregious when a health care worker uses this position of trust to harm instead of healing their patient. I'm glad my Medicaid fraud investigators were able to track down and end the exploitation at the center of this case, before more harm was done."

According to the investigation, Curtis often took the victim's debit card to purchase breakfast for the patient. Eventually, she used ill-obtained financial information from the victim to open a joint-checking account funded solely by deposits from the victim's primary account. Through a series of illegal transactions, Curtis used the joint account to make personal purchases—including beauty products and a trip to Miami.

MFCU investigators received information regarding the alleged exploitation from the Florida Department of Children and Families' Adult Protective Services Program and then launched an inquiry into the alleged illegal activity.

As a result of the investigation, Curtis faces one count of exploitation of an elderly person, less than \$10,000, a third-degree felony. The charge is punishable by up to five years in prison. The Attorney General's MFCU will prosecute the case through an agreement with the State Attorney's Office in the Eighth Judicial Circuit.

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

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