

**Congress of the United States**  
**House of Representatives**

COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM

2157 RAYBURN HOUSE OFFICE BUILDING

WASHINGTON, DC 20515–6143

MAJORITY (202) 225–6074  
MINORITY (202) 225–6051  
<https://oversight.house.gov>

May 12, 2026

The Honorable Scott Partika  
Director  
Department of Medicaid  
State of Ohio  
50 West Town Street, Suite 400  
Columbus, Ohio 43215

Dear Director Partika:

The Committee on Oversight and Government Reform is continuing its investigation into widespread waste, fraud, and abuse in federally funded healthcare programs. Specifically, the Committee is investigating waste, fraud and abuse in Medicaid personal care services authorized by Home and Community-Based Services (HCBS) waivers.<sup>1</sup> Recent reporting indicates that there is significant fraud in Ohio’s HCBS waiver program, including providers improperly billing Medicaid or billing for services that were clearly never provided with little consequence. The Committee is requesting documents and communications showing Ohio’s oversight and internal controls for its federally funded Medicaid HCBS waiver programs.

Medicaid traditionally covers essential healthcare services for low-income Americans, but almost all states, including Ohio, have been granted HCBS waivers to expand coverage into personal care services, such as cooking, cleaning, or other regular household tasks.<sup>2</sup> In 2025, more than 5 million Medicaid recipients across the country received services under HCBS waiver programs, including personal care services.<sup>3</sup> Recent reporting, relying on Medicaid provider spending released by the U.S. Department of Government Efficiency (DOGE) in February 2026,<sup>4</sup> has revealed alarming evidence of HCBS providers in Ohio improperly billing Medicaid or billing for services that were never provided.<sup>5</sup> Taxpayers paid more than \$2.5 billion

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<sup>1</sup> *Home & Community Based Services Authorities, 1915(c)*, U.S. DEP’T OF HEALTH & HUM. SERVICES, CENTERS FOR MEDICARE & MEDICAID SERVICES (last visited May 7, 2026).

<sup>2</sup> *Id.*

<sup>3</sup> Maiss Mohamed, *et al.*, *Medicaid Home Care (HCBS) in 2025*, KAISER FAM. FOUND. (Jan. 5, 2026), available at <https://www.kff.org/medicaid/medicaid-home-care-hcbs-in-2025/>.

<sup>4</sup> *Medicaid Provider Spending by HCPCS*, U.S. DEP’T OF HEALTH & HUM. SERVICES (updated Feb. 9, 2026), available at <https://opendata.hhs.gov/datasets/medicaid-provider-spending/>.

<sup>5</sup> Luke Rosiak, *The Medicaid Money Trail Leads Somewhere You Won’t Like — And The Daily Wire Has Receipts*, THE DAILY WIRE (May 4, 2026).

for these personal care services administered between 2018 and 2024.<sup>6</sup> Reports estimate that fraud in Ohio's HCBS waiver program is potentially over \$1.2 billion.<sup>7</sup>

Bad actors are apparently taking advantage of lenient provider enrollment and verification requirements to enroll as HCBS providers and defraud Medicaid. The current Medicaid system either does not have sufficient internal controls to prevent and detect fraud or is not conducting proper oversight of these HCBS providers. As a result, Americans across the country are paying for this fraud while vulnerable patients are being exploited.

Reporting has also revealed HCBS providers in Ohio billing Medicaid for personal care services when the providers are relatives of the Medicaid recipient.<sup>8</sup> A billboard in Columbus, Ohio even advertises how people can “[g]et paid” for “[c]aring for a loved one at home.”<sup>9</sup> These reports raise valid concerns that HCBS providers are not billing Medicaid for legitimate services, but are billing the federal government to “hang out with their own families.”<sup>10</sup> Because these personal care services are administered within the Medicaid recipient's home, there is no mechanism currently in place to determine what services these providers are actually giving Medicaid recipients.<sup>11</sup>

Further reporting has revealed seemingly abandoned office buildings in Columbus, Ohio, ostensibly filled with tenants who are registered Medicaid HCBS providers.<sup>12</sup> These buildings where HCBS providers claim to maintain office space show no signs of activity, including weeks-old mail piled up, beeping smoke detectors, and stray cats in the parking lot.<sup>13</sup> One office building alone holds 288 HCBS providers that collectively billed more than \$250 million to Medicaid between 2018 and 2024.<sup>14</sup> An investigative reporter was even confronted by a building occupant for investigating these HCBS providers and was threatened with accusations of racism,<sup>15</sup> similar to accusations whistleblowers experienced when they reported fraud occurring in social welfare programs administered by Minnesota and California.<sup>16</sup> The reporting also

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<sup>6</sup> Luke Rosiak, *Meet The Convicted Fraudster Running A Million Dollar Medicaid Business*, THE DAILY WIRE (May 7, 2026).

<sup>7</sup> *Investigation uncovers alleged massive Ohio Medicaid fraud, governor denies claims*, FOX NEWS (May 6, 2026).

<sup>8</sup> Luke Rosiak, *The Medicaid Money Trail Leads Somewhere You Won't Like — And The Daily Wire Has Receipts*, THE DAILY WIRE (May 4, 2026).

<sup>9</sup> *Id.*

<sup>10</sup> *Id.*

<sup>11</sup> *Id.*

<sup>12</sup> Luke Rosiak, *Inside Ohio's Home Health Empire: 7 Buildings, 288 Medicaid Companies, \$250 Million*, THE DAILY WIRE (May 5, 2026).

<sup>13</sup> *Id.*

<sup>14</sup> *Id.*

<sup>15</sup> *Id.*

<sup>16</sup> See H. COMM. ON OVERSIGHT & GOV'T REFORM, THE COST OF DOING NOTHING: HOW GOVERNOR TIM WALZ AND KEITH ELLISON FUELED MINNESOTA'S FRAUD EXPLOSION (Mar. 4, 2026); see Letter from James Comer, Chairman, H. Comm. on Oversight & Gov't Reform, to Gavin Newsom, Governor, State of California (Mar. 23, 2026).

revealed that Ohio allowed HCBS providers with prior criminal records, including fraud-related offenses, to bill Medicaid for personal care services in their state.<sup>17</sup>

Personal care services provided through HCBS waivers are especially vulnerable to fraud. A March 2025 U.S. Department of Health and Human Services Office of Inspector General (HHS OIG) report found that in FY 2024, 298 of the 1,158 convictions (approximately 36 percent) reported by state Medicaid Fraud Control Units (MCFU) across the country are attributed to personal care services, which is far more than any other program type.<sup>18</sup> According to industry experts, “these [HCBS] services are difficult to track since they are largely provided in the home of Medicaid recipients and the government cannot properly track to ensure tax dollars are being spent properly for services actually rendered.”<sup>19</sup>

Waste, fraud, and abuse in Medicaid HCBS waiver programs are not unique to Ohio. The Committee has seen similar patterns of waste, fraud, and abuse in HCBS waiver programs in the Committee’s investigation into Minnesota and California.<sup>20</sup> For example, Minnesota expanded their high-risk Early Intensive Developmental and Behavioral Intervention (EIDBI) autism treatment program to allow unlicensed providers to treat recipients in their native language and administer services completely within the recipient’s home.<sup>21</sup> California has adopted similar programs allowing federally-funded hospice services in the recipient’s home.<sup>22</sup>

To assist the Committee’s oversight of this matter, we request documents and communications covering the time period January 1, 2019, to the present unless otherwise indicated, as soon as possible but no later than May 26, 2026:

1. All documents and communications among or between the Ohio Department of Medicaid, including the Bureau of Program Integrity, and other relevant state agencies covering Ohio’s Medicaid HCBS waiver programs related to provider enrollment and verification, provider licensure and certification, complaints against licensed providers, investigations, reimbursement requests, audit documentation, audit reports, payment reviews, and regulations that establish the process for verifying the identity and qualifications of HCBS providers;

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<sup>17</sup> Luke Rosiak, *Meet The Convicted Fraudster Running A Million Dollar Medicaid Business*, THE DAILY WIRE (May 7, 2026).

<sup>18</sup> U.S. DEP’T OF HEALTH & HUM. SERVICES, OFF. OF INSPECTOR GEN., OFF. OF EVALUATION & INSPECTIONS, OEI-09-25-00090, MEDICAID FRAUD CONTROL UNITS ANNUAL REPORT: FISCAL YEAR 2024, at 2 (Mar. 2025), *available at* <https://oig.hhs.gov/documents/evaluation/10227/OEI-09-25-00090.pdf>.

<sup>19</sup> Brian Blase, *War on Fraud Comes to New York, Addressing Medicare’s Skin Substitute Abuse, Important FDA Reform, and More*, PARAGON HEALTH INST. (Mar. 11, 2026), *available at* <https://paragoninstitute.org/newsletter/war-on-fraud-comes-to-new-york-addressing-medicare-s-skin-substitute-abuse-important-fda-reform-and-more/?nab=1>.

<sup>20</sup> See H. COMM. ON OVERSIGHT & GOV’T REFORM, THE COST OF DOING NOTHING: HOW GOVERNOR TIM WALZ AND KEITH ELLISON FUELED MINNESOTA’S FRAUD EXPLOSION (Mar. 4, 2026); *see* Letter from James Comer, Chairman, H. Comm. on Oversight & Gov’t Reform, to Gavin Newsom, Governor, State of California (Mar. 23, 2026).

<sup>21</sup> Minnesota Statutes 2025, Section 256B.0949

<sup>22</sup> Cal. Code Regs. Tit. 22, § 51349 - Hospice Care.

2. All documentations and communications among or between the Ohio Department of Medicaid, including the Bureau of Program Integrity, and the following Medicaid HCBS providers related to provider enrollment and verification, provider licensure and certification, complaints against licensed providers, investigations, reimbursement requests, audit documentation, audit reports, payment reviews, and regulations that establish the process for verifying the identity and qualifications of HCBS providers:
  - a. True Home Healthcare LLC
  - b. Capital Home Health
  - c. Continental Home Health
  - d. Dynamic Home Healthcare
  - e. Ohio Senior Home Healthcare
  - f. Home Health LLC
  - g. National Home Health Care Services LLC
  - h. Guidance Home Health Care LLC
  - i. GC Home Healthcare LLC
  - j. JLL Home Healthcare LLC
  - k. 1st Choice Home Health Care LLC
  - l. ZNC Health Care
  - m. Moonlight Home Health Care
  - n. Comprehensive Behavioral Health Associates
  - o. Lifeline Home Support
  - p. Continental Home Health Care, Inc.
  - q. Dynamic Home Health Care
  - r. Buckeye Health Agency
  - s. Omega Home Health Care Services
  - t. One Community Mental Health LLC
  - u. Nahsek Interpreting Services LLC
  - v. Royals Cleaning Services LLC
  - w. One Community Mental Health LLC
  - x. Little Stars of America Learning Center LLC
  - y. 1st Access Community Resources
  - z. One Community Developmental Support Services LLC
  - aa. Merciful Healthcare Services
  - bb. Atlas Home Health
  - cc. Horizon Healthcare Services
  - dd. North Star Home Healthcare LLC
  - ee. Ultra Logistics LLC
  - ff. F & R Healthcare Services LLC
  - gg. B & F Healthcare Services LLC
  - hh. New Life Home Care LLC;
  
3. All documents and communications among or between the Ohio Department of Medicaid, including the Bureau of Program Integrity, and the Ohio Attorney General's Office MCFU covering Ohio's HCBS waiver programs including but not limited to the

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HCBS provider entities listed in request 2a-hh, the number of complaints received about HCBS providers, the number of investigations opened into HCBS providers for fraud, reports about those investigations, the number of prosecutions against HCBS providers, and audits showing improper billing or fraud.

The Committee on Oversight and Government Reform is the principal oversight committee of the U.S. House of Representatives and has broad authority to investigate “any matter” at “any time” under House Rule X.<sup>23</sup> To arrange for delivery of documents or to ask any related follow up questions, please contact the Committee on Oversight and Government Reform Majority staff at (202) 225-5074. Thank you for your attention to this important matter.

Sincerely,



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James Comer  
Chairman  
Committee on Oversight and Government Reform



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Brandon Gill  
Chairman  
Task Force on Defending  
Constitutional Rights and  
Exposing Institutional Abuses

cc: The Honorable Robert Garcia, Ranking Member  
Committee on Oversight and Government Reform

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<sup>23</sup> Rule X, cl. 4(c)(2), Rules of the U.S. House of Representatives, 119th Cong. (Jan. 16, 2025).