

## **Luke Rosiak, Investigative Reporter, The Daily Wire**

Thank you Chairman Gill, Ranking Member Simon, task force members. It's an honor to join you to discuss The Daily Wire's investigation into Medicaid home health waiver programs.

What if I told you that the federal government built a program so easy to game that foreign criminals are openly advertising how to exploit it and that it's already cost taxpayers hundreds of billions of dollars? That a convicted fraudster can get approved to send unsupervised and untrained workers into elderly Americans' homes? That a refugee's family can collect \$90,000 a year simply by having one member claim to be the other's caregiver with no verification and no oversight?

That's Medicaid's "personal services" home health waiver program, and my investigation found foreigner millionaire tax cheats ripping off taxpayers at a scale that threatens to bankrupt America.

We all have families, and all of us have parents that will get old. In some states, Medicaid will pay you simply for being a normal person—as a "home health aide" whose job is to provide cooking, cleaning, or just "companionship & conversation" to your own family member.

This was sold as something that would save money, because it would only be used as an alternative to nursing homes. Yet when your family member can get paid for you being sick, far more people, who never would have actually moved into a nursing home, suddenly claim to be sick.

This has become so common that you can see it in aggregate employment statistics. California reported gaining jobs, but it actually lost jobs, unless you count home health aides.

The federal government has agreed to give "waivers" to certain states letting them run these programs, even though 70% of the cost is paid by the feds.

In February the Department of Health and Human Services [released data](#) listing corporations that are paid by Medicaid. By far the largest billing code is "personal services," at \$140 billion over the last several years. That's the code Medicaid uses to indicate that the person is not providing medical services at all, but rather tasks like "light housekeeping."

I did some data analysis to identify suspicious patterns. The data immediately pointed me to northeast Columbus, Ohio. You can drive down the street and almost every business you pass is a home health firm. One building has 94 companies that billed Medicaid more than \$66 million. I began looking them up in public records.

An extremely large portion of business owners were running multi-million dollar businesses as a side hustle, while they were working in other industries. They were often not paying their own taxes.

It's not hard to find ones run by criminals. True Home Healthcare is run by a man with three fraud convictions and his wife, who has three theft convictions. When I asked him basic questions about his business, he threatened my family. The government decided it was a good idea to pay these people to run a business centered around going into the homes of vulnerable little old ladies unaccompanied, and to take their word for it that they actually went.

Other times it seems obvious that the business is in the name of a straw owner. One company was in the name of the teenage son of a convicted money launderer. Omega Home Health was incorporated by the wife of a felon who had been convicted of billing the government for nonexistent elder services. Medicaid approved the wife's new company and paid it \$6 million. The husband still never paid his court-ordered restitution.

Only after database queries highlighted extreme anomalies in Columbus, Ohio did I learn that it has another similarity to Minnesota: Columbus contains the second-largest concentration of Somalis in the U.S., as well as the largest concentration of Bhutanese outside of Bhutan. I visited hundreds of home health companies and only saw two people who didn't have an accent.

Whistleblowers in the area tell me companies knock on doors in ethnic neighborhoods where most people are on Medicaid and live in multi-generational households. They tell the older family member to go to particular doctors and claim particular symptoms. Then they put the younger family member on their payroll, with the parent as their only patient.

This triggers payments of up to \$90,000 a year, which the company splits with the younger relative, and the younger relative splits with the older relative.

81% of Bhutanese are on welfare, a fact some of the remainder use to become obscenely rich. A 29-year old named Roshan Adhikari works at his dad's home health company. His social media documents a life fit for a rapper or movie star, boasting about his yacht and wearing Prada while drinking champagne on a private jet.

His dad's home health company received \$17 million from Medicaid, even though he has tax liens against him. His 25-year old brother has his own home health company that billed \$10 million.

In Ohio alone, people with the Bhutanese surname of Adkihari have been paid more than \$350 million by Medicaid home health. That's about an eighth of the GDP of Bhutan—just from one Bhutanese last name, in one state.

A program set up to provide personal aides is instead being used as foreign aid. The companies' owners have foundations that send the money abroad, which also gives them a tax break. Virtually all the big Bhutanese advocacy groups are tied to Medicaid home health. One

foundation tied to a home health company is funding a public school system in Nepal, which neighbors Bhutan.

It's government money, but any private nurse practitioner can sign the papers to authorize this. You can get home healthcare for psychiatric problems without ever even seeing a psychiatrist to try to solve the problem. You can doctor shop until you find one with low standards. Or of course you have a doctor who's taking kickbacks.

The rewards for abusing this system are unfathomable, and the mechanisms to stop abuse seemingly deliberately nonexistent. One lady in Massachusetts stole \$100 million by charging for nonexistent home health care.

Companies are committing fraud by paying kickbacks for no-show jobs, the patients are committing fraud by lying to get benefits they aren't entitled to.

But we're just beginning to look into the root of the monster—the network of doctors rubber stamping the fraud. That's another criminal enterprise that Congress could uncover and put an end to.

Fraud prosecutions are certainly part of the response that's needed here. But from my investigation both looking at the data and on the ground, most of the money being spent on this program is likely fraud, so policy changes are needed, too.

## Bio:

Luke Rosiak is an investigative reporter for The Daily Wire who has covered waste in the federal government for nearly 20 years. He is a database expert who uses computer programming to analyze government records. He is the winner of the 2025 Dao Prize for Best Reporting on Government Waste and the 2022 Media Research Center Bulldog Award for Outstanding Investigative Journalism. He lives on a hobby goat farm in Virginia.

His stories on Medicaid home health include:

- [Part 1: How The Feds Pay Immigrants Billions To Hang Out With Their Families](#)
- [Part 2: Inside Ohio's Home Health Empire: 7 Buildings, 288 Medicaid Companies, \\$250 Million](#)
- [Part 3: Meet The Convicted Fraudster Running A Million Dollar Medicaid Business](#)
- [Part 4: He Was Convicted For Defrauding The Government. Now Medicaid Pays His Wife Millions.](#)