State of Minnesota | District Court
County of Hennepin | 4th Judicial District

Prosecutor File No. 33.JT65.0227
Court File No.

State of Minnesota,
Plaintiff,
vs.
CHALA BEKAMA ALEMO DOB: 12/27/1984
1953 Laurel Avenue
St. Paul, MN 55104
Defendant.

COMPLAINT
Summons

The Complainant submits this complaint to the Court and states that there is probable cause to believe Defendant committed the following offense(s):

COUNT I

Charge: Attempted Theft by False Representation (Public Funds)
Minnesota Statute: 609.52.2(a)(3)(iii), with reference to: 609.52.3(3)(d)(iv), 609.17.1
Maximum Sentence: Imprisonment of no more than 2.5 years, or payment of a fine of no more than $5,000, or both.
Offense Level: Felony

Offense Date (on or about): 04/08/2026 to 05/05/2026

Control #(ICR#): 20260025

Charge Description: On or about warrant dates April 8, 2026 through May 5, 2026, in Hennepin County, State of Minnesota, Defendant CHALA BEKAMA ALEMO (DOB 12/27/1984) intentionally committed an act that was a substantial step toward, and more than mere preparation, to intentionally deceive a third person with a false representation which was known to be false, made with intent to defraud, and which does defraud the person to whom it was made, and obtained for himself, or another, property consisting of public funds belonging to the state or to any political subdivision or agency thereof, through the preparation or filing of a claim for reimbursement, a rate application, or a cost report used to establish a rate or claim for payment for medical care provided to a recipient of medical assistance under chapter 256B, which intentionally and falsely states the costs of actual services provided by a vendor of medical care, to wit: Defendant submitted false claims for reimbursement which were intended to be relied upon by the Minnesota Department of Human Services and UCare to give up possession of public funds.

COUNT II

Charge: Theft by False Representation (over $5,000)
Minnesota Statute: 609.52.2(a)(3)(iii), with reference to: 609.52.3(2)
Maximum Sentence: Imprisonment of no more than 10 years, or payment of a fine of no more than $20,000, or both.
Offense Level: Felony

Offense Date (on or about): 07/09/2025 to 12/05/2025

Control #(ICR#): 20260025

Charge Description: On or about warrant dates of July 9, 2025 through December 5, 2025, in Hennepin County, State of Minnesota, Defendant CHALA BEKAMA ALEMO (DOB 12/27/1984) intentionally deceived a third person with a false representation, which is known to be false, made with the intent to defraud, and which does defraud the person to whom it is made, and obtained for himself or another more than $5,000 of property of another, through the preparation or filing of a claim for reimbursement, a rate application, or a cost report used to establish a rate or claim for payment for medical care provided to a recipient of medical assistance under chapter 256B, which intentionally and falsely stated the costs of or actual services provided by a vendor of medical care, to wit: Defendant submitted false timesheets/progress notes to his employer, who then submitted the claims Department of Human Services and UCare, who, in reliance on those claims, gave up possession of $28,955.10 in Medicaid funds, $14,381 of which Defendant received in wages.

COUNT III

Charge: Attempted Theft by False Representation (over $5,000)
Minnesota Statute: 609.52.2(a)(3)(iii), with reference to: 609.52.3(2), 609.17.1
Maximum Sentence: Imprisonment of not more than 5 years, or payment of a fine of no more than $10,000, or both.
Offense Level: Felony

Offense Date (on or about): 07/09/2025 to 12/05/2025

Control #(ICR#): 20260025

Charge Description: On or about warrant dates July 9, 2025 through December 5, 2025, in Hennepin County, State of Minnesota, Defendant CHALA BEKAMA ALEMO (DOB 12/27/1984) intentionally committed an act that was a substantial step toward, and more than mere preparation, to intentionally deceive a third person with a false representation which was known to be false, made with intent to defraud, and which does defraud the person to whom it was made, and obtained for himself, or another, property consisting of public funds belonging to the state or to any political subdivision or agency thereof, through the preparation or filing of a claim for reimbursement, a rate application, or a cost report used to establish a rate or claim for payment for medical care provided to a recipient of medical assistance under chapter 256B, which intentionally and falsely stated the costs of or actual services provided by a vendor of medical care, and the value of the property obtained was over $5,000, to wit: Defendant submitted false claims for reimbursement which were intended to be relied upon by the Minnesota Department of Human Services and UCare to give up possession of $7,203.60.

COUNT IV

Charge: Theft by False Representation (over $1,000)
Minnesota Statute: 609.52.2(a)(3)(iii), with reference to: 609.52.3(3)(a)
Maximum Sentence: Imprisonment of no more than 5 years, or payment of a fine of no more than $10,000, or both.
Offense Level: Felony

Offense Date (on or about): 11/20/2024 to 03/12/2025

Control #(ICR#): 20260025

Charge Description: On or about warrant dates of November 20, 2024 through March 12, 2025 in Hennepin County, State of Minnesota, Defendant CHALA BEKAMA ALEMO (DOB 12/27/1984) intentionally deceived a third person with a false representation, which is known to be false, made with the intent to defraud, and which does defraud the person to whom it is made, and obtained for himself or another more than $1,000 of property of another, through the preparation or filing of a claim for reimbursement, a rate application, or a cost report used to establish a rate or claim for payment for medical care provided to a recipient of medical assistance under chapter 256B, which intentionally and falsely stated the costs of or actual services provided by a vendor of medical care, to wit: Defendant submitted false timesheets/progress notes to his employer, who then submitted the claims to UCare, who, in reliance on those claims, gave up possession of $4,169.40 in Medicaid funds, $3,287.00 of which Defendant received in wages.

STATEMENT OF PROBABLE CAUSE

Your affiant, Sarah Levine, is a Lead Investigator with the Medicaid Fraud Control Unit (MFCU) of the Minnesota Attorney General's Office. As a Lead Investigator for the MFCU, I investigate allegations of billing fraud by health care providers enrolled in the Minnesota Medical Assistance (Medicaid) Program. In this capacity, I investigated Chala Bekama Alemo (DOB 12/27/1984) (ALEMO), the defendant herein. I determined that ALEMO defrauded the Medicaid program by submitting timesheets for services that he did not provide. As a result of these false claims, the Minnesota Department of Human Services (DHS) and UCare paid out $34,373.87 in Medicaid funds, of which ALEMO received $17,668.00 based off false claims. ALEMO separately attempted to obtain another $8,101.67 in Medicaid funds for services not rendered.

I. THE MEDICAID PROGRAM.

The Medicaid program provides medical care and services to Minnesotans who meet income and other eligibility requirements (recipients). The Medicaid program is administered by the DHS. The DHS contracts with or enrolls providers to furnish health care services and goods to Medicaid recipients, some of whom receive their services on a managed care basis through one of Minnesota's managed care organizations (MCO) like UCare, which was located in Hennepin county before its closure. Health care providers wishing to furnish health care services to recipients must enroll in the Medicaid program by entering into an agreement. Providers then submit claims directly to DHS or the MCO, which then reimburses the provider in Medicaid funds.

Under Medicaid guidelines, personal care services are provided by a personal care assistant (PCA) who is employed by a Personal Care Assistance Services Agency (Agency) for the purpose of providing personal care necessary to maintain a recipient in his or her residence. A PCA is required to accurately document the time he or she spends with a recipient on a timesheet. The PCA then submits the timesheets to the Agency, which bills the DHS or MCO for PCA services based on the information reported in the timesheet. DHS or the MCO reimburse the agency, and the agency pays the PCA.

Medicaid covers PCA services, which include assistance with activities of daily living like dressing, grooming, bathing, eating, mobility, and toileting. Unless certain limited exceptions apply, PCA services occur in a recipient's home and are documented on a timesheet. Medicaid recipients may choose to receive shared PCA services, or services provided to up to three recipients at the same time in the same location by one PCA. To receive shared PCA services, the recipient must advise the county assessor that the recipient wishes to use the shared care option and sign a Home Care Shared Services Agreement agreeing to, among other things, document on a daily basis, the start and end times of the shared service, the location of the shared service, and any notes regarding changes in condition or problems as a result of the shared service. The recipient or Responsible Party must also participate in the development of a shared care plan and PCA training on shared care. Finally, the recipient must also work with his or her Agency to assure that shared care is appropriate based on the recipient's age and assessed needs.

DHS also contracts with Home and Community-Based Services (HCBS). HCBS providers provide services sometimes referred to as 245D services or "waivered services." Like PCA services, waivered services are provided by workers for waivered agencies and are also intended to provide assistance and support for persons with disabilities who live independently in the community. As relevant to this Complaint, these waivered services include homemaker services and community support services.

Like PCA services, workers providing waivered services also must document the services they provide in timesheets. See Minn. Stat. § 256B.4912, subd. 12. Timesheets for all services also must include the time and type of services provided and must be signed by the worker and recipient verifying the service occurred. Id.; Minn. Rule § 9505.2175, subp. 7(H)(9). The completed timesheets are submitted to the agency that submits claims to DHS or the MCO based on the services provided.

Both PCA services and waivered services are not eligible for reimbursement while a recipient is out of his or her home receiving medical care and/or treatment in an inpatient setting.

II. ALEMO'S FRAUD SCHEMES.

On service dates from September 2024 through March 2026, ALEMO reported providing services to F.U. and J.S. (Medicaid recipients are identified by their initials to protect their privacy), through Family Quality Care (Family), Mankato Rehab Center, Inc. (Mankato Rehab), and Minnesota Independent Living Services (MILS). Family, Mankato Rehab, and MILS are healthcare agencies that receive Medicaid funds. Family is located in Minneapolis, Hennepin County, Minnesota, Mankato Rehab is located in Mankato, Blue Earth County, Minnesota, and MILS is located in Woodbury, Washington County, Minnesota.

During this time period:
1. ALEMO submitted timesheets alleging to provide services to F.U. and J.S. at the same time. The recipients did not reside together nor were they approved for shared services. Additionally, ALEMO affirmatively marked these services as being provided 1:1 (not shared services), resulting in a higher reimbursement rate than 1:2 (shared services) would be;
2. ALEMO submitted timesheets alleging to provide PCA and waivered services to the same recipient at the same time. This is not allowed and would be the parallel of working two jobs simultaneously;
3. ALEMO submitted timesheets alleging to provide services when the recipient was not in the country and services could not have been provided;
4. ALEMO submitted timesheets alleging to provide services when the recipient was a resident at an inpatient facility and already receiving care from medical professionals; and
5. ALEMO submitted timesheets alleging to provide services when ALEMO himself was out of the country and the recipient was still in the United States.

For many of these fraud theories, more than one theory occurred simultaneously. There were also many times where ALEMO attempted to bill one of the fraud theories above but the agency and/or DHS/MCO noticed the fraud/overlap and rejected the billing. I grouped all of this into an attempted fraud theory because ALEMO affirmatively submitted these timesheets to receive Medicaid money for services he did not provide, but DHS/MCO noticed it and rejected it before he could be paid out for it.

Every timesheet ALEMO signed off on had a warning to review the completed timesheets for accuracy and that fraud is a crime. Every timesheet from MILS stated that "It is a federal crime to provide false information on (PCA/HMK) billings for Medical Assistance payment. Your signature verifies the time and services entered above are accurate and that services were performed as specified in the (PCA/HMK) Care Plan." Every timesheet from Family stated that "It is a federal crime to provide false information on PCA billings for Medical Assistance payment. Your signature verifies the time and services entered are accurate and that the services were performed as specified in the PCA care plan." Lastly, every timesheet from Mankato Rehab stated "It is a federal crime to provide false information on billings for Medical Assistance payment. Your signature verifies the time and services entered above are accurate and that the services were performed as specified in the Care Plan."

When I was reviewing the documents from Family, I found a reprimand letter dated June 21, 2024 warning ALEMO about his timesheets that overlapped with travel and inpatient care: "This letter is to remind you that you should fully inform us if you or the client that you provide service for, stay in a hospital or go on vacation for a certain period of time. You should also not fill up the time sheet during those periods. By signing this you certify that you are aware of the consequences that will come from the violation of the Minnesota PCA code, and the rules and procedures of the company." ALEMO signed and dated this warning letter on June 21, 2024, and a witness from Family signed it as well. I also noticed that in ALEMO's job application to MILS, he listed recipient J.S. as his "former manager." Lastly, MILS's operations manager told me that "Chala had quite a few issues with completing his timesheets correctly. He regularly made mistakes with dates and calculating his hours, so we had to have him correct and resubmit timesheets several times, especially during this time when he first started. We also had him come into the office on multiple occasions so we could go through them with him and help make sure they were completed correctly."

1. ALEMO submitted timesheets alleging to provide services to F.U. and J.S. at the same time.

For example, ALEMO completed a timesheet and submitted it to MILS, stating that on March 14, 2026, he provided services to F.U. from 4:30 p.m. until 11:30 p.m. At the same time, ALEMO completed a timesheet and submitted it to Mankato Rehab stating that he was providing services to J.S. from 6:00 a.m. until 10:46 p.m.

It is important to note that J.S. and F.U. were not approved for shared care, so none of this 1:2 care would have been reimbursed. Also noteworthy, J.S. and F.U. did not reside at the same location. Additionally, every timesheet had a place to input the ratio of care. If one provider cared for two recipients, it would be 1:2 care and reimbursed at a lower rate than 1:1 care. ALEMO checked 1:1 care on every timesheet. Additionally, there were over 25 occurrences where ALEMO submitted timesheets alleging to provide services to F.U. and J.S. at the same time while one of the recipients was at a care facility, or while the recipient was out of the country.

ALEMO reported providing over 45 hours of services that did not occur as documented to F.U. and J.S. at the same time when this would not have been reimbursed. MILS and Mankato Rehab received over a combined $1,240 in Medicaid funds for these false hours, of which ALEMO attempted to receive nearly $900 in wages. It should be noted that there were over 145 additional hours I identified overlapping services between F.U. and J.S., but I attributed those claim lines as fraud under other fraud theories. On some dates, ALEMO had three fraud theories present, so I only counted the claim lines one time for purposes of calculating overpayment.

2. ALEMO submitted timesheets alleging to provide PCA and waivered services to the same recipient at the same time.

For example, ALEMO completed a timesheet and submitted it to MILS, stating that on May 11, 2025, he provided homemaker services to F.U. from 2:00 p.m. until 5:00 p.m. At the same time, ALEMO completed a timesheet and submitted it to MILS stating that he was providing PCA services to F.U. from 6:00 a.m. until 5:00 p.m. Additionally on this same date, ALEMO was out of the country while F.U. was in the country.

ALEMO reported providing nearly 15 hours of overlapping services for the same recipient that would not have been eligible for reimbursement. MILS received over $340 in Medicaid funds for these false hours, of which ALEMO received over $180 in wages. It should be noted that there were over 80 other hours I identified of overlapping services, but I attributed those claim lines as fraud under other fraud theories.

3. ALEMO submitted timesheets alleging to provide services when the recipient was not in the country and services could not have been provided.

For example, ALEMO completed a timesheet and submitted it to MILS, stating that on June 22, 2025, he provided services to F.U. from 6:00 a.m. until 4:00 p.m. At the same time, F.U. was out of the country. Also on this date, F.U. reported providing PCA and Homemaker services to F.U. at the same time. PCA and homemaker services are separate Medicaid services, and the services cannot be simultaneously provided by one provider to a single recipient.

ALEMO reported providing over 545 hours that did not occur as documented. MILS and Family received over a combined $14,330 in Medicaid funds for these false hours, of which ALEMO received over $7,560 in wages.

4. ALEMO submitted timesheets alleging to provide services when the recipient was a resident at an inpatient facility and already receiving care from medical professionals.

For example, ALEMO completed a timesheet and submitted it to MILS, stating that on September 12, 2025, he provided services to J.S. from 6:00 a.m. until 4:00 p.m. At the same time, J.S. was inpatient at a facility. Also on this date ALEMO alleged to provide care to F.U. and J.S. at the same time.

ALEMO reported providing over 425 hours that did not occur as documented. MILS received over $3,775 in Medicaid funds for these false hours, of which ALEMO attempted to receive $7,200 and ALEMO did receive over $1,815 in wages.

5. ALEMO submitted timesheets alleging to provide services when ALEMO himself was out of the country and the recipient was still in the United States.

For example, ALEMO completed a timesheet and submitted it to MILS, stating that on October 17, 2025, he provided services to F.U. from 6:00 a.m. until 4:00 p.m. At the same time, ALEMO was out of the country.

ALEMO reported providing over 570 hours that did not occur as documented. MILS and Family received over a combined $14,655 in Medicaid funds for these false hours, of which ALEMO received over $8,095 in wages.

III. Conclusion.

To calculate overlap, I compared ALEMO’s timesheets, travel records, recipients travel records, and recipients’ hospitalization records. I also received bank data to confirm he was paid for all services charged. I found that ALEMO reported working over 1,600 hours that could not have occurred because of at least one of the five fraud theories broken out above. As a result of this, the DHS and UCare paid out $34,373.87 in Medicaid funds to the various agencies, ALEMO obtained $17,688 in Medicaid funds for services that were not provided as documented, and ALEMO attempted to obtain an additional $8,101.67 in Medicaid funds. Broken down into charging periods by completed and attempted and further by warrant date (the date on which DHS/UCare issued payment to ALEMO’s employer), the Medicaid overpayment based upon ALEMO’s conduct is as follows:

Count Warrant Dates	Overpayment (Agencies)	Overpayment (Wages)	Overpayment (Attempt)
1. 04/08/2026 through 05/05/2026	$ 1,249.37		$ 898.07
2. 07/09/2025 through 12/05/2025	$ 28,955.10	$ 14,381.00	
3. 07/09/2025 through 12/05/2025			$ 7,203.60
4. 11/20/2024 through 03/12/2025	$ 4,169.40	$ 3,287.00	
Total	$ 34,373.87	$ 17,668.00	$ 8,101.67

SIGNATURES AND APPROVALS

Complainant requests that Defendant, subject to bail or conditions of release, be:
(1) arrested or that other lawful steps be taken to obtain Defendant's appearance in court; or
(2) detained, if already in custody, pending further proceedings; and that said Defendant otherwise be dealt with according to law.

Complainant declares under penalty of perjury that everything stated in this document is true and correct. Minn. Stat. § 358.116; Minn. R. Crim. P. 2.01, subds. 1, 2.

Complainant	Sarah Levine Lead Investigator 445 Minnesota Street Suite 1400 St. Paul, MN 55101	Electronically Signed: 09/28/2026 07:37 AM Anoka County, Minnesota

Being authorized to prosecute the offenses charged, I approve this complaint.

Prosecuting Attorney	Jilian Frueh Assistant Attorney General 445 Minnesota Street Suite 1400 St. Paul, MN 55101 (651) 296-3353	Electronically Signed: 09/27/2026 01:39 PM

FINDING OF PROBABLE CAUSE

From the above sworn facts, and any supporting affidavits or supplemental sworn testimony, I, the Issuing Officer, have determined that probable cause exists to support, subject to bail or conditions of release where applicable, Defendant's arrest or other lawful steps be taken to obtain Defendant's appearance in court, or Defendant's detention, if already in custody, pending further proceedings. Defendant is therefore charged with the above-stated offense(s).

[X] SUMMONS

THEREFORE YOU, THE DEFENDANT, ARE SUMMONED to appear as directed in the Notice of Hearing before the above-named court to answer this complaint.

IF YOU FAIL TO APPEAR in response to this SUMMONS, a WARRANT FOR YOUR ARREST shall be issued.

[ ] WARRANT

To the Sheriff of the above-named county; or other person authorized to execute this warrant: I order, in the name of the State of Minnesota, that the Defendant be apprehended and arrested without delay and brought promptly before the court (if in session), and if not, before a Judge or Judicial Officer of such court without unnecessary delay, and in any event not later than 36 hours after the arrest or as soon as such Judge or Judicial Officer is available to be dealt with according to law.

[ ] ***Execute in MN Only*** [ ] ***Execute Nationwide*** [ ] ***Execute in Border States***

[ ] ORDER OF DETENTION

Since the Defendant is already in custody, I order, subject to bail or conditions of release, that the Defendant continue to be detained pending further proceedings.

Bail: $
Conditions of Release:

This complaint, duly subscribed and sworn to or signed under penalty of perjury, is issued by the undersigned Judicial Officer as of the following date: September 28, 2026.

Judicial Officer	Jamie L Anderson District Court Judge	Electronically Signed: 09/28/2026 09:02 AM

Sworn testimony has been given before the Judicial Officer by the following witnesses:

COUNTY OF HENNEPIN **STATE OF MINNESOTA** **State of Minnesota** Plaintiff vs. **Chala Bekama Alemo** Defendant	*LAW ENFORCEMENT OFFICER RETURN OF SERVICE* *I hereby Certify and Return that I have served a copy of this Summons upon the Defendant herein named.* Signature of Authorized Service Agent:

DEFENDANT FACT SHEET

Name:	Chala Bekama Alemo
DOB:	12/27/1984
Address:	1953 Laurel Avenue St. Paul, MN 55104
Alias Names/DOB:	
SID:	
Height:	
Weight:	
Eye Color:	
Hair Color:	
Gender:	
Race:	
Fingerprints Required per Statute:	Yes
Fingerprint match to Criminal History Record:	No
Driver's License #:	
Case Scheduling Information:	State unavailable Oct. 14-16, 20, Nov 5-6
Alcohol Concentration:	

STATUTE AND OFFENSE GRID

Cnt Nbr	Statute Type	Offense Date(s)	Statute Nbrs and Descriptions	Offense Level	MOC	GOC	Controlling Agencies	Case Numbers
1	Charge	4/8/2026	609.52.2(a)(3)(iii) Theft-Medical costs	Felony	U105M	A	MN062015A	20260025
	Penalty	4/8/2026	609.52.3(3)(d)(iv) Theft - Value $1000 or less - Public funds	Felony	U105M	A	MN062015A	20260025
	Modifier	4/8/2026	609.17.1 Anticipatory Crimes-Attempts	No-Level	U105M	A	MN062015A	20260025
2	Charge	7/9/2025	609.52.2(a)(3)(iii) Theft-Medical costs	Felony	U105G		MN062015A	20260025
	Penalty	7/9/2025	609.52.3(2) Theft - Value over $5,000 or trade secret, explosive, Controlled Substance I or II	Felony	U105G		MN062015A	20260025
3	Charge	7/9/2025	609.52.2(a)(3)(iii) Theft-Medical costs	Felony	U105G	A	MN062015A	20260025
	Penalty	7/9/2025	609.52.3(2) Theft - Value over $5,000 or trade secret, explosive, Controlled Substance I or II	Felony	U105G	A	MN062015A	20260025
	Modifier	7/9/2025	609.17.1 Anticipatory Crimes-Attempts	No-Level	U105G	A	MN062015A	20260025
4	Charge	11/20/2024	609.52.2(a)(3)(iii) Theft-Medical costs	Felony	U105H		MN062015A	20260025
	Penalty	11/20/2024	609.52.3(3)(a) Theft - Value of property or services $1001 - $5,000	Felony	U105H		MN062015A	20260025