

Broward County Sheriff's Office 21.7870 Booking Report



CIS#	802100707	7		BCCN	l #	944282	2		Booking Sheet Co	ontrol Date and	Time	
OBTS	607294826		Print Clearance 09/14/21 00:00:00 Print				00·00 Prints	Yes	09/14/21 10:04:10			
Arrest #	MJ 2100707		Offen	se Repo	ort#	90-2109-	004126		Agency MA	IN JAIL		
Last Name First Middle	ALES	, EFRI	ΞN		—			·	SSN # *	-	101	
Race	Sex	Height	Weight	Eyes	Hair	Comp	Age Admitted	DOB	Place of Birth	State	FDLE	
w	М	511	220	HAZ	GRY	LGT	45	10/22/1975		CUBA	0	
Permanent Address	2665 SW 37TH AVE Apt# 1207 COCONUT GROVE FL 33133								Months of Residence 0			
Arrest Date	e 09/14/21 07·35·00 Place of Arrest 555 SE 1ST AVE FORT Arresting Officer 12096 ANGUS LAUDERDALE FL 33301											
Inmate Logg	ged Date	09/14/2	21 08:14:4	6	Inmate	Log Type	FULL INTAKE	P	lace Admitted	MAIN		
									Z3 V "	·		

Intake Comments SP/CO-8802 29/54-8802 WC-12115

Alias Last name, First, Middle, DOB

Warrants Officer Id: bs12115

Scars, Marks, Tattoos

Release Date/	Time	Release Reason		Release Authorized By					
Charge No.	Charge Initiation Date	Statute	Warrant/Capias	Level M.	C B. Type	Bond Amount			
1	09/14/21 09:41	817.234-11a	21007870CF10A	3F Y	BOND	\$1,000.00			
Charges F	FRAUD- INSURANCE FRAUD	LESS THAN 20K	Comments INSURA	NCE FRAU)				
Booking Off.	ID bs08767	County BROWA	RD	Judge	N. HUNTER DAVIS-FO				

^{*} End of Report *

	SHADED FIELDS MUST BE AN	LAINT AFFIDAVII	T IN CHETODY	M
BROWARD COUNTY	SHADED FIELDS MOST BE AN	SWERED IF DEFENDANT NO	T IN COSTODY	🖾 ARREST FORM
ARREST # 802100707			OB	TS#
	se Report Local ID#	FDLE	FBI	SS#
Defendant's Last Name	First Midd	le SUF Alias/Stre	eet Name	Citizenship
Race Sex Hgt Wgt	EFREN Hair Eyes Comp A	e DOB Birth Plac		
Race Sex Hgt Wgt W M 5'11 220	Hair Eyes Comp A GRAY BROW LIGIT	45 10/22/1975 Birth Plai	ce	
Permanent Address 2665 SW 37TH AVE 1207, COCC		Scars, M	arks, TT	
Residence Type (1) City (2) County (3) Florida (4) Out of Sta	Local Address 2665 SW 37TI	1	Employment	Length
How long defendant in Breathalyser By Broward County			me Arrested	Arresting Officer(s) CCN ANGUS, DWAYNE J. (12096)
Officer Injured Y N X Unit Zone	Boat Shift Trans Unit		ing Officer/CCN	Pick-up Time Time Arrived/BSO
TYPE / ACTIVITY: Type N-N/A A-Amphetamine B-Barbiturate C-Cocaine	E-Heroin P-Paraphernalia/ H-Hallucinogen Equipment S-Synthetic O-Opium/Deriv U-Unknown Z-Other	Activity:	M-Manufacture/ Produce/Cultiva K-Dispense/ Distribute Z-Other	ate Indication of Y N UK Alcohol Influence
Attach Defendant's Vehicle Tower Photo	1 To:	Yéar. Tag#:	Color:	VÍÑ # Other identifiers or remarks:
Name of victim(s) (if corporation, exact legal nar	ne and state of incorporation)			
Count #	Offenses Charged	Tw	/C# / Citation # (if appli	cable) FS or Capias/Warrant #
I INSURANCE FRAUD			2021-471880	21007870CF10A
	Probe	blo Causo Affidavit		
Before me this date personally appeared	ANGUS, DWAYNE J. (12096) 2021 at 555 SE IST AV, FOR	LAUDERDALE, FL 33301		duly sworn deposes and says that on (crime location)
the above named defendant committed the On Tuesday, September 10/22/75 arrived at the completed by Regional	14, 2021 at approxi ne Main Jail scanner	mately 0735 hour to self-surrend	s, Ales, Efr er himself.	en W/M DOB A warrant check was

Under penalties of perfety, I declare that I have read the foregoing and that the facts stated therein are true and correct to the best of my knowledge and belief ANGUS, DIVAYNE J. (12096) Main Jail Facility Officer/Affiant's Signature Officer's Name/CCN Officer's Division STATE OF FLORIDA **COUNTY OF BROWARD** 14 day of ____ September Sworn to (or affirmed) and subscribed before me this ____ ANGUS, DWAYNE J. ___ (name and title), who is personally known to me or has produced as identification

Depoty/ 11577 erk of the Court, or Assistant State Attorney Title/Rank and CCN

JEAN, KAREN A Print, Type or Stamp Commissioned Name of Notary Public

(SEAL)

Seventeenth Judicial Circuit **Broward County**

FIRST APPEARANCE/ARREST FORM

State of Florida

(SHOULD ADDITIONAL SPACE BE NEEDED, USE THE PROBABLE CAUSE AFFIDAVIT CONTINUATION (BSO DB#2a))

Court 2nd - State Attorney - Filing Agency

BSO DB-#2 (Revised 05/00)

COURT COPY

SP/co 3802 29/54 8802

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 9/15/2021 10:20:27 AM.****

Based on the totality of evidence, probable cause exists that Efren Ales committed the aforementioned charges,

PROBABLE CAUSE AFFIDAVIT -- CONTINUATION

DFS / Division of Investigative & Forensic Bureau of Insurance Frau Services / Det. Kevin Payne ID #00262 OFFICER'S NAME/CCN OFFICER'S AGENCY RIAFFIANT'S SIGNATURE STATE OF FLORIDA COUNTY OF BROWARD The foregoing instrument was acknowledged before me this _ day of take an oath. known to me or who has produced (ID Type) known to me as identification and who DID (SEAL OR STAMP) (Did or Did Not) DEPUTY CLERK OF THE COURT, NOTARY PUBLIC, OR ASSISTANT STATE ATTORNEY SEVENTEENTH JUDICIAL CIRCUIT FIRST APPEARANCE / ARREST FORM

SEVENTEENTH JUDICIAL CIRCUIT BROWARD COUNTY STATE OF FLORIDA BSODB #2 (REV 9/91)

SHOULD ADDITIONAL SPACE BE NEEDED, USE PROBABLE CAUSE AFFIDAVIT CONTINUATION COURT COPY

IN THE CIRCUIT/COUNTY COURT OF THE 17TH JUDICIAL CIRCUIT, IN AND FOR BROWARD COUNTY, FLORIDA

AGENCY. BROWARD COUNTY SO

STATE OF FLORIDA,

Officer Name

MGUS, DWAYNE (12096)

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 9/15/2021_10:20:27 AM.****



Broward County Sheriff's Office 2601 West Broward Boulevard Fort Lauderdale, FL 33312 P. (954) 831-8100 F. (954) 791-0929

BSO - Confirmation Report

NICO 0758

SPICO 8800

Confirmation Number: WC#2021-471880

Date Issued: 09/14/2021 07:46

Issued By: Scott, Tamika [bs16400]

Name/Id/Org: DEP ANGUS / 12096 / BROWARD

SHERIFF'S OFFICE

Status: Complete

Notes: NEW ARREST VIA TTY...DEP ANGUS

#12096...MAIN JAIL SCANNER...4PGS

Case Number: 21007870CF10A

Capias Date: 8/20/2021

Name: Ales, Efren

Type: Felony_NIC

DOB: 10/22/1975

Race/Gender: W / M

Additional Warrants on Confirmation:

LES, EFREN VM 10-22-1975

Efren Ales			Y and man
2665 SW 37 Ave Apt Coconut Grove FL 3.			Programme and the second secon
Male 10/22/1975 W	hite	In The Circuit/Court	2021 (10) 25 PM 3: 13
21-007870-CF10A		In And For Broward Cou Florida	inty, Rendels over the lords
5 Ft. 11 In. 200 Lbs.	Brown		
BCCN:		Coming	
		Capias	N. Hunter Davis - FO
			Number 21-007870-CF10A
To all and singular the	e sheriffs of Flori	ida, Greetings:	"HARA
You are commanded	l to take <u>Efren A</u>	les	
	said court instante	est and safely keep so that yo r to answer to the charge, file	u may have that person's body d by the State Attorney of
G.	C1	To White	D 14
Charge		ge Description ance Fraud	Bond Amount 1,000.00
•	QII)	Total:	1,000.00
	D' FO		,
Issue Date: 08/20/202	21		
And have a Richard in	ar tiis writ.		8/25/2021
GOD WE			itness Brenda D. Forman, Clerk of our
JUDICIA			aid court and the seal of our said court, orthouse at Fort Lauderdale Florida, Brenda D. Forman, Clerk
CIRCUIT	158	n Maria	2011. D 12 1011
		By July 1	Deputy Clerk
Reason Capias	s Issued: Capias	- Not In Custody	

By arresting the within	in named defenda	and executed same on an and having him now bef	Fore the court.
	annound to the fact of the specific copy of the spe	_, Sheriff By: Depu	ty Showiff
		⊅epu	ty Shellii

Filing # 133088435 E-Filed 08/20/2021 11:10:31 AM

COMPLAINT AFFIDAVIT

ARREST		UNIY		511A	DED FIE	LDS MU	SIBLAN	SWEKE) IF DE	PENDANTN	OT IN CUS	LODY	√OBT;	S. NO.
FILING AGENCY DFS / Division of investigative & Forensic Services				OFFENSE REPORT FRD 20-362			LOCA	LOCAL I.D. NO.		FDLE	FBI		SS NO.	,
DEFENDAN	NT'S LA	ST NAME		FIRST			MIDDLE		SUF	ALIAS/S	TREET NAM	1E		CITIZENSI
	, 4	Ales		Efre	en									Yes
R.C. S	SEX	HGT.	WGT	HAIR	EYES.	сомр.	AGE	DOB	. 1	BIRTHPLACE			SCARS, MA	RKS, TT
W N	VI J	5'11"	200	BLK	BRO	Fair	air 45 10/22			Cuba			TT/Arms/Back	
PERMANEI 2665 SW			7 Cocor	nut Grov	e, Fl 331	33				LOCAL ADD	DRESS			CITIZENSI Yes RKS, TT Back
RESIDENCE	TYPE:	(I) CITY	(2) CO	UNTY (3) FLORID/	(4) (OUT OF STA			PLACE OF E				LENGTH
HOW LONG DEFENDANT IN BREAD BROWARD COUNTY BY/C Unknown N/A				HALYZER	REAI	DING	PLACE OF ARREST				DATE/TIME	E ARRESTED	ARRES	NG OFFICER(S)
OFFICER INJ	JURED N□	UNIT	ZONE	BEAT	SHIFT	UNIT T PRISIO	RANSPORT	ring		SPORTING EIVCCN		TIME ARRIV	$C/I \sim$	DRUG TYP
TYPE N N/A A AMPHETAMIN	C+COCA	NINE MIN	ARIJUANA JUM	P-PARAPHE EQUIPMEN S-SYNTHES	1 2	NKNOWN OTHER	ACTIVII	N-N/A			M- MANUFACTU PRODUCE/ CULTIVATE	REV K-DISPENS DISTRIB 7-70NI:		INFLUENCE D
ATTAC DEFENDA PHOTO	ANT'S			DANT'S VE LE TOWED		KE TAG NO	TYPE . O	YEA		COLOR OR REMARKS	S			
name of VI	ICTIM (II	CORPORA	TION, EXA	CT LEGAL	NAME AN	D STATE	OF INCORP	² .)	ADD	RESS				PHONE #
Cigna					900 C	ottage (Grove Ro	d., Bloo	mfleld,	CT 06002			(860)	226-0264
COUNT NO	o. 「			OFFENS	ES CHAI	RGED	**************************************		CIT	ATION#IF	APPLICABI	LE F.S.	OR CAPI	AS/WARRANT /
1		False and fraudulent insurance claim						9				234 (1)(a)		
		······································												

PROBABLE CAUSE AFFIDAVIT

Before me this date personally appeared, Detective Payne who being first duly sworn deposes and says that on June 16, 2017, Efren Ales committed healthcare fraud by knowingly misrepresenting material facts and information pursuant to multiple insurance claims that he filled in behalf of his dependent, Ayden Ales. Specifically, Efren Ales allegedly submitted fabricated invoices in support and pursuit of receiving direct member reimbursements which were allegedly associated with out-of-pocket health care expenses he incurred. As part of the claim process, Cigna determined that the records were fabricated, therefore submitted a referral with the Bureau of Insurance Fraud.

An investigation conducted by the Florida Department of Financial Services, Division of Investigative & Forensic Services, Bureau of Insurance Fraud conclude that Efren Ales had purchased a Hospital Indemnity Insurance Policy through Cigna during an open enrollment period while he was gainfully employed with Swire Properties. The individual payroll policy was written under #00618868 and had an effective date of May 22, 2017. Additionally, sworn recorded statements and or sworn affidavits were obtained from four independent physicians who confirmed that the dates of service Efren Ales reported to Cigna were incorrect and that their invoices were fabricated therefore, they were fraudulent.

On March 22, 2021, Detective Amarante, Almodovar, and I traveled to 2665 SW 37th Ave Apt 1207 Miami, FI 33133 thereafter, I administered a covert interview of Efren Ales. During the interview, Efren Ales confirmed that he had sought medical treatments for his son, Ayden Ales and himself from numerous physicians and that he had provided cash payments for the treatments. Additionally, Efren Ales stated that he had completed claim forms which he sent to Cigna along with any invoices that he received from the physicians. Furthermore, Efren Ales confirmed that he had received a letter from Cigna which stated they had overpaid him \$9,000.00 which he had repaid.

According to SIU Fraud Analyst, Christina Creeden, Cigna had conducted a routine audit and post-payment review of Efren Ales's claims that he had submitted between August 17, 2017 through April 3, 2018. The review identified that several of the claim forms showed signs of altercations, cloned receipts, and incorrect dates of service. Additionally, Cigna cited that they had overpald Efren Ales \$9,021.36 based on the fraudulent invoices and claim forms that he submitted in support and pursuit of being Indemnified.