Referral packet: provider network D1-00002

Draft for reviewer. Prepared September 5, 2026. Every statement below cites the numbered public record it came from.

Subject	Findings	Public records cited	Regulations
Provider network D1-00002	10	20	5

> This packet describes public records and dates. It does not assert fraud, intent or guilt. Each finding cites the numbered records at the end, and the section Rule out first lists the ordinary explanations a reviewer must eliminate before any action.

Summary

Referral candidate packet for a cluster of six home health agencies around Burbank, California, described in the evidence as a network scored 89 of 100 and ranked second nationally. The record shows three companies incorporated inside one 90 day window in **December 2020**, up to five providers at a single address, and five providers sharing an address with a revoked or excluded entity, including one agency in the same building as a hospice on the Medicare revocation list with an action dated **September 4, 2024**. County saturation is 21.2 providers of this kind per 10,000 Medicare fee for service beneficiaries, above the national norm, with a three year saturation change of 40 percent. The group received 1,673,694 dollars in Medicare hospice and home health payments in 2023 and billed no Medicaid in 2024. Grounds offered for review are **42 CFR 455.432**, **42 CFR 455.450**, **42 CFR 424.518**, **42 CFR 455.416(c)** and **42 CFR 455.416(g)**. No conclusion about fraud, intent or guilt is drawn or implied.

Description

This is a group of six home health agencies, five of them listed in Burbank, California, and one listed in Los Angeles, California. Three of the companies were incorporated between **December 11, 2020** and **December 23, 2020**, and two of the providers were formed in 2021 or later, giving a median company age of 5.7 years. As many as five of them share a single address, and one of them, Medaid Home Health, sits in the same building as Glencare Hospice Services, Inc, which appears on the Medicare revocation list with an action dated **September 4, 2024**. The providers took in 1,673,694 dollars in Medicare hospice and home health payments in 2023 and submitted no Medicaid billing in 2024, so the money seen so far is on the Medicare side. The county already has 21.2 providers of this kind per 10,000 Medicare fee for service beneficiaries, above the national norm, and that saturation rose 40 percent over three years.

What the records show

01 The cluster consists of six providers around Burbank, California, all six of them home health agencies, with a network score of 89 of 100 and a national rank of 2.
Records 1 (clusters)

02 Three separate companies in the group were incorporated within one 90 day window, between **December 11, 2020** and **December 23, 2020**, and one named member, Horizon Aid Inc, is recorded with an incorporation date of **December 23, 2020**.
Records 2 (network facts), 18 (network members)

03 Up to five providers share one address, and the measure for most providers at one building is 5, placing the network in the top 8 percent in the risky direction.
Records 3 (network facts), 11 (factor desk)

04 Medaid Home Health is in the same building as Glencare Hospice Services, Inc, which appears on the Medicare revocation list with an action dated **September 4, 2024**, and in all five providers here share an address with a revoked or excluded entity; the related factor reading is 2.5, in the top 8 percent in the risky direction.
Records 4 (network facts), 9 (factor desk)

05 Two of the providers were formed in 2021 or later, the median company age is 5.7 years, in the top 4 percent in the risky direction, and named member Expert Care is recorded with an incorporation date of **June 29, 2021**.
Records 5 (network facts), 7 (factor desk), 15 (network members)

06 The county has 21.2 providers of this kind per 10,000 Medicare fee for service beneficiaries, above the national norm, a reading in the top 5 percent in the risky direction, and county saturation changed 40 percent over three years, in the top 8 percent in the risky direction.
Records 6 (network facts), 8 (factor desk), 10 (factor desk), 13 (CMS market saturation)

07 The providers received 1,673,694 dollars in Medicare hospice and home health payments in 2023 and billed no Medicaid in 2024.
Records 14 (T-MSIS provider spending 2024)

08 Each of the six named members is recorded with no Medicaid billing in 2024: Expert Care, Medaid Home Health, Glencare Home Health Services Llc, Horizon Aid Inc, Alameda Home Care Inc and Glenwood Home Inc.
Records 15 (network members), 16 (network members), 17 (network members), 18 (network members), 19 (network members), 20 (network members)

09 One member, Glencare Home Health Services Llc, is listed in Los Angeles, California, with an incorporation date of **January 5, 2017**, while the other five named members are listed in Burbank, California.
Records 15 (network members), 16 (network members), 17 (network members), 18 (network members), 19 (network members), 20 (network members)

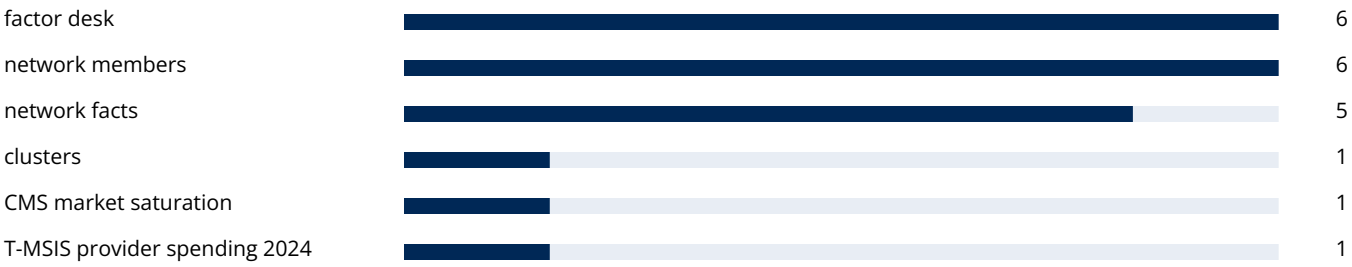
10 Momentum across the rate of change factors is rising, with a robust z reading of 0.41, described in the record as an indicative reading and not a validated forecast.
Records 12 (factor desk)

Regulations this relates to

42 CFR 455.432 the State Medicaid agency must conduct pre-enrollment and post-enrollment site visits of providers designated as moderate or high risk to verify that the information submitted is accurate and to determine compliance with enrollment requirements.

42 CFR 455.416(g)	the agency may terminate or deny enrollment if the provider falsified any information on the application or the identity of the applicant cannot be verified.
42 CFR 455.450	screening levels; newly enrolling home health agencies and providers subject to a payment suspension or previously excluded are screened at the high risk level (fingerprint criminal background checks and site visits).
42 CFR 424.518	Medicare screening levels; newly enrolling home health agencies and hospices are screened at the high level (fingerprint background checks and site visits).
42 CFR 455.416(c)	the State Medicaid agency must deny or terminate the enrollment of any provider that is terminated on or after January 1, 2011 under Medicare or under the Medicaid program or CHIP of any other State and is included in the termination database under 455.417.

Where the records come from



Recommended next step

Refer for screening and verification review, not for any finding of wrongdoing. First, consider pre enrollment and post enrollment site visits at the shared building and at each listed practice location under **42 CFR 455.432**, since the site visit is the tool for confirming that the submitted information is accurate and that enrollment requirements are met. Second, confirm the applicable screening level for each agency under **42 CFR 455.450** and **42 CFR 424.518**, which place newly enrolling home health agencies and hospices at the high risk level with fingerprint background checks and site visits, given that two providers were formed in 2021 or later. Third, run each entity, owner and managing employee against the termination and exclusion databases described in **42 CFR 455.416(c)**, because five providers share an address with a revoked or excluded entity and the co located hospice carries a revocation action dated **September 4, 2024**. Fourth, verify identity, ownership and control disclosures and the accuracy of application information under **42 CFR 455.416(g)**. Because the group shows no Medicaid billing in 2024 and Medicare payments in 2023, coordinate with the Medicare contractor and the Unified Program Integrity Contractor before any state level action.

Rule out first

- A shared address can be a legitimate medical office building, an executive suite or a shared administrative or billing office; suite level detail should be pulled before treating the addresses as identical.
- Common ownership or a management services organization operating several licensed agencies is lawful; verify ownership disclosures rather than inferring a relationship from proximity.
- Incorporation dates clustered in December 2020 may reflect a single filing agent, a corporate restructuring, or market entry timed to a licensing or moratorium change, and are not by themselves irregular.
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The revocation action dated September 4, 2024 applies to Glencare Hospice Services, Inc as named in the record; co located providers are not implicated by that action, and any similarity of names must be checked against actual ownership records.

- No Medicaid billing in 2024 may simply mean the agencies are Medicare only enrollees, are newly enrolled, or bill through a managed care arrangement or another payer, and absence of claims is not itself a concern.
- High county saturation and a 40 percent three year change may reflect local demographics, referral patterns or population growth rather than any provider conduct.
- The network score, the percentile factor readings and the rising momentum reading with robust z of 0.41 are described as indicative and not a validated forecast, so they should not be treated as evidence of any violation.
- Provider names, incorporation dates, addresses and identifier records may be stale, mismatched or duplicated in the source data; confirm each item against primary enrollment and licensing records before any action.

Public records cited

1 Provider network D1-00002: 6 providers around Burbank, CA, CA (6 home health agencies); network score 89 of 100, ranked 2 nationally.
clusters

2 3 separate companies were incorporated within one 90-day window, between 2020-12-11 and 2020-12-23.
network facts

3 Up to 5 providers share one address.
network facts

4 Medaid Home Health is in the same building as Glencare Hospice Services, Inc, which appears on the Medicare revocation list (action dated 2024-09-04). In all, 5 providers here share an address with a revoked or excluded entity.
network facts

5 2 of the providers were formed in 2021 or later.
network facts

6 The county has 21.2 providers of this kind per 10,000 Medicare fee-for-service beneficiaries, above the national norm.
network facts

7 Median company age: 5.7 years, in the top 4% of networks in the risky direction.
factor desk

8 Providers per 10,000 Medicare beneficiaries in the county: 21.2, in the top 5% of networks in the risky direction.
factor desk

9 Providers at the address of a revoked or excluded company: 2.5, in the top 8% of networks in the risky direction.
factor desk

10 Change in county saturation over three years: 40%, in the top 8% of networks in the risky direction.
factor desk

11 Most providers at one building: 5, in the top 8% of networks in the risky direction.
factor desk

12 Momentum across the rate-of-change factors is rising (robust z 0.41); this is an indicative reading, not a validated forecast.
factor desk

13 The county has 21.2 providers of this kind per 10,000 Medicare fee-for-service beneficiaries, above the national norm.
CMS market saturation

14 The providers received $1,673,694 in Medicare hospice and home health payments in 2023 and billed no Medicaid in 2024.
T-MSIS provider spending 2024

15 Home health agency Expert Care (NPI 1184296931, Burbank, CA), incorporated 2021-06-29, no Medicaid billing in 2024.
network members

16 Home health agency Medaid Home Health (NPI 1356924013, Burbank, CA), no Medicaid billing in 2024.
network members

17 Home health agency Glencare Home Health Services Llc (NPI 1811551062, Los Angeles, CA), incorporated 2017-01-05, no Medicaid billing in 2024.
network members

18 Home health agency Horizon Aid Inc (NPI 1922696442, Burbank, CA), incorporated 2020-12-23, no Medicaid billing in 2024.
network members

19 Home health agency Alameda Home Care Inc (NPI 1467048157, Burbank, CA), no Medicaid billing in 2024.
network members

20 Home health agency Glenwood Home Inc (NPI 1336745546, Burbank, CA), no Medicaid billing in 2024.
network members