

COMMONWEALTH OF PENNSYLVANIA  
COUNTY OF: PHILADELPHIA

Magisterial District Number:  
MDJ: Hon. Philadelphia CJC  
Address: 1301 Filbert Street  
Philadelphia, PA 19107

Telephone: (215)686-7000



POLICE CRIMINAL COMPLAINT  
COMMONWEALTH OF PENNSYLVANIA

VS.

DEFENDANT:

(NAME and ADDRESS):

WALTER

F

WRENN

3

First Name

Middle Name

Last Name

Gen

6 PLAYERS LANE, PINE HILL, NEW JERSEY 08021

NCIC Extradition Code Type

- ☒ 1-Felony Full ☐ 5-Felony Pending Extradition ☐ C-Misdemeanor Surrounding States ☐ Distance: \_\_\_\_\_  
☐ 2-Felony Limited ☐ 6-Felony Pending Extradition Determ. ☐ D-Misdemeanor No Extradition  
☐ 3-Felony Surrounding States ☐ A-Misdemeanor Full ☐ E-Misdemeanor Pending Extradition  
☐ 4-Felony No Extradition ☐ B-Misdemeanor Limited ☐ F-Misdemeanor Pending Extradition

DEFENDANT IDENTIFICATION INFORMATION

Docket Number: \_\_\_\_\_ Date Filed: \_\_\_\_/\_\_\_\_/\_\_\_\_ OTN/LiveScan Number: \_\_\_\_\_ Complaint/Incident Number: MFI200169304D Request Lab Services? ☐ YES ☒ NO  
 GENDER: ☒ Male ☐ Female DOB: 08/09/1940 POB: \_\_\_\_\_ Add'l DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Co-Defendant(s) ☐

First Name: AKA: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Gen: \_\_\_\_\_

RACE: ☐ White ☐ Asian ☒ Black ☐ Native American ☐ Unknown  
 ETHNICITY: ☐ Hispanic ☒ Non-Hispanic ☐ Unknown  
 Hair Color: ☐ GRY (Gray) ☐ RED (Red/Aubn.) ☐ SDY (Sandy) ☐ BLU (Blue) ☐ PLE (Purple) ☐ BRO (Brown)  
☒ BLK (Black) ☐ ONG (Orange) ☐ WHI (White) ☐ XXX (Unk./Bald) ☐ GRN (Green) ☐ PNK (Pink)  
☐ BLN (Blonde / Strawberry)

Eye Color: ☐ BLK (Black) ☐ BLU (Blue) ☒ BRO (Brown) ☐ GRN (Green) ☐ GRY (Gray)  
☐ HAZ (Hazel) ☐ MAR (Maroon) ☐ PNK (Pink) ☐ MUL (Multicolored) ☐ XXX (Unknown)

DNA: ☐ YES ☒ NO DNA Location: \_\_\_\_\_ WEIGHT (lbs.): \_\_\_\_\_  
 FBI Number: \_\_\_\_\_ MNU Number: \_\_\_\_\_ 275  
 Defendant Fingerprinted: ☐ YES ☐ NO Ft. HEIGHT In.: \_\_\_\_\_  
 Fingerprint Classification: \_\_\_\_\_ 6 3

DEFENDANT VEHICLE INFORMATION

Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Haz mat: ☐ Registration: \_\_\_\_\_ Comm'l Veh. Ind. ☐ School Veh. ☐ Oth. NCIC Veh. Code: \_\_\_\_\_ Reg. same as Def. ☐  
 VIN: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Style: \_\_\_\_\_ Color: \_\_\_\_\_

Office of the attorney for the Commonwealth ☒ Approved ☐ Disapproved because: \_\_\_\_\_

(The attorney for the Commonwealth may require that the complaint, arrest warrant affidavit, or both be approved by the attorney for the Commonwealth prior to filing. See Pa.R.Crim.P. 507).

ERIC STRYD, SDAG

(Name of the attorney for the Commonwealth)

*Eric J. Stryd*

(Signature of the attorney for the Commonwealth)

2/12/2021

(Date)

I, SPECIAL AGENT ERIC AUGENBRAUN

(Name of the Affiant)

BADGE #604

(PSP/MP/OTC -Assigned Affiant ID Number & Badge #)

of Pennsylvania Office of Attorney General

(Identify Department or Agency Represented and Political Subdivision)

PA0222400

(Police Agency ORI Number)

do hereby state: (check appropriate box)

1. ☒ I accuse the above named defendant who lives at the address set forth above

☐ I accuse the defendant whose name is unknown to me but who is described as \_\_\_\_\_

☐ I accuse the defendant whose name and popular designation or nickname are unknown to me and whom I have therefore designated as John Doe or Jane Doe

with violating the penal laws of the Commonwealth of Pennsylvania at [ ] 5139 Chestnut Street, Philadelphia, Pa 19139 (Subdivision Code) (Place-Political Subdivision)

in PHILADELPHIA County [51]

(County Code)

on or about SEPTEMBER 13, 2016 TO MARCH 3, 2019





# POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

The acts committed by the accused are described below with each Act of Assembly or statute allegedly violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.

(Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinance(s) allegedly violated. The age of the victim at the time of the offense may be included if known. In addition, social security numbers and financial information (e.g. PINs) should not be listed. If the identity of an account must be established, list only the last four digits. 204 PA.Code §§ 213.1 – 213.7.)

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input checked="" type="checkbox"/>	1	2506	A	of the	18 PA C.S.A.	1	F-1	0999	
Lead?	Offense #	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone
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Statute Description (include the name of statute or ordinance): **DRUG DELIVERY RESULTING IN DEATH - 1 COUNT. INTENTIONALLY PRESCRIBES ANY CONTROLLED SUBSTANCE IN VIOLATION OF SECTION 13(A)(14) OF THE CONTROLLED SUBSTANCE, DRUG, DEVICE, AND COSMETIC ACT AND ANOTHER PERSON DIES AS A RESULT OF USING THE SUBSTANCE.**

Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>	2	780-113	A (14)	of the	35 P.S.	1	F	3523	
Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone
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Statute Description (include the name of statute or ordinance): **CONTROLLED SUBSTANCE, DRUG, DEVICE AND COSMETIC ACT - 1 CONTINUOUS COUNT – PRESCRIBING OUTSIDE THE GOOD FAITH PRACTICE OF MEDICINE.**

Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>	3	1407	A (1)	of the	62 P.S.	2	F-3	2699	
Lead?	Offense#	Section	Subsection		PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone
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Statute Description (include the name of statute or ordinance): **MEDICAID FRAUD - 2 COUNTS. SUBMIT FALSE INFORMATION FOR THE PURPOSE OF OBTAINING AUTHORIZATION FOR FURNISHING SERVICES OR MERCHANDISE UNDER MEDICAL ASSISTANCE.**

Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference





# POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>	4	1407	A (6)	of the	62 P.S.	1	F-3	2699	
Lead?	Offense#	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)		Accident Number		<input type="checkbox"/> Interstate		<input type="checkbox"/> Safety Zone		<input type="checkbox"/> Work Zone	
Statute Description (include the name of statute or ordinance): <b>MEDICAID FRAUD - 1 CONTINUOUS COUNT. REFER A RECIPIENT TO ANOTHER PROVIDER BY PRESCRIPTION FOR SERVICES, SUPPLIES, OR EQUIPMENT WHICH ARE OF LITTLE OR NO BENEFIT TO THE RECIPIENT. ARE BELOW THE ACCEPTED MEDICAL TREATMENT STANDARDS. OR ARE UNNEEDED BY THE RECIPIENT.</b>									
Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference									

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>	5	4911	A (1)	of the	18 PA C.S.A.	2	F-3	2699	
Lead?	Offense#	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)		Accident Number		<input type="checkbox"/> Interstate		<input type="checkbox"/> Safety Zone		<input type="checkbox"/> Work Zone	
Statute Description (include the name of statute or ordinance): <b>TAMPERING WITH PUBLIC RECORD - 2 COUNTS. KNOWINGLY MAKES FALSE ENTRY IN, OR FALSE ALTERATION OF, ANY RECORD OR DOCUMENT OR THING BELONGING TO, OR RECEIVED OR KEPT BY GOVERNMENT</b>									
Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference									

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>	6	2504	A	of the	18 PA C.S.A.	1	M-1	0999	
Lead?	Offense#	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)		Accident Number		<input type="checkbox"/> Interstate		<input type="checkbox"/> Safety Zone		<input type="checkbox"/> Work Zone	
Statute Description (include the name of statute or ordinance): <b>INVOLUNTARY MANSLAUGHTER - 1 COUNT. CAUSES THE DEATH OF ANOTHER PERSON AS A DIRECT RESULT OF THE DOING OF A LAWFUL OR UNLAWFUL ACT IN A RECKLESS OR GROSSLY NEGLIGENT MANNER.</b>									
Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference									





# POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number:	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input checked="" type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>	7	2705	A(1)	of the	18 PA C.S.A.	1	M-2	7099	
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Lead?	Offense#	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
	PennDOT Data (if applicable)	Accident Number			<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone	

Statute Description (include the name of statute or ordinance): **RECKLESSLY ENDANGERING ANOTHER PERSON - 1 CONTINUOUS COUNT. RECKLESSLY ENGAGES IN CONDUCT WHICH PLACES OR MAY PLACE ANOTHER PERSON IN DANGER OF DEATH OR SERIOUS BODILY INJURY.**

Acts of the accused associated with this Offense: See Affidavit of Probable cause attached hereto and incorporated herein by reference

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input checked="" type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>				of the					
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Lead?	Offense#	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
	PennDOT Data (if applicable)	Accident Number			<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone	

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older _____
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<input type="checkbox"/>				of the					
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Lead?	Offense#	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code
	PennDOT Data (if applicable)	Accident Number			<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone	

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:



# POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

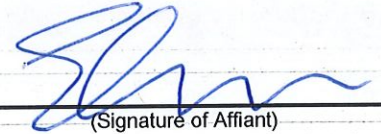
2. I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.
3. I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Code (18 Pa.C.S. § 4904) relating to unsworn falsification to authorities.
4. This complaint consists of the preceding page(s) numbered 1 through 4.
5. I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

The acts committed by the accused, as listed and hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of the Assembly, or in violation of the statutes cited.

**(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached.)**

(Date)

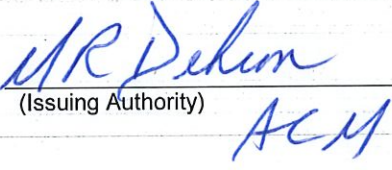
(Year)

  
(Signature of Affiant)

AND NOW, on this date 16 Feb 2021 I certify that the complaint has been properly completed and verified.

An affidavit of probable cause must be completed before a warrant can be issued.

1  
(Magisterial District Court Number)

  
(Issuing Authority)

SEAL



**POLICE CRIMINAL COMPLAINT**

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

**AFFIDAVIT of PROBABLE CAUSE**

Your Affiant, Eric Augenbraun, Badge #604, is a Special Agent with the Pennsylvania Office of Attorney General, Bureau of Criminal Investigations, Medicaid Fraud Control Section, located at 1000 Madison Avenue, Suite 310, Norristown, PA 19403. As such, your Affiant is empowered by law to conduct criminal investigations into violations of various laws of the Commonwealth of Pennsylvania including violations of Title 62 (the Public Welfare Code, Medicaid Fraud), Title 35 (Health and Safety), and Title 18 (Crimes Code).

Your Affiant was assigned to investigate allegations of Medicaid Fraud committed by Dr. Walter F. Wrenn III (hereinafter referred to as "Dr. Wrenn"). On July 6, 2020, the Office of Attorney General initiated an investigation into Dr. Wrenn based on a referral received from Keystone First (hereinafter referred to as "Keystone"). Dr. Wrenn's practice is located at 5139 Chestnut Street, Philadelphia, PA 19139.

Keystone is a managed care organization (hereinafter referred to as "MCO") that contracts with the Pennsylvania Department of Human Services (hereinafter referred to as "DHS") under the HealthChoices Program. The MCO contracts with DHS-enrolled Medical Assistance (hereinafter referred to as "MA") providers and provider entities. The provider/provider entities submit the MA claims to the MCO with whom the MA recipient (patient) is enrolled and then the MCO pays the provider/provider entity for the services. Each MCO is required to submit the claims/encounter data into DHS' Provider Reimbursement and Operations Management Information System (hereinafter referred to as "PROMISe").

OAG agents and analysts assigned to the OAG's MFCS can access PROMISe and DHS' Fraud and Abuse Detection System (hereinafter referred to as "FADS") directly from their desktop computers. Claims for services to MA recipients not enrolled in one of the HealthChoices programs in Pennsylvania are submitted directly to DHS through PROMISe. Your Affiant queried the Pennsylvania Department of State's online professional licensing portal and determined that Dr. Wrenn practices medicine under Pennsylvania license number MD016666E. Your Affiant queried PROMISe for Dr. Wrenn's provider page and determined that Watson is an enrolled provider in the MA program under provider identification number 000688951, that his NPI number is 1114023009, and that he is registered with the DEA authorizing him to order, administer, dispense and prescribe controlled substances in Schedules II through V. Your Affiant determined that Dr. Wrenn is assigned DEA #AW8097936. Dr. Wrenn is a non-participating provider with Keystone. However, payments for prescriptions written by Dr. Wrenn for Keystone participants are processed and paid for by Keystone.

The initial referral from Keystone alleged that Dr. Wrenn was identified as a high prescriber of schedule II through IV medications, particularly benzodiazepines, for which Dr. Wrenn was the top prescriber in Keystone's network. Keystone reported that based on medical records they received from Dr. Wrenn, there were numerous instances of insufficient or discrepant documentation in patient files to justify the prescriptions they were receiving from Dr. Wrenn. Keystone reported that drug screens received from LabCorp for patients of Dr. Wrenn showed numerous inconsistencies. Additionally, Keystone reported concerns that Dr. Wrenn's prescribing contributed to the deaths of at least two Keystone members and resulted in overdose hospitalizations of at least 5 Keystone members.

On July 13, 2020, your Affiant received from the Ridley Park Police Department a police report concerning the death of Dr. Wrenn patient Donna Hayes (hereinafter referred to as "Hayes"). The Ridley Park Police stated that on March 3, 2019 they arrived at 525 E. Chester Pike and discovered that Hayes was deceased.

On July 13, 2020, your Affiant received from the Delaware County Medical Examiner's Office (hereinafter referred to as "ME's Office") a document entitled "Findings of the Medical Examiner." The document concerns the March 3, 2019 death of Dr. Wrenn patient Hayes. The ME's Office examined Hayes's body on March 4, 2019 and a complete autopsy was performed. Chief Medical Examiner Frederic N. Hellman, M.D, found that "On the basis





# POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
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of the facts presently known, I conclude the cause of death was: Mixed drug intoxication (cocaine, oxycodone, morphine)" and listed the manner of death as "Accident."

On July 23, 2020, your Affiant received from the ME's Office a toxicology report conducted on the body of Hayes and completed on March 13, 2019 by Atlantic Diagnostic Laboratories (hereinafter referred to as "ADL") on behalf of the ME's Office. The report indicates positive results for the following drugs found in the blood of Hayes:

- Cocaine = 48.8 ng/mL
- Benzoyllecgonine = 2,230 ng/mL
- Oxycodone = 400 ng/mL
- Noroxycodone = 1,260 ng/mL
- Morphine = 72.8 ng/mL
- Hydromorphone = 23.9 ng/mL
- Alprazolam = 18.1 ng/mL
- Temazepam = 384 ng/mL
- Oxazepam = 13.5 ng/mL
- 7-Amino-Clonazepam = 13.6 ng/mL

Agents and Analysts of the OAG have direct access to the Pennsylvania Prescription Drug Monitoring Program (hereinafter referred to as "PDMP"). The PDMP is a database maintained by the Commonwealth of Pennsylvania into which prescription data for DEA scheduled controlled substances are logged. Pursuant to Pennsylvania Act 191 § 8(a), prescribers are required to query the PDMP system under the following circumstances:

- (1) for each patient the first time the patient is prescribed a controlled substance by the prescriber for purposes of establishing a baseline and a thorough medical record;
- (2) if a prescriber believes or has reason to believe, using sound clinical judgment, that a patient may be abusing or diverting drugs; or
- (3) each time a patient is prescribed an opioid drug product or benzodiazepine by the prescriber.

Your Affiant queried the PDMP system and found that between January 18, 2018 and March 1, 2019, Dr. Wrenn routinely prescribed Hayes the following controlled substances: 60 units Morphine Sulfate Extended Release 60 MG Tablet; 60 units Morphine Sulfate Extended Release 30 MG Tablet; 180 units Oxycodone HCL 20 MG Tablet; 90 units Alprazolam 2 MG Tablet; 30 units Temazepam 30 MG Capsule or 60 units Temazepam 15 MG Capsule. These substances are identified in the toxicology report as being present in large quantities in Hayes's blood at the time of her death. Your Affiant also queried the PDMP system for Schedule II medications received by Hayes for the period of September 13, 2016 through her death on March 3, 2019 and found that Dr. Wrenn alone had been writing Hayes prescriptions for these quantities of Morphine Sulfate and Oxycodone for the full period of time queried.





## POLICE CRIMINAL COMPLAINT

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On November 23, 2020, your Affiant queried the PDMP for a "Patient History" report for Hayes. A "Patient History" report shows the exact date and time a prescriber, dispenser, or an authorized delegate thereof queried the PDMP system for a given patient. For the period of July 27, 2018 through March 1, 2019, neither Dr. Wrenn nor any of his delegates queried the PDMP for Hayes despite Dr. Wrenn writing numerous prescriptions for opioid and benzodiazepine medications to Hayes.

Morphine and Oxycodone are opioid medications, sometimes called narcotics. Morphine and Oxycodone are used to treat pain and for pain management. Opioid levels are measured by the Morphine Milligram Equivalent (MME). On March 15, 2016, the Centers for Disease Control and Prevention (CDC) issued guidelines for prescribing opioids and appropriate MME levels. Specifically, the CDC stated that:

Clinicians should use caution when prescribing opioids at any dosage, but should carefully reassess evidence of individual benefits and risks when considering increasing dosage to  $\geq 50$  morphine milligram equivalents (MME)/day, and should avoid increasing dosage to  $\geq 90$  MME/day or carefully justify a decision to titrate dosage to  $\geq 90$  MME/day.

The combinations of opioids prescribed by Dr. Wrenn to Hayes totaled between 300 and 360 MME/day.

Alprazolam (also sold under brand names Xanax and others) and Temazepam (also sold under the brand name Restoril and others) are Schedule IV controlled substances of the benzodiazepine drug class. Alprazolam is used to treat mental health issues, such as anxiety and panic disorders. Temazepam is used to treat insomnia.

Medical literature, including guidelines from the US Food and Drug Administration (FDA), caution against prescribing an opioid (like Oxycodone) and a benzodiazepine (like Alprazolam) together. The National Institute on Drug Abuse data demonstrates that the risk of overdose significantly increases when benzodiazepines are prescribed with opioids.

Your Affiant determined from the PDMP data that Dr. Wrenn wrote prescriptions for schedule II through V controlled substances to 799 individual patients across all payment types, including Medicaid, Medicare, private insurance, and private pay. Of the 799 patients who received prescriptions for controlled substances from Dr. Wrenn, 587 of them, or 73.6 percent, received prescriptions for benzodiazepines.

Before submitting their initial referral to MFCS, Keystone conducted a review of Dr. Wrenn and his prescribing practices and found that from September 1, 2019 to February 29, 2020, across all plans (Keystone maintains health plans for Medicaid, private insurance and other programs), Dr. Wrenn, with 63,413 benzodiazepines prescribed, was the top benzodiazepine prescriber. Over 80 percent of Keystone MA recipients who received prescriptions from Dr. Wrenn received benzodiazepines. The next closest prescriber was a psychiatrist with 33,876 benzodiazepines prescribed. Dr. Wrenn is an internal medicine practitioner.

In the course of their review, Keystone contacted Dr. Wrenn and requested that he produce his medical files for five MA recipients. Dr. Wrenn provided his electronic medical files for those five patients, which reveal no content pertaining to the patient's chief complaints, explanations of diagnoses, his assessment, or any information other than the patient's vitals, prescription information, and diagnosis codes. The medical records also contain no explanation for why Dr. Wrenn believed controlled substances were medically necessary, let alone why he prescribed several of them at high MME levels. When prescribing controlled substances to a patient, a prescriber must document the medical need for the medication.





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For each of the five patients, Dr. Wrenn completed preauthorization forms so that Keystone would authorize payment for the patient's prescriptions. Dr. Wrenn noted on the preauthorization forms that each of the five patients regularly received drugs screens. However, when Keystone First requested copies of the results of those drug screens, Dr. Wrenn did not provide them for any of the five patients. Keystone then directly contacted LabCorp to request the drug screen results for the five patients.

LabCorp's drug screen results, provided to MFCS by Keystone, show that Dr. Wrenn's patients had a pattern of testing positive for street drugs (such as cocaine). The patients also regularly tested negative for some of the drugs prescribed by Dr. Wrenn. The continued prescribing of controlled substances to an individual who is using street drugs places that individual at a higher risk of overdose or other significant harm. Additionally, the fact that Dr. Wrenn's patients tested negative for some of the prescribed medications indicates that his patients may have been diverting some of their prescribed medication. Under these circumstances, it is expected that a doctor would engage in some degree of mitigation, risk reduction or counseling in the event a patient is taking street drugs in conjunction with prescribed controlled substances or is not taking their prescribed medication. Despite these drug screen results, Dr. Wrenn's medical records contain no evidence that he took any steps to reduce the risk of his patients overdosing.

Your Affiant reviewed Dr. Wrenn's medical records for Hayes provided to MFCS by Keystone. Hayes's file does not contain any notes about Hayes's diagnoses or the need for any of the prescribed medications.

On July 28, 2020, your Affiant received from ADL urine drug screens for Hayes ordered by Dr. Wrenn. The drug screen results reveal that on January 8, 2019, Hayes was positive for street drugs, namely "Amphetamines/Ecstasy". Despite this result, there is no documentation in Dr. Wrenn's file reflecting that he addressed Hayes's use of street drugs or attempted any mitigation to reduce the possibility of her fatally overdosing.

On December 14, 2020, your Affiant received from Keystone "Physician Request Forms for Opioid Containing Products" submitted by Dr. Wrenn to Keystone in order for Hayes to have her opioid prescriptions paid by Keystone. On the form dated January 18, 2018 and signed by Dr. Wrenn requesting Oxycodone 20 mg and Morphine Sulfate 90 mg, Dr. Wrenn lists "Metastatic Lung Cancer" as Hayes's diagnosis. Dr. Wrenn also indicates on the form that he is working in consultation with a pain specialist to manage Hayes's care. On the form dated May 8, 2018 and signed by Dr. Wrenn requesting Oxycodone 20 mg and Morphine Sulfate 60 mg and 30 mg, Dr. Wrenn again lists "Metastatic Lung Cancer" as Hayes's diagnosis. Dr. Wrenn indicates on the form that he is working in consultation with a pain specialist and oncologist to manage Hayes's care. On the form dated June 19, 2018 and signed by Dr. Wrenn requesting Morphine Sulfate 60 mg and 30 mg, Dr. Wrenn lists "Surgery Lumbar" as Hayes's diagnosis and makes no mention of the "Metastatic Lung Cancer" diagnosis from the previous two forms.

On August 18, 2020, your Affiant received from Crozer-Chester Medical Center hospitalization records for Hayes. The records show that on July 25, 2018, Hayes presented at the emergency department of Taylor Hospital with trouble breathing. Hayes was admitted and diagnosed with pneumonia. A full medical history was taken from Hayes and a thorough examination of her lungs was performed, including a chest X-Ray. The record of this hospitalization makes no mention that Hayes was suffering or had previously suffered from metastatic lung cancer, as noted by Dr. Wrenn in the aforementioned opioid prior authorizations.

The records from Crozer-Chester Medical Center show that on January 23, 2019, Hayes again presented at the emergency department of Taylor Hospital via EMS with seizure activity. Hayes's daughter reported that





## POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

when she entered the room, Hayes displayed whole body shaking, abnormal upper and lower extremity movements, eyes rolled back, and foaming at the mouth. Hayes was evaluated and monitored overnight and was diagnosed with a tonic-clonic seizure resulting from benzodiazepine withdrawal. A chest X-Ray was performed on Hayes which was found to be "negative for anything acute." Hayes was discharged on January 24, 2019. Dr. Wrenn's records indicated that Hayes appeared for an appointment on February 4, 2019 and like the records of previous and subsequent visits, Dr. Wrenn's record for this visit contains no content pertaining to the patient's chief complaints, explanations of diagnoses, his assessment, or any information other than the patient's vitals, prescription information, and diagnosis codes. There is no mention in Dr. Wrenn's record of this visit that Hayes was hospitalized for a seizure resulting from benzodiazepine withdrawal twelve days earlier. Dr. Wrenn prescribed Hayes the same combination of opioid and benzodiazepine medications at this visit that he prescribed her on previous and subsequent visits.

On January 4, 2021, your Affiant received from the ME's Office, a "Postmortem Report" detailing the full autopsy performed on Hayes. According to the report, a thorough external and internal examination was performed on Hayes, including of the organs in the thoracic cavity. The report makes no mention of any evidence that Hayes was suffering or had previously suffered from metastatic lung cancer at the time of her death.

On December 14, 2020, SA Augenbraun received an email from Keystone Special Investigations Unit Investigator Andrea Geier in which she stated:

"I see Dr. Wrenn documents lung cancer on the opioid prior auths for D.H. I don't think this member had lung cancer. I checked facility and professional claims, we have nothing with a cancer diagnosis. Hospital records do not note cancer either. If someone has a cancer diagnosis on an opioid prior auth, it pretty much guarantees we approve the opioid request. I believe you will see in my referral the notes about this occurring for our member D.T. as well."

On July 17, 2020, your Affiant interviewed Hayes's daughter, N.H. N.H. stated that Hayes went to Dr. Wrenn to receive her alprazolam, oxycodone and other controlled substances. N.H. further stated that Hayes paid Dr. Wrenn cash for each visit, although Hayes used MA to pay for all other medical procedures or medical services.

According the PDMP report and Medicaid claims data obtained by your Affiant from FADS, on February 14, 2019, Hayes filled a prescription from Dr. Wrenn for 60 units Morphine Sulfate Extended Release 30 MG Tablet. On March 2, 2019, Hayes filled prescriptions for 60 units Morphine Sulfate Extended Release 60 MG Tablet; 180 units Oxycodone HCL 20 MG Tablet; 90 units Alprazolam 2 MG Tablet; and 60 units Temazepam 15 MG Capsule. By the morning of March 3, 2019, Hayes was dead from an overdose.

Your Affiant provided to Dr. David Provenzano, MD (hereinafter referred to as "Dr. Provenzano") all available medical and post-mortem records pertaining to Hayes for review. Dr. Provenzano is an anesthesiologist and an expert in pain management medicine. On January 8, 2021, Dr. Provenzano issued a report detailing his review of the aforementioned records in which he concluded the following:

"[T]he care provided by Dr. Wrenn- was woefully inadequate, in reckless disregard for patient safety and health, medically inappropriate, and did not follow all the aforementioned standards of care. Furthermore, Dr. Wrenn provided excessive doses of opioids without appropriate monitoring, documentation, and incorporation into a multimodal treatment plan. In addition, Dr. Wrenn prescribed medications without appropriate compliance monitoring or interpretation of ordered tests, lack of consideration of drug-to-drug





# POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: / /	OTN/LiveScan Number	Complaint/Incident Number MFI200169304D
Defendant Name:	First: WALTER	Middle: F	Last: WRENN 3

interactions and consideration of the patient's mental health history. The care provided by Dr. Wrenn was outside the norms of care and without legitimate medical purpose. Dr. Wrenn was not practicing in the usual course of professional practice. Furthermore, he did not follow clearly defined standards, nor balance the benefits and risks of prescribing controlled substances including opioids and benzodiazepines. Furthermore, but for this unreasonable and reckless prescribing, the patient would not have overdosed and died on 3/3/2019."

Based on the facts and circumstances uncovered during the course of this investigation, and your Affiant's training and experience investigating Medicaid Fraud and drug diversion, your Affiant believes that Dr. Walter F. Wrenn III has engaged in criminal activity by defrauding the Pennsylvania Department of Human Services' Medical Assistance program and prescribing controlled substances without a medically legitimate purpose. Your Affiant alleges that a number of these prescriptions were paid for by the Medical Assistance program under false pretenses as the result of Dr. Wrenn fabricating diagnoses on prior authorization documents he submitted to Keystone. Finally, your Affiant believes that Dr. Wrenn's prescribing practices resulted in the death of Hayes.

I, SPECIAL AGENT ERIC AUGENBRAUN, BEING DULY SWORN ACCORDING TO THE LAW, DEPOSE AND SAY THAT THE FACTS SET FORTH IN THE FOREGOING AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

I CERTIFY THAT THIS FILING COMPLIES WITH THE PROVISIONS OF THE CASE RECORDS PUBLIC ACCESS POLICY OF THE UNIFIED JUDICIAL SYSTEM OF PENNSYLVANIA THAT REQUIRE FILING CONFIDENTIAL INFORMATION AND DOCUMENTS DIFFERENTLY THAN NON-CONFIDENTIAL INFORMATION AND DOCUMENTS.

(Signature of Affiant)

Sworn to me and subscribed before me this 16 day of

Feb

2021

Date

MR Dehman

, Magisterial District Judge

My commission expires first Monday of January,

7/2024

SEAL