**14-4412. Medicaid fraud; providing fraudulent claim.**

 For you to find the defendant guilty of Medicaid fraud as charged in Count \_\_\_\_, the State must prove to your satisfaction beyond a reasonable doubt each of the following elements of the crime:

 1. The defendant knowingly provided a claim for [treatment, services or goods that were not ordered by a treating physician] [treatment that was substantially inadequate when compared to generally recognized standards within the discipline or industry] [merchandise that was adulterated, debased, mislabeled or outdated]1.

 2. The defendant provided the claim to a state or federally mandated managed health care plan.

 3. The defendant intended the state or federally mandated managed health care plan to rely on the claim for the expenditure of public money.

 4. This happened in New Mexico on or about the \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_.2

USE NOTES

 1. Use only the applicable bracketed elements established by the evidence.

 2. The applicable definition or definitions from UJI 14-4401 NMRA must be given after this instruction.

[Adopted by Supreme Court Order No. 14-8300-005, effective for all cases filed or pending on or after December 31, 2014.]