

TO: Administration, SVH Chelsea  
FROM: Iain Melchizedek, Resident

August 27, 2025

RE: Refusal to Sign VA Form 10-0460

I am returning VA Form 10-0460 unsigned. The document contains factual inaccuracies and omissions that prevent me from authenticating it.

**Factual Record:**

1. I did not request prescription drugs from the VA. The form represents otherwise (false statement within federal jurisdiction, 18 U.S.C. § 1001; false statements in health care matters, 18 U.S.C. § 1035).
2. The form is dated March 11, 2024. On that date, I was not consulted, did not sign, and made no request (backdating or falsifying federal records, 18 U.S.C. § 1519).
3. The form was not presented to me until over a year later, after the date listed (misrepresentation tied to federal health care program, 18 U.S.C. § 1347).
4. Diagnoses listed are outdated, misstated, or inaccurate. I have noted this directly on the form (false statements in health care matters, 18 U.S.C. § 1035).
5. Key fields remain blank, including prescribing physician and telephone number. If signed in this condition, such blanks could be filled in after the fact without my knowledge (falsification of federal records, 18 U.S.C. § 1519).
6. Based on my prior experience, the home does not provide residents with copies of completed forms, further increasing the risk that a document could be altered or falsified after signature (falsification/obstruction of records, 18 U.S.C. § 1519).
7. I already receive all medications through the VA pharmacy. I have no need for the additional benefit described (attempt to defraud a federal health care benefit program, 18 U.S.C. § 1347).

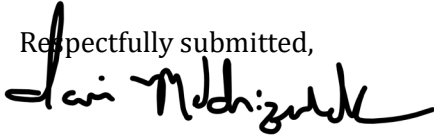
**Regarding Retaliation:**

It would be inappropriate and without legal basis for any retaliation to occur as a result of this refusal. Courts have consistently rejected attempts to punish individuals for declining to participate in fraudulent activity. Asking a resident to sign a document that misrepresents facts for financial gain is inherently improper, and declining to do so is both reasonable and necessary.

All staff and residents are aware of the retaliation tactics sometimes employed by upper administration; however, there is a growing number of people who are no longer willing to accept such conduct as humane or civil. Retaliation against a resident for refusing to participate in fraudulent conduct violates federal protections for nursing home residents (42 U.S.C. § 1395i-3(c)(1)(A)(x)) and whistleblower protections in health care (42 U.S.C. § 1320c-9).

Because of these discrepancies, I cannot sign the document. Doing so would not accurately reflect my medical situation or my actions. The appropriate solution is to maintain this letter with the form so there is a contemporaneous record for anyone who questions why the document was not signed, and to keep it in my file. If the administration has an issue with my refusal to participate in fraudulent behavior, they may contact me directly.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Iain Melchizedek". The signature is written in a cursive, somewhat stylized font.

Iain Melchizedek

CC:

- VA Office of Inspector General
- Massachusetts Department of Public Health – Nursing Home Licensing Division
- Massachusetts Long-Term Care Ombudsman Program
- Office of the Massachusetts Attorney General – Medicaid Fraud Division

**Department of Veterans Affairs** Request for Prescription Drugs from an Eligible Veteran in a State Home

<b>To:</b> <b>VA Facility</b> Boston VA HealthCare System 150 South Huntington Ave Boston, MA 02130	<b>From:</b> <b>Name and Address of State Home</b> SVH Chelsea 91 Crest Ave Chelsea, MA 02150
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I am a veteran who was admitted to the Domiciliary State Nursing Home. I request that I be furnished with prescription drugs by the United States Department of Veterans Affairs as provided for in Title 38 of the Code of Federal Regulations, Section(s) 17.96 and/or 51.42.

I am eligible for this benefit by reason of being (check any of the following):

- (1) a veteran in receipt of increased VA compensation, or increased VA pension because I am permanently housebound or in need of regular aid and attendance.
- (2) a veteran in need of regular aid and attendance who was formerly in receipt of increased pension but whose pension has been discontinued solely by reason of excess income, and whose annual income does not exceed the maximum annual income limitation by more than \$1,000.
- (3) a veteran who
  - (i) Has a singular or combined rating of 50 percent or 60 percent based on one or more service-connected disabilities or unemployability and is in need of such drugs and medicines; and
  - (ii) Is in need of nursing home care for reasons that do not include care for a VA adjudicated service-connected disability.
- (4) a veteran who
  - (i) Has a singular or combined rating of less than 50 percent, based on one or more service-connected disabilities, and is in need of such drugs and medicines for a service-connected disability, and
  - (ii) Is in need of nursing home care for reasons that do not include care for a VA adjudicated service-connected disability.

**REFUSED TO SIGN**

Signature of Veteran Applying for Benefit

03/11/2024  
Date of Application

Today is 8/27/25

**Applicant Information**

Veteran's Name (last, first, and middle initial):

Melchizedek, Iain

Veteran's Social Security Number:

378-02-0017

Date of Admission to the State Nursing Home:

8/30/23

Date that A&A or Housebound was awarded by VA:

(a copy of this award  is or  is not attached with this request)

