

Fraud Prevention Investigation (FPI) Program Overview

Office of Inspector General – Program Integrity Oversight Division

The main purpose of the FPI Program is to maintain integrity in the recipient eligibility process and make sure benefits are provided at the appropriate levels and only to eligible applicants and recipients.

Fraud exists when people willfully or intentionally withhold, conceal, or misrepresent information to receive or attempt to receive more assistance than they are eligible for. CM 0025.24

An Intentional Program Violation (IPV) is any action by an individual which is a willful or intentional false statement, concealment of a fact or a misrepresentation, whether or not it resulted or could have resulted in receipt of additional benefits. CM 0025.24.06.03

The standard disqualification penalties for committing an IPV are:

- 12 months for the 1st offense
- 24 months for the 2nd offense
- Permanently for the 3rd offense
- 10 years for duplicate assistance (receiving benefits from two or more states at one time)

Disqualify Only the person who committed the IPV-7 CFR 273. 16(b)(11)

Referrals

Send an FPI Referral to your Investigator when you receive information from a client that raises eligibility questions that you cannot resolve yourself:

- Inconsistencies in the client’s statements, documents and/or verifications that are submitted
- Client is evasive or too vague in answering questions
- Forms are incomplete on a regular basis
- Documents appeared forged or altered
- For some reason, it appears you are receiving false information or not getting all of the information you need to accurately process the case
- Your experience tells you that something is amiss

FPI Referral Examples

- The client failed to report required income information or provided false income information.
- The client didn't report a marriage.
- The client didn't report the addition of the absent parent to the household.
- The client falsely reported children in the household who actually physically reside elsewhere.
- The client forged a Medical Opinion Form (MOF), Employment Verification Form (EVF), etc.
- The client failed to report accurate income and household tax status for Medical Assistance (MA).

Tips to Ensure a Successful Investigation

- **Ask open-ended questions** and don't be afraid to ask follow up questions. If you aren't receiving completed answers, ask questions until the response makes sense
- **Review the previous application** to note any differences between the current and past applications and renewals so you can follow-up and weed out any potential discrepancies
- **Don't hesitate to make a referral** if something just doesn't seem right
- **Allow the investigator to take on the responsibility** of validating the client's circumstances to determine if a fraud or an IPV were committed, if the recipient was simply confused, or completely truthful.

By collaborating with your fraud investigator, you can help prevent and detect fraud, waste and abuse ensure that benefits are administered to those who are truly in need.

Questions

Direct all general questions regarding the FPI Program and/or Recipient Fraud to:

RecipientInvestigations.oig.dhs@state.mn.us

DHS Fraud Hotline

DHS Fraud Hotline Website: <https://mn.gov/dhs/general-public/office-of-inspector-general/report-fraud/>

DHS Fraud Hotline: 651-431-3968