

**County of San Diego, Health and Human Services Agency (HHSA)
Policy and Procedure Guide**

**Fraud Referral for Quality & Eligibility Support Department (QESD) staff
Policy and Procedures**

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Revision Date:

05/02/2019

Purpose:

The purpose of this document is to establish fraud referral procedures for QESD.

This material has been revised to remove obsolete policies and procedures.

Background:

Fraud referrals are generated via the fraud referral tracking system when there is reason to suspect that fraud exists or has been attempted.

Policy:

QESD Human Services Specialists (HSSs) are required to identify cases in which fraud is suspected and generate referrals to Bureau of Public Assistance Investigations (BPAI). All referrals must be made within 5 business days of discovery. There are 2 separate referral types QESD HSSs will generate:

1. Integrated Fraud Detection (IFD) non-cooperative fraud referrals will be generated when the following conditions exist:
 - Customer has been determined to be non-cooperative thru the IFD process; and
 - Customer has an active CalWORKs (CW) and/or CalFresh (CF) case.
2. Potential prosecution fraud referral will be generated as defined in:
 - CalWORKs Program Guide (CPG) 20-000.C.3 – 7 and 20-000.D
 - CalFresh Program Guide (CFPG) 63-453.4 and 63-704.3 – 4

NOTE: If a prosecution fraud referral was completed, do not refer case to Appeals for an Administrative Disqualification Hearing (ADH).

The HSS must track and close referrals generated in the tracking system as soon as possible and no more than 30 days of receipt of the completed investigation report.

Rejected fraud referrals will need to be managed as follows:

The HSS will check the fraud referral every 2 weeks from the date the referral was made to ensure that the referral was not rejected. The rejection of a referral by BPAI will not be the end of the process if the need for an investigation still exists. The response from BPAI will indicate the reason for rejecting the referral. The HSS has the responsibility to promptly follow-up on the rejection and either immediately initiate a new referral, if applicable, in the tracking system or review for an ADH referral.

Procedure:

IFD fraud referrals will be made by generating a full field fraud referral in the tracking system. Potential prosecution fraud referrals will be made by following the instructions provided on the Prosecution Referral Desk Aid.

Fraud referral responses are received via inter-county mail and will be handled as outlined below: Fraud referral responses that were generated for IFD non-cooperative customers come back as a collection only case and will be returned to the referring staff member.

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Fraud referral responses that were generated for potential prosecution may come back to QESD as either a collection only or a prosecution case. The referral responses from QESD will be returned to the referring staff member. The assignment of referrals from all other sources will be distributed equally amongst all QESD staff.

Upon the receipt of a fraud referral response for a collection only or a prosecution case, staff must:

Step	Action
1	Take appropriate case action as necessary, including re-computing the CalWORKs, CalFresh, and Medi-Cal overpayment/overissuance (OP/OI), based on the fraud referral findings.
2	Complete a potential Medi-Cal overpayment evaluation as outlined in the Medi-Cal Potential Overpayment Evaluation for QESD Staff Policy and Procedures Guide, if necessary.
3	Submit the updated fraud referral packet to the Supervisor for review.
4	Authorized packets will be submitted for uploading into CERMS and original documents will be sent to BPAI.
5	Update the fraud referral tracking system with the worker response.

References:

CPG 20-000.A, 20-000.C.3-7, 20-000.D
CFPG 63-451.4, 63-453.4, 63-704.3-5
MPP 20-003.1, 20-004.1

Sunset Date:

This policy will be reviewed for continuance by 03/31/2022

Approval for Release:



Rick Wanne, Director
Eligibility Operations