

County of San Diego, Health and Human Services Agency (HHS)
CalFresh Program Guide

Fraud Referrals

Number

63-704

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Date:

04/01/2021

Background:

Fraud referrals are submitted to the Bureau of Public Assistance Investigation (BPAI) Unit when there are unresolved allegations of fraud. This section is being revised due to the removal of the P-100 program.

Purpose:

This section details the fraud policy in the CalFresh program.

Policy:

Fraud exists when an applicant or recipient knowingly with the intent to deceive or defraud makes a false statement or fails to disclose information for the purpose of obtaining or maintaining CalFresh benefits. A request for investigation will be made when there is an allegation of fraud, questionable information cannot be resolved or there are reasonable grounds to suspect that a crime has occurred. Below is a list of possible fraud indicators:

- Questionable residency
- Suspected duplicate aid
- Questionable household composition
- Unreported income
- Expenses exceeding income
- Submitted documentation appears to have been altered
- An Overissuance (OI) that may have occurred due to failure to report
- Customer's failure to cooperate with providing questionable information
- Situations involving embezzlement, trafficking or other general program violations
- Fraud allegations received from other government agencies
- Public complaint containing facts which allege a crime of fraud, perjury, trafficking, or embezzlement against a public agency

1. Resolving Fraud Discrepancies

Staff must use all available sources, such as the Income Eligibility and Verification System (IEVS), Medi-Cal Eligibility Data Systems (MEDS) and The Work Number (TWN) to explore and resolve any unclear and incomplete information. When unable to clarify a discrepancy, the customer must be contacted to clarify questionable information affecting eligibility. Staff must assist the customer in providing the requested information. Staff must assess and determine if the customer is experiencing other circumstances that may prevent them from providing necessary information. Researching the facts and other information will help indicate if there is a suspicion of fraud or if there was simply a misunderstanding, or a mistake made. Circumstances preventing a customer from providing information may include, but is not limited to:

- Physical, emotional, educational barriers
- Language barriers
- Experiencing domestic violence issues
- Not understanding reporting responsibilities and Income Reporting Threshold (IRT)
- Not being aware of what constitutes fraud

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It is also important to verify if customers were made aware of reporting responsibilities and how to report income; offered interpreter services and/or reasonable accommodations; educate on what fraud is and what the consequences are for committing fraud. Case Comments must include why the information is considered questionable.

2. Fraud Referrals

When unable to resolve the discrepant information, a referral must be made for investigation. Submit documents, or conditions that may have affected the customers ability to provide the necessary information along with the facts constituting reasonable grounds for a fraud referral. Issuance of Expedited Service (ES) must not be delayed pending the completion of an investigation. Benefits should not be discontinued or denied unless the findings from an investigation result in a change in eligibility. A referral for applicants will be made immediately and prior to granting of benefits. A referral for recipients will be made within 5 working days.

3. Early Fraud Prevention Referral

Early fraud referrals are done during the application process. The purpose is to determine whether the applicant is ineligible prior to benefits being issued. To meet the criteria for early fraud referral, one of the following must be met:

- The application date must be within 90 days or less
- An allegation is derived directly from the recertification process
- Application for new funds is made within 90 days, such as applying for CalFresh on an existing CalWORKs case
- The case is a General Relief (GR) case
- An incoming Electronic Inter-County (eICT) application is received, and the referral is made within 90 days from the date the eICT is received

Note: Homeless CalFresh applicants must not be referred to BPAI for the purpose of verifying residency.

4. Full Field Referral

Full field referrals are done for all applicants and recipients whose applications do not meet the criteria for early fraud referral.

5. Investigation Finding Received

Upon receipt of finding from the investigator, the eligibility and benefit amount determination must be based on the investigator's finding, information provided by the customer and existing CalFresh regulations. When it is determined that fraud exists, timely action must be taken to deny, reduce or terminate benefits. When this negative action results in an overissuance, the overissuance must be processed in accordance with CFPG 63-451.

References:

MPP 20-001; MPP 11-501.1; ACL 13-89; ACWDL 05/01/2019

Sunset Date:

This policy will be reviewed for continuance by 04/31/2024.

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Approval for Release:

Handwritten signature in blue ink that reads "Rick Wanne, 4-28-21".

RICK WANNE, Director
Self-Sufficiency Services