Fraud Prevention and Investigation Program Guidelines

Developed in collaboration with state and local partners Effective January 1, 2026



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Introduction

The Wisconsin Department of Health Services (DHS) is authorized under Wis. Stat. § 49.845 to:

- Establish a program to investigate suspected fraud by members in programs administered by DHS, such as Wisconsin Medicaid (MA), BadgerCare Plus (BC+), and FoodShare (FS).
- Conduct activities to reduce payment errors to members.
- Refer suspected fraud cases to the appropriate county district attorney's office for possible prosecution.

The U.S. Department of Agriculture (USDA) Food and Nutrition Services (FNS) works closely with state agencies to minimize benefit errors and improve the integrity of the Supplemental Nutrition Assistance Program (SNAP), which is called FS in Wisconsin. States are required to maintain corrective action plans and calculate over issuances in accordance with federal and state rules and regulations as outlined in FoodShare Handbook Chapter 7.1.3.

In Wisconsin, Fraud Prevention and Investigation Program (FPIP) Guidelines are developed annually as part of state and local planning efforts to prevent and investigate suspected fraud effecting member benefits. Planning process participants consider:

- Public assistance fraud program practices, results, and desired outcomes.
- Federal and state rules and regulations, including any imposed restrictions.
- Practical limitations related to funding and organizational arrangements.
- Best practices from other states.

FPIP Guidelines serve as procedures for state and local partners and emphasize:

- Enhancing program integrity and reducing payment errors through fraud prevention, monitoring, and training.
- Addressing instances of fraud quickly through mitigation and containment to prevent ongoing fraud.
- Pursuing FS administrative sanctions and criminal referrals depending on the facts of the case.
- Aiming for cost neutral solutions to help ensure total administrative costs do not exceed total program savings.
- Allowing IM/FPIP consortiums and tribal agencies to designate agency staff, contracted staff, law
 enforcement, or any combination of them to most effectively serve as the Fraud Investigation
 Specialist and other FPIP staff. DHS Office of Inspector General (OIG) also offers assistance with
 investigations upon request.
- Monthly monitoring of FPIP performance by DHS, focusing on the cost savings ratio and the number and timeliness of completed investigations.

To ensure timely and accurate data, IM/FPIP consortiums and tribal agencies are responsible for entering all fraud investigation activities and data into the Client Assistance for Re-employment and Economic Support (CARES) System, Benefit Recovery Investigation Tracking System (BRITS), and any other designated investigation tracking system approved by DHS.

Wisconsin's FPIP goals support:

- Increasing confidence in the administration of public assistance programs.
- Increasing member education on program integrity efforts.
- Increasing member compliance with voluntary reporting requirements to deter fraudulent activity.
- Identifying program enhancements, including policy, system, and legislative changes.
- Utilizing statistical data to monitor program cost savings and assure cost neutrality.

- Enhancing education, awareness, and trainings for IM/FPIP consortiums and tribal agencies on fraud, waste, and abuse trends and how to effectively address concerns.
- Increasing IM eligibility worker awareness of suspected fraud through regular trainings.
- Increasing emphasis on the accuracy of case file information, eligibility determinations to lower error rates, and establishing claims and disqualifications for intentional program violations (IPVs).
- Assuring all IM/FPIP consortiums and tribal agencies can access fraud prevention and investigation services, and all applicants and members are subject to the same level of investigative scrutiny.

Section I. Funding and Reimbursement

FPIP Program Funding

DHS has earmarked \$3 million dollars (all funds) in calendar year (CY) 2026 to support statewide fraud prevention and investigation activities in the MA, BC+, and FS programs for all FPIP agencies, except Milwaukee Enrollment Services (MilES). Funding will be used to facilitate the FPIP Consortium model across the state, under which one agency within each consortium will assume the lead administrative role. DHS will allocate funding amounts based on each agency's percentage of the statewide IM caseload, excluding MilES. According to DHS policies regarding consultation with tribes, tribal agencies are the only agencies with the option to operate their FPIP independently and still receive their FPIP allocation.

FPIP Plan

In order for DHS to secure federal funding and support consistent program administration, local agencies must structure FPIP operations based on the staffing and procedural requirements in these guidelines. Upon request by DHS, agencies must provide or update FPIP plans using the current Administrator's Memo or IM contract. Once approved, FPIP plans serve as the legal basis for DHS approval and funding agency FPIP operations. DHS also may request additional information on local agency fraud prevention and investigation operations, such as:

- FPIP staff position descriptions.
- An organizational chart identifying the structure and reporting relationships of FPIP staff within the agency.
- Copies of all contractual agreements with providers of investigation and prosecution services.

Reimbursement of Agency Expenditures

Agencies will be reimbursed for FPIP costs using the DHS Grant Enrollment, Application, and Reporting System (GEARS). FPIP administration is a cost component of the agency's contract-controlled allocation. Agencies are strictly prohibited from using FPIP funding for non-FPIP activities or expenses.

Additional Federal Match

If agencies contribute additional non-IM funding to FPIP, all allowable costs within the total local contribution will be eliqible for federal match.

Section II. Staffing and Duties

Eligibility Worker and FPIP Staff Distinctions

There must be a clear distinction between the duties of the agency's eligibility worker and the FPIP staff. Cases referred for investigation under FPIP Guidelines need to be investigated by trained staff who are knowledgeable in investigative procedures and basic program eligibility rules.

Investigative Work Hours

Agencies must not restrict investigative work hours. Due to the nature of the role, investigators must have flexibility to schedule their time as necessary in order to contact members and other parties who are not available during traditional work hours.

Approved Position Types

FPIP staff should hold an appropriate position title, such as fraud investigator, fraud prevention specialist, eligibility investigator (income maintenance eligibility worker), or investigator. FPIP staff are encouraged to maintain related certifications, such as Certified Welfare Fraud Investigator (CWFI), Certified Fraud Examiner (CFE), or Certified Inspector General Investigator (CIGI). Included in the job description must be tasks directly related to the investigation of potentially fraudulent public assistance eligibility information. Currently, the following positions meet the staffing requirements based on FPIP Guidelines:

- County civil service employee assigned to perform FPIP functions.
- Law Enforcement Officers* employed by the Wisconsin State Patrol, county sheriff or city police department. A contract is required between the agency and the law enforcement office in order to secure FPIP funding.
- Criminal Investigators* assigned to a county's office of the district attorney or corporate counsel. A contract is required between the agency and the investigative office to secure FPIP funding.
- Private Investigators* who are licensed under Wis. Stat. § <u>440.26</u>. A contract is required between the agency and the private investigation agency to secure FPIP funding.
- * In all FPIP service contracts, the agency is responsible for maintaining and enforcing contractual provisions and the contracted investigator functions on behalf of the agency while conducting FPIP investigations.

Primary Duties of Approved Positions

FPIP funded positions are responsible for conducting timely and thorough investigations upon receipt of a referral. The following primary duties are consistent with FPIP goals and objectives:

- 1. Provide fraud prevention and detection training to county and tribal IM supervisors and eligibility workers to help identify cases for referral.
- 2. Serve as the agency's gatekeeper in reviewing referrals for appropriateness and priority.
- 3. Conduct all investigations in accordance with program policy, individualized certification standards, and best practice standards.
- 4. Document all aspects of the investigation in an investigation summary report.
- 5. Coordinate the agency's Administrative Disqualification Hearing (ADH) process, including ensuring referrals are addressed and accurately tracked in BRITS.

Additional Duties of Approved Positions

During limited periods of time, it may be necessary for fraud prevention investigators to undertake other duties to sustain a productive level of effort. The following temporary, secondary tasks are consistent with FPIP goals and objectives:

- 1. Pursue additional member program disqualifications through the ADH process when investigative findings identify an IPV.
- 2. Undertake case file desk reviews and audits for quality assurance.
- 3. Coordinate adjudication of FPIP cases referred to the criminal justice system.
- 4. Compile and track data for FPIP reports.
- 5. Assist DHS staff with special projects related to program integrity, fraud prevention, and error reduction goals. For example, collaborate with OIG on replacing stolen FS benefits by assisting members with processing their requests.
- 6. Address referrals from OIG when the investigative threshold for state intervention is not met.

Responsibility of Investigators to Provide Training

FPIP staff must provide regular fraud prevention and detection training to county and tribal eligibility workers and supervisors on the FPIP process to ensure FS program integrity. Newly hired eligibility workers must be given training on FPIP policies and procedures as soon as practical. In addition, investigators must monitor and evaluate fraud referral rates from local agencies and IM workers to help determine training needs.

Program Integrity Trainings (Subject to Change)

OIG provides a variety of fraud trainings for IM workers, partners, and contractors. Highlights include:

- Trafficking/Misuse Investigations
- FS Overpayment and Calculator Tool
- FS IPV and ADH Process
- ebtEDGE and Internet Search Tools for Investigations
- State Law Enforcement Bureau Investigations (SLEB)
- Consolidated Lead Evaluation and Reporting (CLEAR) system, which is mandatory for FPIP staff and must be completed within six months of hire and before using the system.

Section III. Referral and Reporting Procedures

FPIP Staff Review of Referrals

Eligibility workers must promptly create fraud referrals to alert FPIP staff, avoid unnecessary investigation delays, and complete investigations in a timely manner. It is the responsibility of FPIP staff to ensure referrals are valid. In addition, FPIP staff must ensure eligibility workers are not restricted from making fraud referrals or from taking case actions resulting from investigative findings.

Referral Standards and Process

FPIP staff should encourage eligibility workers to make a referral for investigation when eligibility factors in an application or open and ongoing case exhibit characteristics of possible fraud. Upon receiving any verbal or written information for use in assigning a referral for investigation, FPIP staff must promptly enter the data in BRITS or any other investigative tracking system approved by DHS to initiate and track the referral. A referral does not need to be created if the eligibility worker can resolve the issue based on the case file information and there are no cost savings to track or overpayment or suspected fraud to pursue.

Initiating a referral does not require absolute certainty of fraud. Referrals should be made when the information obtained appears to include misrepresentation, concealment, or withholding of facts for benefit eligibility and maintenance purposes, including circumstances which may lead to benefit increases or the preventing of reductions in benefit amounts. Referrals also should be initiated for allegations of benefit trafficking or misuse. Fraud referrals should be coded as Front-End Verification (FEV)/Pre-Certification or Post-Certification under the following conditions:

- **FEV/Pre-Certification**: For use when eligibility for current program benefits is questionable during the application or recertification process; prior to benefit issuance.
- **Post-Certification:** For use when open and closed cases involving historical overpayment issues do not impact current eligibility; post benefit issuance.

Referrals must be completed using investigation tracking systems approved by DHS. Currently, BRITS is used to support FPIP procedural and statistical reporting requirements. Refer to the <u>BRITS User Guide</u> for instructions on entering FPIP data.

Inappropriate Referrals

FPIP staff should not perform routine applicant eligibility verifications. This means eligibility workers are responsible for attempting to resolve routine verification process issues, such as sending an automated CARES form or manual form to the information source for wage and new hire matches involving potential historical overpayments.

FEV/Pre-Certification referrals should only be made if routine procedures do not provide the necessary verification. Post-Certification referrals should be made if the information present indicates the member may have misrepresented, concealed, or withheld information to obtain benefits or if there is an allegation of trafficking or misuse. Eligibility workers may determine a fraud referral is the most effective resolution in certain situations, like when household composition eligibility factors require a field visit. When making fraud referrals, eligibility workers must clearly document eligibility issues using the comment section in BRITS or other DHS approved investigative tracking system.

Handling Internal Program Integrity Issues

Agencies must report to OIG all potential risks of internal fraud by IM workers, FPIP staff or other associated employees, within one business day. Examples of potential fraud exist when a CARES user accesses or takes action on a case without an identified business need, breaches member information, or colludes with applicants or members to commit fraud. To avoid possible conflicts of interest related to the investigation of agency employees, agencies should refer these cases to OIG for full investigation. Agencies are allowed to complete a preliminary investigation to determine if they have enough evidence to pursue a full investigation. Agencies may take personnel related actions. Agencies may assist another county within their consortium to complete the investigation, to avoid conflict of interest. Results of the investigation MUST be communicated to the OIG, prior to any administrative action taken. If OIG completes the investigation, , OIG will forward the investigative findings to the referring agency as appropriate. Agencies must immediately notify OIG of actions taken against employees related to member accounts or state system violations. OIG is required to notify USDA FNS of such actions taken against employees within 10 days. Agencies send employee referrals to OIG's Investigation and Technical Assistance Unit Supervisor Tami Berg at 608-266-0930 or Tami.Berg@dhs.wisconsin.gov.

Reporting Investigative Findings to the Eligibility Worker

Current guidance instructs FPIP staff to prepare an investigative findings summary and complete all appropriate fields in BRITS upon the conclusion of an investigation. Content included in BRITS investigative fields must verify the investigation was completed and offer a concise summary of any discrepancies discovered, including trafficking and misuse as defined under federal and state rules and regulations. Discrepancies are defined as a departure from case file information, resulting from misrepresentations and omissions on the application, redetermination, or change report form. All discrepancies should be recorded on the case whether or not they result in changes in eligibility or benefit levels. BRITS must include the investigation completion date, which is the same date the findings summary is sent to the eligibility worker or other staff designated by the agency.

Time Requirements for Investigations

Timely completion of fraud investigations is necessary to minimize the impact of all eligibility determinations and to protect program benefits through cost savings incurred by substantiated termination, denial, or reduction of program benefits. Investigations are encouraged to be completed within 30 days with the understanding additional time may be necessary due to the complexity of the case.

Prioritizing Investigations

FPIP staff should prioritize referrals as a matter of workload management and to ensure timely eligibility determinations in every program. After determining a FPIP investigation is warranted, prioritization should be made on a case-by-case basis using case size, case complexity, and projected time needed to complete the investigation as considerations. The following hierarchy may be appropriate for determining the priority of investigations by case status, leading with the first and highest priority focused on prevention:

- **First Priority:** FEV/Pre-Certification referrals of new applications or potential trafficking and misuse.
- **Second Priority:** Post-Certification referrals with emphasis on cases undergoing recertification.
- Third Priority: Referrals of open cases with no pending application or recertification eligibility actions.
- Fourth Priority: Referrals of closed cases.

If a referral is out of scope of FPIP, the case should be referred to the appropriate party and noted in BRITS.

Companion Case Benefit Terminations

Possible benefit terminations and reductions may occur in companion cases during an investigation, which may not be the original referring worker's responsibility. In these situations, FPIP staff must complete new referrals for companion cases in BRITS or other investigation tracking systems approved by DHS to notify the correct agency.

Case Actions Based on Investigative Findings

FPIP staff must identify if any administrative action should be taken after completing investigations, such as recovering overpayments, adjusting benefits through reduction, denial, or termination, and initiating IPVs. Case actions must be applied as appropriate according to MA, BC+, and FS policy. FPIP staff is responsible for entering case actions in BRITS or other investigative tracking systems approved by DHS.

Timely Recovery of Overpayments

7 C.F.R. § 273.18(d)(1) states a State Agency must establish a claim before the last day of the quarter following the quarter in which the overpayment or trafficking incident was discovered and will ensure that no less than 90 percent of all claim referrals are either established or disposed of according to this time frame.

County and tribal IM agencies must coordinate with law enforcement on criminal referrals to confirm if the recovery, case benefit adjustment, or termination should be pending during their investigation. Agencies must cooperate with the county district attorney in public assistance fraud investigations and prosecutions under Wis. Stat. § 49.845, including delaying implementation of administrative actions based on a written request from the prosecuting agency.

Overpayments and Prosecution

MA and BC+ overpayments should be investigated to verify case information and determine if a criminal referral is warranted, whether or not an overpayment can be established. Identified cases of potential Medicaid fraud should be investigated and referred for criminal prosecution as appropriate.

FS IPVs are defined under <u>7 C.F.R. § 273.16(c)</u> as intentionally making false or misleading statements, or misrepresenting, concealing or withholding facts; or committing any act that constitutes a violation of SNAP, SNAP regulations, or any state statute for the purpose of using, presenting, transferring, acquiring, receiving, possessing, or trafficking of SNAP benefits or cards.

Eligibility information may be revealed to FPIP staff during FS investigations, which may be used to help assess possible overpayments and lead to the discovery of potential IPVs. Decisions to pursue IPVs must be made by more than one county or tribal IM agency staff person before establishing IPVs in BRITS or on the CARES Worker Web (CWW) FS IPV Sanctions page. Currently, some agencies choose to have staff discuss IPV decisions with a supervisor and others assign a group to listen to all cases and make decisions. Review FoodShare Handbook Chapter 3.14.1 Intentional Program Violation (IPV) Disqualification for details.

Privacy Classifications and Retention of Data

Proposed actions to deny, terminate, or reduce benefits must be based on information contained in the member's public assistance case file. Under <u>7 C.F.R. § 273.2(f)(6)</u> for SNAP, FS documentation must be maintained in the case file to support eligibility, ineligibility, and benefit level determinations. Therefore, the agency must maintain all documentary evidence supporting conclusions and recommendations in the Summary of Findings in the member's electronic case file (ECF).

The agency also must maintain a separate fraud file for investigation materials, like notes, documentary evidence, travel mileage details, and telephone and in-person interview contact logs, which should be kept confidential during an active investigation or while administrative or criminal processes are pending. File contents are only disclosed pursuant to discovery requests in administrative or criminal hearings. In addition, agencies use the file to document and justify the investigator's work performance for reimbursement of FPIP administrative costs. Any requests from a member, government agency, or other entity to access the investigative file and/or public assistance information should be treated as an open records request and reviewed according to agency policy. FPIP staff are encouraged to contact their legal counsel for guidance on processing these requests.

Section IV. Investigations

Requirements and Recommendations for Conducting Investigations

FPIP Guidelines represent DHS's statutory responsibility under Wis. Stat. § 49.845(1) to establish a program to investigate suspected fraudulent activities. FPIP administrative agencies are responsible for direct supervision of investigative staff and for ensuring investigative techniques comply with federal, state, and county rules and regulations.

Privacy Practices

DHS requires all public assistance member investigations to comply with bill of rights provisions and limitations on giving information under Wis. Stat. §§ 49.81 and 49.83.

Investigative Databases

FPIP staff has direct or indirect access to several online databases for determining the accuracy of public assistance program eligibility information, including data exchanges with a variety of sources, including federal agencies, various Wisconsin state agencies, private agencies, and agencies from other states. See Process Help Chapter 44.2 Accessing Data Exchanges for a complete list. Resources include:

CARES Data Exchange (Refer to Process Help Chapter 44 Data Exchange for instructions)

- Department of Workforce Development Division of Unemployment Insurance provides current and historical employment, earnings information, and unemployment compensation
- Electronic Disqualified Recipient System (eDRS) is a national database of disqualified SNAP recipients due to IPVs
- Social Security data
- The Wisconsin Child Support Program

Other Resources

- Department of Transportation Division of Motor Vehicles provides current and historical addresses, vehicle ownership, registration, and lien information
- TransUnion Credit Bureau: Provides credit histories
- Wisconsin Consolidated Court Automation Programs (CCAP)
- County Assessor: Provides property data
- ForwardHealth interChange
- EBT Card Vendor tools within ebtEDGE, including ebtINSIGHT, Fraud Tools, and Fraud Navigator.

FPIP staff should use discretion when exercising their authority to conduct investigations to ensure legally sound investigative and evidentiary procedures are followed. During the course of investigations, FPIP staff should attempt to make contact and interview members. Investigators may decide whether to conduct the interview at the beginning, during, or end of the investigation. As investigations conclude, FPIP staff should always attempt to contact members who were not previously contacted to discuss findings and any additional steps to be taken by the agency.

Do not conduct an interview of a minor child without the consent and presence of a parent or guardian. FPIP staff should perform investigative interviews in a courteous and professional manner, utilizing sound investigative and interviewing skills. Investigators must identify themselves by their position title and agency affiliation at the beginning of any interview with a member or third party where personal information is being gathered. Investigators also must attempt to verify the identity of the person being interviewed and document either through audio or transcription the meeting in its entirety. See interview tips below:

- Complete full investigation and prepare guestions prior to meeting.
- Send confirmation letter via mail (and e-mail, and text, if possible) with date, time and number to contact you to reschedule if needed.
- Request interviewees bring a form of photo identification.
- Call or text the meeting date a week prior to confirm interview.
- Record the interview (phone, recorder, laptop, Microsoft Teams, Genesys, etc.).
- Prepare to present all evidence relevant to the investigation, if appropriate.
- Make a conscious effort to challenge personal bias. FPIP staff should complete "Unconscious Bias: An Introduction" training in Cornerstone.
- Establish rapport. Explain purpose of interview.
- Use clear and specific language during the interview.
- Ask for a signed personal statement.
- Prepare an incident report to summarize or transcribe the interview within 24 hours of meeting.

Suggestions for Confirming Information

The language on an individual's application or member's recertification form includes an authorization for release of information. The intent of this release is to expedite the verification of information for eligibility determinations. The eligibility worker should provide a copy of the authorization for release of information to FPIP staff to ensure its readily available for use during field investigation activities. Refer to the suggestions below to help confirmation of investigation information:

- Confirm the member's identity and residence by viewing photo identification (ID), if available. Document the type of ID used in the interview summary.
- Confirm the names and ages of the children residing in the member's household. Obtain daycare records, school records, child support data, and other relevant details to verify living arrangements.
- Confirm name, age, and relationship to member of any other persons living in the home.
- Confirm the actual amount of rent paid and who pays for utilities.
- Confirm whether the member receives a housing subsidy and list the amount if applicable.
- Confirm who actually rents the dwelling and who is listed as an occupant.
- Ask about employment for the member and anyone else residing in the home. Confirm the employer's name, when employment began, the number of hours worked each week, as well as the pay rate for each employed individual.
- Confirm ownership, value, taxes, and physical description of property through property tax records.
- If the member owns a multiple family dwelling, use online search methods to determine how many

units are present in the building. As necessary, interview tenants to confirm rent amounts and if they pay their own utilities.

• Contact third party sources to substantiate statements from members.

Investigator Safety

FPIP administrative agencies are responsible for ensuring the safety of their investigators. Above all, investigators must protect their personal safety and remove themselves from any threatening or confrontational situations. DHS recommends FPIP staff carry a cellular phone for emergency use. It is advisable for investigators to update their electronic calendars with information about locations in the field that they intend to visit.

DHS recommends FPIP staff thoroughly research where they will be traveling to verify the safety of a specific neighborhood and address before conducting surveillance or making home visits. Law enforcement may be contacted to assist with this information, according to the local law enforcement's policy. Law enforcement should be notified if investigators are concerned about their safety and if assistance may be needed during an upcoming visit in the jurisdiction. Occasionally, it may be necessary to have another investigator or law enforcement officer accompany the investigator to the interview site for safety or to serve as a witness. In the event the area is not deemed safe, FPIP staff may also conduct phone or office-based interviews.

Contracted Investigation Services Requirements

Commercial agencies which contract with counties or tribes to provide fraud prevention investigative services are subject to private detective requirements under Wis. Stat. § <u>440.26</u> and Wis. Admin. Code §§§§§ SPS <u>30</u>, <u>31</u>, <u>32</u>, <u>33</u>, <u>34</u>, and <u>35</u>. These requirements apply to private individuals, including former law enforcement officers, but do not apply to off duty law enforcement officers or public officers performing official duties, including law enforcement officers.

Section V. Performance Evaluation

Purpose and Means of Evaluation

An important condition for maintaining FPIP funding is ensuring the program is cost-effective and administrative costs do not exceed the benefit returned to taxpayers. DHS will compile and review statewide FPIP data and individual agency performance reports to evaluate cost-effectiveness, establish baseline standards, and validate the benefit of continued FPIP funding.

DHS will evaluate cost-effectiveness and performance by measuring the cost-benefit, as well as the timeliness of completed investigations and resolution of public assistance eligibility issues. While statewide cost effectiveness determines if goals were met, the measure is based on individual agency and investigator efforts. Therefore, the performance of each FPIP agency and consortium will be assessed at least annually based on program standards, expectations, and the cost-benefit ratio.

While DHS recognizes FPIP produces many tangible and intangible benefits beyond cost-effectiveness, primary evaluation tools must reflect readily measurable costs and benefits. This does not minimize or overlook other non-monetary, beneficial aspects of FPIP.

Cost-Benefit Ratio Performance Standard

Purpose

The primary purpose of the FPIP is to prevent, identify, and investigate fraud in public assistance benefits. The FPIP aims to complete this mission in the most cost-effective way. DHS will measure the cost effectiveness of FPIP agencies and consortiums by monitoring and comparing how much it costs to produce the reported results.

Methodology

DHS will calculate the performance of each FPIP agency and consortium by dividing benefit savings by program costs. DHS will then determine the statewide FPIP cost-benefit ratio using administrative costs and the areas of reported results:

- Benefit savings from case denials, reductions, and terminations.
- Established overpayments or claims.
- Program disqualifications upheld through ADH decisions.

Benchmark Performance Measure

A \$5.00 cost-benefit ratio is the benchmark expectation for basic cost-effectiveness. OIG will consult with FPIP authorities if the benchmark drops below expectations.

Other Indicators

DHS tracks numerous statistics and measurements to evaluate performance. These measures all have significance in some context and may be used as needed to demonstrate program strength and areas for possible improvement. Some FPIP agencies or consortiums may be asked why their performance numbers are significantly above or below statewide averages in particular areas. In cases of above average performance, DHS may share the information with other agencies to establish additional best practices as applicable.

Program Compliance

DHS has statutory authority to require program compliance with the procedural guidelines and standards established for the purpose of evaluating cost-neutrality of FPIP agency operations.

Determining Non-Compliance

A basis for cause to issue notice of non-compliance may be identified through several means, such as regular FPIP activity reports, operation reviews, or other reports generated by DHS. DHS will provide FPIP agencies with written notice of non-compliance and an opportunity to improve their program performance before corrective actions are imposed. DHS has identified two reasons for issuing notice of non-compliance for cause:

- Failure to meet the overall cost-benefit ratio.
- Failure to comply with statutes, policies, or the FPIP Plan, Grant Agreement, and Guidelines.

Remedying Non-Compliance

Once a basis for cause to issue notice of non-compliance has been identified, DHS will seek agency compliance through the multi-step process outlined below:

- DHS will send a notification letter to the agency outlining the area of potential non-compliance and allow the agency to dispute the non-compliance assessment if it has cause to do so. The notification will contain an offer of technical assistance and a possible request for operational review.
- DHS will conduct an operational review of the program if the agency sends additional documentation. If DHS holds the non-compliance finding, DHS will issue formal notice of non-compliance with details about the specific areas and recommendations for curing issues.
- The agency must submit a corrective action plan to DHS within 30 days of receipt of the notice of non-compliance.
- Failure to submit a corrective action plan, cure the area(s) of non-compliance, or be cost-effective and, any continued non-compliance may result in the following sanctions:
 - Reduction in FPIP funded staff positions.
 - o Billing the agency for FPIP services provided by DHS.
 - Reallocation of program grant funds, investigative resources, or both to other counties and tribes.
 - o Denial of general FPIP Plan funding for subsequent months of non-compliance.

DHS and FPIP consortiums will determine if any performance modifications are needed in the future.

Section VI. State Reporting Requirements

Activity Reporting

FPIP agencies must understand the types of information collected and activity reports to effectively manage FPIP operations. As reportable events occur, FPIP agency staff are expected to promptly and completely enter investigation data into BRITS and any other systems approved by DHS. This includes case actions taken by program category, calculated overpayments or claims, and referrals made and completed for ADH or criminal proceedings. Notable events, including becoming aware of media worthy news should be reported timely to OIG at DHSOIGFIRE@dhs.wisconsin.gov, for visibility. Data entries will be continually monitored and formally reviewed on a monthly basis by DHS. Reviews happen the month after data entries were made to ensure all monthly activities are effectively measured. Data is tracked by case and by public assistance program categories for DHS program evaluation purposes and for reporting to federal and state oversight agencies that partially fund FPIP.

Estimating One Month's Savings

FPIP staff must enter estimated savings for one (1) month in BRITS using the instructions below. Estimated savings must **not** be multiplied by the remaining months in the certification period.

- MA and BC+: Review the monthly cost savings calculation tool tip in BRITS, estimate savings for each program, and enter data in BRITS.
- **FS:** Subtract the correct benefit allotment from the current month's benefits and enter the cost savings (difference) in BRITS.

When denying member applications, eligibility workers also must attempt to calculate cost savings by recording one month's savings for each program. FPIP staff then must review the savings estimate for each program and enter the data in BRITS. If the investigation resulted in increased benefits, FPIP staff should enter zero savings. Except for FS, all programs use the same formula for denied applications and open cases as listed below. Savings are not estimated if the case was closed and the investigation only determined fraud due to an overpayment.

Formula for FS

- Denied Applications: Use one (1) month's full benefit amount for the household size.
- Open Cases: Use the difference between the benefit issued and the correct benefit amount.

Formula for BC+ or Family Planning Only Services

- Use \$100 for one (1) month's savings for a child under 19 years or age.
- Use \$200 for one (1) month's savings for an adult.

Formula for Institution or Community Waiver Applications

• Use \$3,000 for one (1) month's savings.

Formula for all other MA EBD (Elderly, Blind or Disabled) Applications

• Use \$500 for one (1) month's savings.

IPV Sanctions and Savings Estimates

When FS program investigations result in a fraud conviction in a court or IPV in an ADH, the FPIP agency is required to enter the sanction on the CWW FoodShare IPV Sanction page to ensure it begins within 45 days of the determination date. Agencies are credited a \$1,000 cost-savings estimate for each IPV established. This is an annual credit that will not be factored further in the calculation of total estimated savings.