

HMO Fraud Complaints and Credible Allegations of Fraud (CAF) Referrals

What do I do if I identify potential fraud, waste, or abuse?

Health Maintenance Organizations (HMOs) must report the allegations to the Office of the Inspector General (OIG) using either the fraud hotline or online reporting portal.

- Call the fraud hotline 877-865-3432.
- Use the online reporting portal: www.reportfraud.wisconsin.gov/rptfrd/default/aspx

When should I make a complaint?

Report the complaint as soon as you identify the potential fraud, waste, or abuse. If using fire safety as an analogy, contact OIG when you see or smell "smoke."



What do I do after I make a complaint?

- Investigate the potential fraud, waste, or abuse and collect evidence.
- Document your findings.
- Email your OIG representative to notify them of the outcome of your investigation.



What do I do if I determine the allegation of fraud is credible?

- Continuing the fire safety analogy, if you discover evidence of fraud, or "fire," email your OIG representative.
- Complete the Medicaid Fraud Control and Elder Abuse Unit (MFCEAU) referral form (F-02296) and submit to OIG via the HMO SharePoint site.
- The purpose of this form is to refer the case to MFCEAU for investigation and possible prosecution.
- You will be responsible for providing any additional information and uploading the necessary exhibits (case notes, evidence of payment, timesheets, etc.) to the HMO SharePoint site.



How does my referral get to the MFCEAU?

- OIG completes the remainder of the MFCEAU referral form (F-02296) and presents the case to OIG management and the Office of Legal Counsel.
- The Inspector General determines whether to send the case as a CAF to MFCEAU.
- If the MFCEAU accepts the referral, OIG will likely suspend payments to the provider.
- For additional information on payment suspensions, please refer to P-01843.

