

**OFFICE OF INVESTIGATIVE SERVICES
POLICY & PROCEDURE #620**

REFERRAL PROCESS AND DISPOSITION FLOW CHART

INITIATION OF COMPLAINT:

When a DHR agency suspects fraud/IPV on the part of a Food Stamp, TANF, or Child Care recipient, a completed **Request for Investigation, Form 5667**, is submitted to the State Office of Investigative Services (OIS). For suspected fraud/IPV cases, the date of discovery is the point at which there is sufficient data to refer a case to OIS on the Form 5667.

Additionally, OIS has established a toll-free fraud hotline (1-800-282-4063) that is available 24 hours a day, 7 days a week. A transcript of the hotline call is documented on a Hotline Referral Report (HRR), which is routed to the appropriate county DFCS office for review and response. If an intentional program violation is suspected, the county DFCS will complete a Form 5667 and submit it to OIS along with the original HRR. A referral that originated from a hotline call is processed in the same manner as other referrals.

OIS acknowledges receipt of a Form 5667 by date stamping and returning a copy to the referring agency. The original referral is routed to the OIS data processing unit where it is entered into the database. Based on key elements in the referral, the computer assigns a category to the referral as well as assigns the OIS Agent and region responsible for the investigation.

REVIEW OF REQUEST FOR INVESTIGATION:

All incoming referrals will be investigated and dispositioned within 12 months of the date of the Form 5667. In keeping with 7 CFR § 273.18 (d)(3)(ii) the claim will be considered established for tracking purposes as of the date of the initial demand letter. (The initial demand letters used by OIS are the **Notice of Investigation** and the **WDH Appointment Letter**.) The 12-month processing standard for the WDH must include the mailing of the WDH appointment letter.

The 12-month processing standard for PAC cases (Notice of Investigation letter) must include the scheduling of an appointment with the client.

The Agent will review the referral within 30 days of receipt and determine if there are sufficient indicators and possible evidence to establish a suspected IPV claim based on the required criteria. If the referral cannot be classified as suspected IPV, the referral should be returned to DFCS to pursue an Inadvertent Household Error (IHE) or Agency Error (AE) overpayment.

Good caseload management skills are expected of Agents and supervisors to insure that referrals are completed prior to the twelfth month. If the referral backlog is unmanageable and the region is unable to address all referrals, the approved Referral Disposition Guideline Considerations should be utilized in order to insure that the most lucrative referrals are addressed. The Chief of Investigations should be advised of any problems related to meeting the 12-month timeframe. The Chief of Investigations should approve any prioritization process that differs from the guidelines endorsed by OIS administration prior to implementation by the region. SAC's must route all requests for an alternate prioritization process to the Regional Manager for approval. The Regional Manager will seek the required CI approval.

If there is insufficient evidence to establish an IPV claim by the end of the 12-month deadline and a claim is indicated, the referral will be closed. The Agent should advise the county DFCS on a **Disposition Letter** that the referral that there is insufficient evidence to establish an IPV overpayment and the referral is being returned to the agency to pursue any possible overpayment as IHE or AE. The Agent should not advise the county DFCS to complete a new referral on the same allegation because OIS could not investigate the referral in the 12-month timeframe.

REFERRAL PROCESS AND DISPOSITION FLOW CHART (continued)

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