



Office of Human Resources
Fraud Claims Investigator - CA3068
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General Statement of Duties

Conducts investigations, determines claim establishment, pursues intentional program violations and fraud, pursues collections, reviews and refers cases and claims for civil, criminal and administrative proceedings for Human Services programs.

Distinguishing Characteristics

This class is distinguished from the Collections Investigator who performs intermediate/standard investigative work of legal liability and collection activities including uncollectible and/or overdue payments and accounts. The Fraud Claims Investigator is also distinguished from the Business License Inspector which monitors and enforces compliance to state statutes, municipal ordinance, rules and regulations relating to businesses and licensing. This class is also distinguished from the Investigations Technician which performs standard/intermediate level investigative work including assisting in conducting comprehensive investigations of a criminal/civil cases and making preliminary determination regarding jurisdictional authority and specific statutory violations.

Level of Supervision Exercised

None

Essential Duties

Calculates and establishes fraud claims related to investigations, tax offsets, customer/state inquiries, and civil/criminal referrals. Claims are reviewed with the relevant program regulations and rules to assure that all claims meet the necessary regulatory requirements, completed timely, and identify liable parties.

Assures that all claim notifications are sent timely and in a manner consistent with program regulations.

Reviews investigations to determine relevant program rules and regulations, researches and applies program rules, calculates benefits, and creates fraud claims. Creates and mails correspondence to household citing relevant program rules. Responds to inquiries from clients, eligibility workers, and State/Federal agencies. Assures that all actions taken are properly documented in the Colorado Benefits Management System (CBMS).

Reviews assigned fraud cases for "clear and convincing evidence" of violations of program rules and proof of fraud to determine if intentional program violations (IPV) is warranted.

Responsible for reviewing fraud cases and determines if civil/criminal action is appropriate.

The Fraud Claims Investigator represents the agency in administrative hearings by preparing hearing materials and presenting the case to the Office of Administrative Courts. The Fraud Claims Investigator will prepare evidence, reviews cases with the Assistant City Attorney and complete civil and criminal referral forms. Serves as the expert witness on criminal cases accepted by the District Attorney's Office.

Recommends write-offs for non-collectable accounts within policy guidelines. Assists Legal with bankruptcies by placing claims in the proper non-collectible status while bankruptcy proceedings are on-going.

Reviews and processes incoming Repayment Agreements (RA) and verifies if the payment meets program-specific minimum collection requirements. Renegotiates repayment agreements, if applicable.

Monitors collections activities on fraud cases with claims and reaches out to clients with delinquent debt.

Researches client's employment history and wage data with the Department of Labor and Employment database.

Renegotiates new payment plan. Determines best course of legal action; voluntary payments, tax intercepts, wage assignments, garnishments, and judgements.

Reviews all databases and systems to determine the best address and information of the client for collections purposes. Contacts the client to explain the legal obligation of the client regarding the claim.

Maintains, organizes and updates case files and assures that all actions are recorded in Colorado Benefits Management System (CBMS).

Performs other duties as assigned.

Any one position may not include all of the duties listed. However, the allocation of positions will be determined by the amount of time spent in performing the essential duties listed above.

Competencies

Attention to Detail – Is thorough when performing work and conscientious about attending to detail.

Customer Service - Interacts with customers in a friendly and professional manner, works to resolve issues quickly and effectively, and is knowledgeable about products and services.

Decision Making – Specifies goals and obstacles to achieving those goals, generates alternatives, considers risks, and evaluates and chooses the best alternative to make a determination, draw conclusions, or solve a problem.

Interpersonal Skills – Shows understanding, friendliness, courtesy, tact, empathy, cooperation, concern, and politeness to others and relates well to different people from varied backgrounds and different situations.

Reasoning - Identifies rules, principles, or relationships that explain facts, data, or other information; analyzes information and makes correct inferences or draws accurate conclusions.

Reading – Understands and interprets written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables, applies what is learned from written material to specific situations.

Writing – Writes in a clear, concise, organized, and convincing manner for the intended audience.

Knowledge & Skills

Knowledge of investigation techniques sufficient to be able to conduct comprehensive investigations.

Education Requirement

Associate's Degree.

Experience Requirement

Three (3) years of experience determining eligibility for public assistance programs. By position, knowledge of program eligibility rules for Supplemental Nutrition Assistance Program (SNAP), Financial Assistance (FA), Temporary Assistance for Needy Families (TANF), Medical Assistance (MA), Child Care Assistance Program (CCAP), and/or other public benefits programs.

Education & Experience Equivalency

One (1) year of the appropriate type and level of experience may be substituted for each required year of post-high school education.

Additional appropriate education may be substituted for the minimum experience requirements.

Licensure & Certification

By position, requires a valid Driver's License at the time of application.

Licenses and certifications must be kept current as a condition of employment.

Working Environment

Subject to varying and unpredictable situations.

Subject to many interruptions.

Subject to long irregular hours.

Level of Physical Demand

1-Sedentary (0-10 lbs.)

Physical Demands

(Physical Demands are a general guide and specific positions will vary based on working conditions, locations, and agency/department needs.):

Sitting: remaining in the normal seated position.

Carrying: transporting an object, usually by hand, arm, or shoulder. Balancing: maintaining body equilibrium to prevent falling over.

Reaching: extending the hand(s) and arm(s) in any direction. Handling: seizing, holding, grasping, or otherwise working with fingers.

Fingering: picking, pinching, or otherwise working with fingers.

Talking: expressing or exchanging ideas by means of spoken words. Hearing: perceiving the nature of sounds by the ear.

Repetitive motions: making frequent movements with a part of the body.

Eye/hand/foot coordination: performing work through using two or more.

Lifting: raising or lowering objects weighing no more than 10 pounds, from one level to another.

Background Check Requirement

Criminal Check

Employment Verification

By position, Motor Vehicle Record

Education Verification

Assessment Requirement

None

Probation Period

Six (6) months.

Class Detail

Pay Grade: A-616

FLSA Code: N

Established Date: 9/21/2018

Established By: LS

Revised Date:

Revised By:

Class History: