

Compliance and fraud concerns

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✓ Authority and consent on claims

✓ Communication with stakeholders

Quality assurance

✓ File and diary maintenance

✓ Receiving and actioning requests for claim file

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Compliance means following the requirements set by the legislation and any procedures, rules or requirements set by Comcare and our Group in relation to the claims management process. Not all non compliance is intentional and meets the definition of criminal fraud.

Most of the time, non compliance is a mistake or misunderstanding and can be resolved through:

- open, honest, and transparent communication with the relevant individual
- educating our clients about their obligations and rights and/or
- corrective claims management action.

These actions are designed to support the achievement of voluntary compliance. Voluntary Compliance is the act of obeying a particular rule or law, or of acting according to an agreement without being forced, we can encourage this by making our requirements clear and achievable.

The 'Just Ask Process' has been developed to guide you on what action can be taken when you identify a concern that indicates potential non-compliance or fraud. A **concern** is information of any form that is **inconsistent** with what we currently know, or information that **was not previously disclosed**.

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Examples of non-compliance or fraud concerns that may arise in the claims process

Examples of concerns you might have could include, but are not limited to:

- Indication or information received of a business or paid or unpaid activity that an employee is engaged in, that has not been previously declared to Comcare
- Documentation, such as receipts or a medical certificate, which appears to have been altered or manipulated or that appears different from invoices that have been previously submitted by the provider
- Information from an employee that they have not received a service Comcare has been invoiced for
- An undeclared non compensable condition that may impact the liability of the claim.

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What should I do if I have concerns?

If you have concerns that something is potentially non-compliant or fraudulent, in the first instance you should apply the “Just Ask” process.

When:

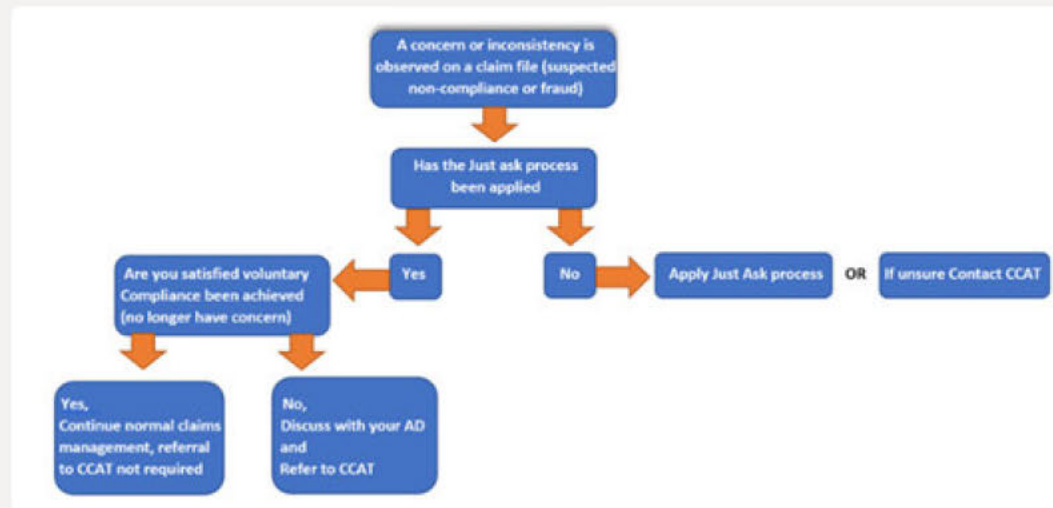
- The Just Ask process is not considered appropriate in the circumstances (see Just Ask process – considerations),

- Where voluntary compliance could not be achieved through the Just Ask process, or
- You have ongoing concerns that cannot be resolved through reasonable claims management action

A referral to Claims Compliance and Assurance team should be made. You should not take any action that is not related to the management of the claim or conduct an investigation related to the concern, to support a referral.

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Referral process



The Claims Compliance and Assurance team (CCAT) receives referrals from a variety of sources including referrals from Claims Management Group, information reports, data matching, random reviews, assurance activities and from internal and external stakeholders. If you have concerns about a claim and have exhausted all claims management actions to achieve voluntary compliance, please follow these steps:

1. Speak to your Assistant Director about your concerns.
2. If your Assistant Director is satisfied, the matter should be referred to the Claims Compliance and Assurance [Mailbox](#). You must CC your AD (Assistant Director) into the referral for oversight. You may also wish to call a member of the Claims Compliance and Assurance team to discuss the matter first.

Your referral should be as factual and objective as possible, and include:

- Details of the concern
- Any actions taken to achieve voluntary compliance, including outcomes (i.e., Just Ask process)
- Any folios, DOC numbers, comments, or conversations (email or phone) to which your concern relates
- Any actions or issues which may impact on the urgency of a compliance assessment (i.e., determinations)
- Any emails or communication with an external stake holder which led to concerns of non-compliance
- Anything else you may feel is relevant to the issue or our compliance assessment process.

To view the referral process flowchart in a Word document please click [here](#).

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What happens after a referral to the Claims Compliance and Assurance Team (CCAT)?

Once a referral is received CCAT will complete an assessment which generally involves a deep dive review of the Pracsys file and conduct research on available information sources. As a result of this assessment there are three likely outcomes:

- The information available does not indicate that further action is required,
- A recommendation for further claims management action, and/or

- A referral to the Fraud Investigations Unit.

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What if I suspect Fraud?

Fraud is dishonestly obtaining a benefit, or causing a loss, by deception or other means.

It can also be a breach of the APS Code of Conduct, a breach of contract, or a civil wrong. Fraud can be committed by individuals from outside the entity or by officials. It can involve financial fraud on program or operational funds, or non-financial activities that can impact upon the operations and reputation of the entity.

If you suspect Comcare employee misconduct or corruption this **MUST** be referred directly to the Fraud investigations unit via their [mailbox](#) or you can report anonymously: [Comcare: Fraud report](#)

All other suspected fraud should follow the process outlined in the What should I do if I have concerns? section. It is no longer the responsibility of claim management group staff to determine if a concern meets the definition of fraud. The Claims Compliance and Assurance team will determine through their assessment process whether they reasonable suspect that the concern meets the definition of fraud and should be referred to the Fraud Investigations Unit.

You should not under any circumstances conduct your own investigations, including online searches, to obtain information to further define a concern as fraud.

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Other resources

- ['Just Ask' process](#)
- [Fraud Control](#)
- [Allegation management guidelines](#)

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