



Special Investigations Department



Fiscal Year 2024 Annual Report

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Dear BWC Board of Directors:

The Special Investigations Department (SID) is proud to present fiscal year FY 2024 performance results and accomplishments. The SID continues to build upon 31 years of investigating fraud and protecting the state insurance fund.

SID is mission-driven and is comprised of eight field investigation teams supported by a Central Operations Unit. Allegations of injured worker, employer, and health-care provider fraud are filtered through our Fraud Hotline Team from both internal and external sources. All teams rely heavily on our Intelligence Unit and Digital Forensics Unit to provide data analytics and referrals of potential fraud discovered through proactive investigative efforts. When directed by the Industrial Commission, workplace accidents and fatalities are investigated by our Safety Violations Investigation Unit, which provides independent detailed reports. The safety and security of our employees and visitors across the state remains the number one priority of our Employee Safety and Integrity Team.

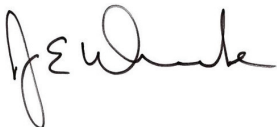
Collectively, our teams in FY 2024 identified savings of over \$72M, yielding 62 convictions and 1339 closed cases with a 57% founded percentage. 34% of the 2338 fraud allegations received were submitted from external sources, with some using our web allegation form. The web allegation form remains popular, allowing the general public to alert us to possible fraud. The other 66% were submitted by BWC internal sources identifying red flags and proactive investigations.

Career and professional development remain a high priority in succession planning, and FY 2024 proved to be another year of advancement and transition for several SID staff. Sixteen new staff were added to the department, while 11 received promotions, and five SID retirements were celebrated.

Benchmarking with similar professional investigative organizations and specialized SID training remains a focus for FY 24 and 25. This training is provided regularly for all newly promoted and newly hired staff to ensure the highest quality performance. Opportunities for acquiring new skills, leading presentations, developing subject matter expert material, and participating in special assignments offer challenges and growth to our experienced staff.

Building on the past and looking forward to the future is a driving force of our investigative and security professionals. Thank you for your support and for reading this report.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Wernecke", with a stylized, cursive script.

Jim Wernecke, Director, Special Investigations Department

About us — history and structure

BWC created the Special Investigations Department (SID) in FY 1994 to proactively detect, investigate, and deter workers' compensation fraud and protect the State Insurance Fund. This fund compensates Ohio's injured workers. What began with a staff of six to 10 employees in three offices across the state is today a force of 116 agents, supervisors, and support personnel statewide.

Ohio law ¹ designates SID a criminal justice agency. SID protects the State Insurance Fund by aggressively pursuing cases of claimant, medical provider, and employer fraud. Our investigations allow BWC to declare overpayments, determine premiums due, identify reserves, disallow claims, pursue prosecutions, and pursue restitution. These actions directly impact BWC's ability to reduce premium costs.

SID is also responsible for investigating safety violations related to workplace accidents and fatalities and for the physical protection of BWC staff, visitors, and facilities. Security and internal investigations operate with SID, which provides support and services to all BWC departments and other agencies located within the BWC facilities.

What is Workers' Compensation Fraud?

According to Ohio law ², workers' compensation fraud occurs when someone knowingly makes a false representation of a material fact to obtain workers' compensation benefits or to avoid responsibility under the law. Fraud also occurs when an employer fails to obtain coverage or misrepresents the amount of payroll or the classification of their employees. Health-care providers commit fraud when they intentionally receive payments to which they are not entitled.

¹ Ohio Revised Code 4121.131

² Ohio Revised Code 2913.48



SID is comprised of several teams to combat fraud, investigate violations, and provide security:

- Northeast Claimant Fraud Team (Region 1)
- Southeast Claimant Fraud Team (Region 2)
- West Claimant Fraud Team (Region 3)
- Health Care Provider Team (HCPT)
- Employer Fraud Team (EFT)
- Safety Violations Investigation Unit (SVIU)
- Intelligence Unit (IU)
- Employee Safety and Integrity Unit (ESIU)

SID Leadership



SID Director Jim Wernecke

Jim Wernecke joined BWC in June 2015 following a 25-year career with the Ohio State Highway Patrol. He served in many leadership positions with the patrol, including Commander of the Ohio Investigative Unit and Commander at the Mansfield Patrol Post. Jim also served as an Investigative Team Leader with the Ohio Inspector General's Task Force and was an Assistant Commander of the Special Operations Office of Investigative Services from 2006 to 2012.

A Tuscarawas County native, Jim completed advanced law enforcement and investigative training at several agencies in and outside of Ohio. These include the United States Army War College, the West Virginia and Delaware State Police, the New York State Police Academy, and Ohio University. He also attended the Northwestern University for Public Safety and North Central State College.

Jim reports to BWC Chief Legal & Ethics Officer Michaela Peterson Baumann.



Assistant Director Jennifer Cunningham

Jennifer Cunningham joined BWC in 1994 and was promoted to Fraud Investigator in 1996. She has served in numerous investigative roles since then, including Fraud Analyst and Special Agent. In 2001, she was promoted to Special Agent in Charge (SAC), where she oversaw the daily investigative operations of the Northeast Regional Claimant Fraud Team. She was promoted to Assistant Director of Field Operations in 2006. In this role, Jennifer leads criminal and administrative investigations of claimant fraud and health-care provider fraud. Jennifer also served as the Interim Director of Investigations from 2013 to 2015.

Jennifer also assists with SID's training and development committee and is a mentor for BWC's Future Leaders Program. She holds professional memberships with the Coalition Against Insurance Fraud's Nationwide Workers' Compensation Task Force, the International Association of Special Investigation Units, and the National Health Care Anti-Fraud Association. She graduated from The Ohio State University with a bachelor's degree in English and a minor in Criminal Justice. Jennifer is a graduate of BWC's Executive Leadership Program.



Assistant Director Phill Brickman

Phill Brickman began his career at BWC in 1994 as a Fraud Investigator in the Canton SIU. Over the years, he has spent time in Richmond Heights, Cleveland, Independence, Garfield Heights, and Cleveland Lausche. Phill was promoted to Assistant Special Agent in Charge (ASAC) over the Northeast Claimant Team in May of 2006, and in July 2008, he moved up to Special Agent in Charge (SAC). In April of 2023, Phill was promoted to Assistant Director of Central Operations and is responsible for the leadership and direction of Central Operations, Safety Violations Investigation Unit, and the Employer Fraud Team.

Phill's certifications include Impact Weapons Instructor, Subject Control Instructor, M&P Pistol Armorer, Semi-Auto Pistol Instructor, Weapons Requalification Instructor, Range Medical Emergency Instructor, Baton/OC Spray Instructor, and Firearms Training Program.

Phill holds professional memberships in the Ohio Investigators Association, the American Society of Law Enforcement Trainers, the Northern Ohio Fraud Investigators Association, the International Law Enforcement Educators and Trainers Association, the International Association of Special Investigations Units, and the National Technical Investigations Association as a "Distinguished Member."



Assistant Director Joe Lopez

Joe Lopez joined SID in Oct. 2011 as Manager of the Digital Forensics Unit. Prior to BWC, he worked for the Ohio State Highway Patrol in their computer crimes unit as a Forensic Computer Specialist. Joe received his Certified Forensic Computer Examiner certification from the International Association of Computer Investigative Specialists in 2008. From 2001 to 2006, Joe worked in the Information Technology Department at the Ohio Department of Public Safety. Joe oversees the Intelligence Unit (IU) and our Employee Safety and Integrity Unit (ESIU), which includes Digital Forensics, Internal Investigations, and BWC Security.

Among his achievements in SID, Joe has assisted in developing methodologies for applying digital forensics techniques to both internal and social media investigations. Joe has presented these recognized methodologies to local, state, and federal agents and investigators across the nation. These include the Ohio High Technology Crimes Investigations Association annual conference, the Targeting Fraud-Safeguarding Integrity conference, and the Ohio Investigative Association; the Association of Certified Fraud Examiners, the Ohio Bureau of Criminal Investigation – EPA, Medicaid Integrity Institute annual training conference, and the Certified Medical Board Investigator annual training program.

Joe received his bachelor's degree in computer Forensics and Digital Investigations from Champlain College in 2012. In April 2022, he was one of nine graduates in the second cohort of BWC's Executive Leadership Program.

2024 Performance Results

During FY 2024, we identified **\$72.2M** in savings. This level of savings generated a **\$5.38** return on expenditures (ROE). We received **2,338** allegations and closed **1,339** cases in an average of **221** investigative days (from the date we received the allegation to the date we closed the case). Fully, **64.9%** of the closed cases were founded, meaning the fraud allegation proved true. The average closed case identified **\$53,990** in savings to our workers' compensation system.

PERFORMANCE MEASURES	FY 2024	FY 2023	FY 2022
Allegations	2338	2,374	2,661
Cases referred for prosecution	104	118	89
Indictments	68	71	69
Convictions	62	79	69
Cases closed	1,339	1,362	1,431
Number open cases at end of year	611	589	635
Savings to State Insurance Fund	\$72.2 million	\$73.5 million	\$90 million
Return on expenditures (\$ saved to \$ spent)	\$5.38	\$6.08	\$7.02

Performance results by team				
SID teams	Prosecution referrals	Indictments	Convictions	Identified savings
Employer Fraud	45	31	26	\$11,919,660
Health-care provider Fraud	1	2	3	\$998,224
Northeast Claimant Fraud	21	14	17	\$27,722,617
Southeast Claimant Fraud	12	9	6	\$16,318,596
West Claimant Fraud	28	12	10	\$15,333,948
Total	104	68	62	\$72,293,045

RESULTS ACHIEVED SINCE FY 1994	
Allegations	137,962
Cases referred for prosecution	5,959
Convictions	3,267
Cases closed	75,349
Savings to State Insurance Fund	\$2.3B

Fraud Investigations — Notable Cases

While SID is a sophisticated criminal justice agency, we rely on the public's eyes and ears to help us identify and prevent fraud. We routinely team with BWC's communications department to promote our completed cases through BWC's website, the media, and various social media channels. By doing so, we are putting workers' comp criminals and would-be cheaters on alert — we are looking for you, we will find you, and we will prosecute you to the fullest extent of the law.



Employer Fraud

Our employer fraud team has professionals throughout the state dedicated to investigating allegations of fraud committed by employers and third-party administrators. The most common complaints include:

- Altering BWC certificates of coverage.
- Obtaining multiple BWC policies through deception.
- Submitting dishonored premium payments to BWC.
- Misclassifying employees.
- Operating without coverage.

The team works with other BWC departments and external agencies to identify non-compliant and fraudulent employers.

During FY 2024, our employer fraud team closed **305 cases**, identified **\$11.9M** in savings to the workers' compensation system, and referred **42** subjects for criminal prosecution. The team achieved **31** indictments and **26** convictions.

Amanda Joy's Cleaning Company

Lapsed Coverage, WC Fraud, Records Tampering, Complicity to Telecommunications Fraud



The Special Investigations Department (SID) opened an investigation after receiving an allegation that the employer, Amanda Joy Klapp dba Amanda Joy's Cleaning Company, was continuing to operate her business in the same manner even after a prior Employer Fraud Team investigation and conviction by BWC.

The employer had been ordered to bring the policy into compliance after the first conviction but had failed to do so. It was also alleged that Klapp was taking taxes out of employees' paychecks but not reporting them. A joint investigation by the BWC Employer Fraud Team and the Ohio Department of Taxation found that Klapp had intentionally under-reported her payroll and operated her business without the required workers' compensation coverage, in addition to multiple charges brought by the Department of Taxation.

On Oct. 2, 2023, Klapp pleaded guilty in Summit County Common Pleas Court and was found guilty of one count of Workers' Compensation Fraud, a fifth-degree felony, one count of Tampering with Records, a third-degree felony, and one count of Complicity to Telecommunications Fraud, a felony of the fourth degree, along with additional Department of Taxation related charges. Klapp was ordered to pay restitution in the amount of \$78,226.62 to the Ohio Department of Taxation and \$5,537.67 to the Ohio BWC.

Our health-care provider team (HCPT) has professionals throughout the state dedicated to investigating allegations of fraud committed by providers, pharmacies, and managed care organizations. The most common complaints received by HCPT included:

- Drug trafficking.
- False billing.
- Providing medically unnecessary treatment.
- Services not rendered.
- Upcoding (billing for more services or more expensive services than those provided).

The team aggressively pursued fraudulent providers in FY 2024, including those who ran pill and injury mills. The team functioned as both a lead and support agency to identify and investigate provider fraud subjects suspected of committing health-care fraud. Throughout Ohio and beyond, the team participated in joint investigations with local, state, and federal law enforcement agencies. Agents conducted multiple undercover operations.

The team closed 33 cases and identified \$998,224 in savings to the workers' compensation system. It secured one referral for criminal prosecution and three convictions. HCPT is also pursuing civil charges and administrative remedies to secure restitution from subjects of closed, founded cases.

Additionally, the team continued to identify and recommend policy and procedure changes to increase cost savings to employers, enhance service to injured workers, and address unsafe medical practices, which impact all Ohio citizens.

Lawrence Wells, D.C.

Billing for services not rendered



The Special Investigations Department received two allegations from the same Managed Care Organization (MCO) concerning Lawrence E. Wells, D.C. (WELLS). The MCO suspected WELLS was billing for services not rendered. Based on the initial allegation received on Aug. 31, 2018, and the trends in WELLS' billing, an investigation was opened and assigned to field staff. The second allegation was received from the MCO on Sept. 23, 2019.

On July 17, 2023, Franklin County Common Pleas Judge David Young accepted Wells' guilty plea to fourth-degree felonies, including workers' compensation fraud and forgery. During sentencing, Judge Young ordered \$170,000 in restitution and one year of community control.

Throughout SID's investigation, evidence was collected that shows Wells billed BWC for services not rendered and up-coded units of service that resulted in an overpayment. This was verified through statements from patients treated by Wells and medical records showing Wells was out of state during a time when he billed for services. In order to support his criminal scheme of billing for services not rendered or to support high units of service, Wells created false and misleading office notes and submitted them to the MCOs and/or BWC.

As a result of the investigation, Wells has been convicted of several offenses and will no longer be able to provide services to BWC claimants in the future.

Our regional claimant special investigations teams have professionals located in most of BWC's service offices. Dedicated to investigating allegations of fraud committed by claimants, these teams are assigned to one of three regions: northeast, southeast, and west. The most common complaints received by regional claimant special investigations units (SIUs) included:

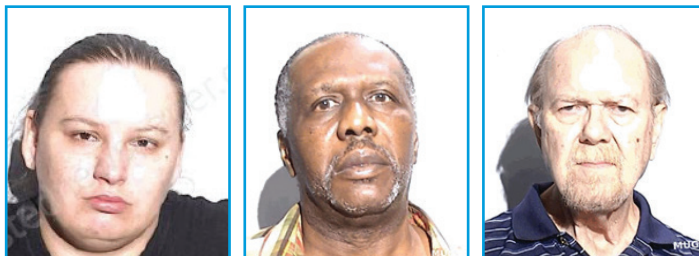
- False claim.
- Receipt of benefits after date of death.
- Incarceration.
- Working while receiving lost time benefits.
- Physical activity.

In FY 2024, these three teams closed 1,001 cases and identified \$59M in savings. These teams referred 104 subjects for criminal prosecution, achieving 68 indictments and 62 convictions.

West Regional Claimant Fraud

Cheryl Jones, Alfred Williams, Michael Harrington

Forgery & Theft



On June 14, 2023, the SID presented this case to Lucas County Common Pleas Court and received a 4-count felony indictment against Cheryl Jones for forgery, a 4-count felony indictment against Alfred Williams for forgery, and a 1-count felony indictment against Michael Harrison for forgery.

After an injured worker realized that they had not yet received their first Temporary Total (TT) payment, they called their attorney.

It was discovered that BWC issued the payments, and the warrants had already been cashed. SID learned that the injured worker did not change his address with BWC when he moved out, so the warrants were mailed to Cheryl Jones' apartment. SID obtained copies of the warrants and saw that they were endorsed by the injured worker with one of the checks paid to the order of Michael Harrington and four paid to the order of Alfred Williams.

The SID discovered that all the checks were deposited through an ATM. Michael Harrington deposited a warrant for \$1287.06 into his bank account. The other four checks, \$621.34 each, were deposited into Alfred Williams' bank account. Bank video captured an image of two individuals depositing a BWC warrant. The claimant identified the woman in the ATM video as his sister, Cheryl Jones, and the male as Alfred Williams.

The Bureau of Criminal Investigations (BCI) conducted a handwriting analysis on the forged warrants and confirmed that the signatures were not the claimants. The SID identified that Cheryl Jones, Alfred Williams, and Michael Harrington stole a total of \$2529.74 from checks issued to the claimant.

On Aug. 8, 2023, Alfred Williams entered an Alford Plea in Lucas County Common Pleas court, and the court found him guilty of Theft (M-1). On Aug. 17, 2023, Cheryl Jones pleaded guilty to three counts of F5 Forgery and one count of F5 Theft in Lucas County Common Pleas court.

On the same date, Michael Harrington pleaded guilty to one count of F5 Forgery and one count of F5 Theft in Lucas County Common Pleas court. Both were put into a pre-sentence diversion program, each placed under two years of court supervision and ordered to make restitution.

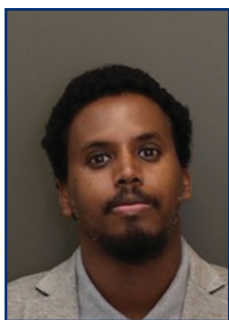
The court ordered that as long as they pay back the restitution in the next two years, their cases will be dismissed, and there will be no conviction. If they violated probation or failed to pay restitution, then the court case will proceed, and they can face conviction. Lucas County Common Pleas Court issued a total restitution of \$2,529.74 between all three subjects.

Southeast regional claimant fraud

Abdiranhman Ali

Working while collecting BWC disability benefits

Abdirahman Ali was ordered to pay the Ohio Bureau of Workers' Compensation (BWC) over \$31,000 in restitution following a guilty plea to a felony conviction of Workers' Compensation Fraud.



BWC's Special Investigations Department (SID) received an allegation that indicated Ali was working and connected him to a commercial vehicle while he was collecting BWC disability benefits.

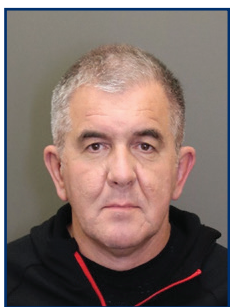
The subsequent investigation confirmed the allegation that Ali owned the vehicle and was working while collecting benefits. It also confirmed that Ali intentionally misrepresented his activity and withheld it to collect benefits he otherwise would not have been entitled to.

On June 5, 2024, Ali pleaded guilty to one count of Workers' Compensation Fraud, a fifth-degree felony. Following the guilty plea, the judge ordered Ali to pay \$31,611.86 in restitution to BWC and three years of community control.

Northeast regional claimant SIU

Roman Skalsky

Contractor working and receiving permanent total disability benefits



Roman Skalsky returned to work as a Truck Driver from April 2021 through Dec. 2021, and he returned to work plowing snow for an Air Trampoline Park and for a Church from Dec. 2020 through April 2021. As a result of the investigation, Roman Skalsky was found overpaid \$45,260.24.

On May 21, 2024, Roman Skalsky pled guilty in Franklin County Court of Common Pleas to one count of Workers' Compensation Fraud, a felony of the fifth degree. Judge Chris Brown found Roman Skalsky guilty and proceeded to sentencing. With restitution in the amount of \$45,260.24 having been paid in full, Judge Brown accepted the joint recommendation to terminate community control, following one day of probation. Judge Brown added no new conditions, no sanctions and waived the fines and court costs.

Fugitive Task Force

Our Fugitive Task Force (FTF) locates subjects with arrest warrants for BWC-related charges. Although the Special Investigations Department is designated as a criminal justice agency, we do not have the authority to make arrests. Therefore, the FTF works with local, state, and federal law enforcement to locate and arrest these subjects. The FTF also works with the Ohio Attorney General's Office to ensure warrants are served. FTF agents serve letters only on misdemeanor warrants, conduct surveillance, research the location of subjects, and, with the appropriate agency, coordinate the arrest of subjects for felony warrants. The appropriate authorities execute these arrests, often with FTF agents present. Many times, law enforcement stops subjects for unrelated traffic offenses and discovers the warrant. Elsewhere, the FTF contacts subjects and recommends they turn themselves into the court. We resolved **13 warrants** in 2024. The subjects of these warrants were associated with **\$131,686** in overpayments and premiums/penalties owed to BWC.

Nature of the resolution of the warrant	Number of warrants resolved	Number resolved with FTF involvement	Savings Identified
Arrested by local law enforcement	4	1	\$14,100.32
Arrested by a sheriff's office	1	1	\$29,353.60
Arrested by probation	0	0	\$0
Fugitives turned themselves in	6	1	\$74,298.99
Warrants recalled	0	0	\$0
Warrants removed by SID mgmt	2	0	\$13,933.57
Total	13	3	\$131,686.48

Safety Violations Investigation Unit

Our Safety Violations Investigation Unit (SVIU) is a statewide team dedicated to investigating alleged violations of specific safety requirements (VSSR). A claimant, surviving spouse, or dependent may file for a VSSR award when a potential safety violation contributed to a workplace injury, illness, or death. The unit submits its investigative findings to the Ohio Industrial Commission (IC) for its determination of the VSSR award. Upon request by the IC, SVIU employees also complete correction order investigations to ensure an employer corrected a cited code violation.

In FY 2024, the SVIU received **418** claims applying for VSSRs, up 14% from FY23. The unit closed 305 investigations including workplace fatalities or catastrophic injuries.

The SVIU continues to use its unmanned aircraft system (UAS) program to assist in safety investigations. Four pilots around the state, each with a set of aircraft, provides aid as needed. Additionally, the unit continued to coordinate and conduct joint investigations with the Occupational Safety and Health Administration.

SID Investigators Cox and Rosengarten completed the Certified Occupational Safety Specialist (COSS) training and graduated with distinction as they earned their certification at the top of the class.

Intelligence Unit

- Coordinates and facilitates fraud detection and loss prevention programs.
- Provides data analysis and visualization services for further investigations.
- Supports department management with reporting and special projects.

During FY 2024, the IU detected **582** potential instances of fraud. When resolved, the IU allegations generated **\$41.7M** in identified savings. Additionally, the unit assisted SID employees by completing **2,188** intelligence requests.

IU professionals are members of a committee to support BWC’s strategic direction to incorporate data-driven decisions into operations. The committee is comprised of information technology professionals and designated personnel from business operational areas. The goal of this group is to develop a vision and strategic direction to govern data and use analytics to enhance effectiveness in managing business operations. Since its inception in 1997, the Intelligence Unit has identified **24,849** allegations of fraud and/or abuse and achieved more than **\$673M** in identified savings. Their vast experience enables IU professionals to make significant contributions to this committee.

Employee Safety and Integrity Unit

The Employee Safety and Integrity Unit performs digital forensics, internal investigations, and BWC security functions.

Digital Forensics Team

Our Digital Forensics Unit provides a full range of technical support for special agents conducting workers’ compensation fraud investigations. The unit’s primary duties include the forensic imaging and analysis of digital data acquired from electronic storage devices. Using specialized training and forensic software, this unit analyzes, extracts, and provides vast amounts of information to support investigations conducted by other SID teams.

The unit’s social media analyses assist SID teams by identifying intelligence on subjects, potential suspects, witnesses, and co-conspirators.

The unit is a forensic resource for other state and local agencies investigating white-collar crime.

The team also continued to oversee a state-of-the-art unmanned aircraft system (UAS) program to support the investigative operations of the Safety Violations Investigation Unit. The team uses the drones to capture workplace injury scenes digitally. It does this while minimizing investigator exposure to dangerous or contaminated areas.

Action taken	Completed requests
Field Assistance	1089
Social Media	153
Technical Operations	7
Internal Investigations and Assistance	12
Total	1261

BWC Security

Ensuring safety and security for employees, contractors, and customers is the mission of BWC security. BWC has 1,576 full-time and part-time employees assigned to 12 facilities throughout the state. Some of these facilities also house employees of the Industrial Commission. In addition, our main headquarters in Columbus furnishes office space to four other state agencies.

BWC employees, whether working remotely or from a BWC facility, experience millions of direct customer service interactions each year through our e-commerce-based website (bwc.ohio.gov), telephone calls, mail, and email. BWC Security protects employees and customers against threats and harmful incidents that may result from these interactions.

In FY 2024, BWC security effectively provided dozens of security services statewide.

- 29 Administration Assistance
- 36 Responses to Emergencies or Medical Calls
- Seven Threats of Suicide / Self Harm
- 16 External Threats, Critical Incidents, or Security Issues
- Three Law Enforcement inquiries or Referrals
- Eight Harassing Phone Calls or Emails
- 12 Lost, Stolen, or Damaged Property Incidents

Training

Leadership – succession planning

As the SID celebrates 31 years in existence, many of our staff who began in those early years are retiring or preparing to retire. The SID recognizes the influx of newer staff and promoted individuals to fill those vacancies and has proactively responded. The SID introduced a new position in FY24, a Training Manager, to spearhead the necessary training needs resulting from these changes.

The SID Academy, a two-week training required for all new SID staff, was provided in Oct. 2023. The Reid Technique of Interviewing and Interrogation three-day training was provided in March 2024, and in-car driving skills refresher training was provided in late Spring 2024. A required Defensive Tactics training is also provided in the spring and fall of each year.

The SID Academy



The Reid Technique of Interviewing and Interrogation



Defensive Driving



Defensive Tactics



In addition to providing training for incoming staff, the SID recognized a need to further develop experienced staff. In March 2023, a SID leadership training pilot program was introduced. The program educated the participants in behavioral styles, communicating for results, effective goal setting, as well as coaching and developing others. Twenty participants volunteered and completed the training, subsequently joining a SID leadership workgroup. The workgroup was tasked with recognizing the need for improvement or ways to increase efficiency and positive results within the department. Four subcommittees, sponsored by a member of management, began exploring options and taking action to fulfill those needs.

Beginning in FY24, two special agents from the SID will be part of the BWC Future Leaders Cohort 4. Preparing our experienced staff for leadership is of the utmost importance.

Outreach — building awareness

Building awareness of our agency through outreach increases the willingness and ability of Ohioans to collaborate with us to protect the State Insurance Fund. This fulfills our department mission “to effectively and proactively prevent losses to the workers’ compensation system and to deter, detect, investigate, and prosecute workers’ compensation fraud.”

Associations

SID professionals build awareness of our agency through their outreach activities with external entities, including leadership and membership with many associations. SID executives hold memberships and/or leadership positions with associations including:

- Association of Certified Fraud Examiners.
- Coalition Against Insurance Fraud, Workers’ Compensation Task Force Committee member.
- InfraGard.
- International Association of Computer Investigative Specialists.
- International Association of Special Investigation Units.
- National Health Care Anti-Fraud Association, Agency Representative.
- Ohio High Technology Crime Investigation Association.

Collaboration with association members allows us to share and learn best practices and examine our own methods to see how we can accomplish tasks more efficiently, including new strategies or technologies we can use during our investigations.

Statewide Red Flag Training and Fraud Finder Awards

Fraud Finder of the Year came from Claims Services in the Youngstown Service Office with **\$640,727.21** in savings!

SID leaders recognized individuals for their contributions to protecting the State's insurance fund as they traveled to each office, providing training and tips to staff on how to look for red flags of fraud. Staff are encouraged to report these red flags to SID for further investigation. The referrals are tracked through SID's Fraud Management System (FMS), and when founded, the savings are calculated.

Claims Service Specialist Angelina R. submitted 10 referrals to the SID in 2023-- three of which were founded with direct combined savings of \$108,039.80.

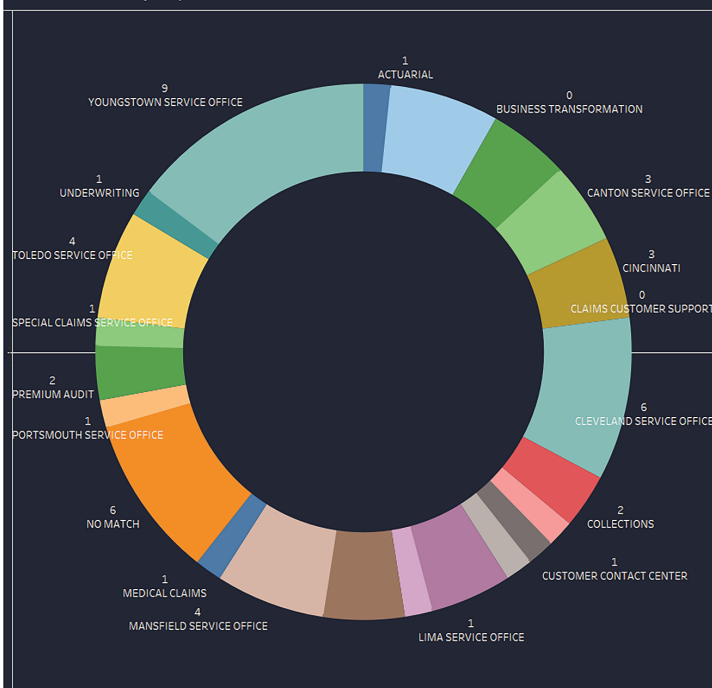
Biggest savings of the entire state and Fraud Finder of the Year for the case savings of \$532,689.41



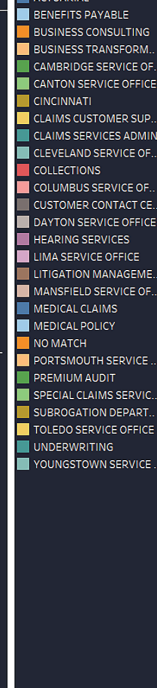
CSS Angelina R. and SID Director Wernecke at the Youngstown Service office.

2023 Fraud Finders

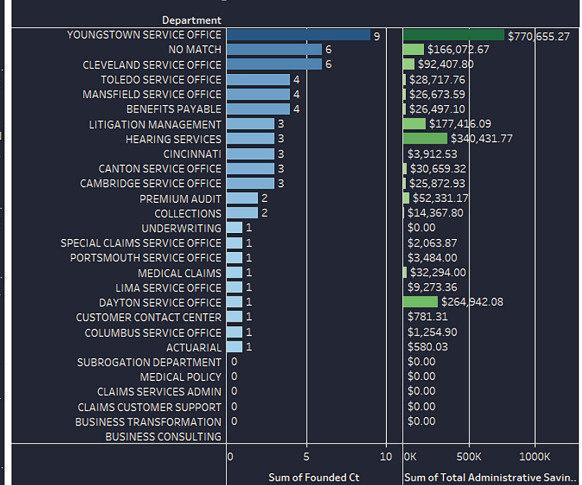
Founded Count by Department



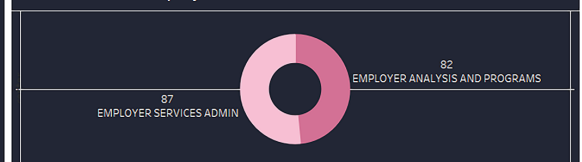
Department



Founded Count and Savings



Founded Count Employer Services



Presentations

We conduct virtual and in-person fraud presentations for internal and external stakeholders to educate them about strategies we deploy to accomplish our departmental mission. In doing so, we also let them know how they might join us in combating fraud. These stakeholders and other audiences have included:

- BWC departments.
- Educators: High schools, career centers, colleges, and universities.
- International organizations, such as the International Association of Special Investigation Units (IASIU).
- Local, state, and federal agencies.
- Medical providers and managed care organizations.
- Members of bar associations, chambers of commerce, and safety councils.
- Public and private employers.
- Third-party administrators.

We share examples of successful cases and teach attendees how to detect and report suspected fraud. Our customers tell us these presentations are effective.

Giving back

SID delivered the carload of infant supplies to The Heartbeat of Ohio on Dec. 6, 2023. This year, the team raised and provided over \$1,000 in supplies and money to The Heartbeat of Ohio, which provides diapers and infant supplies for children of indigent and unfortunate parents.



To address the devastation from the EF3 tornado on March 14 that ravaged the Indian Lake area, killing three people, demolishing over 300 homes, and severely damaging over 1,000 businesses and properties, Region 3 Claimant Team raised more than \$250 to buy necessary supplies for Indian Lake residents, including:

- Nine 168 oz Tide liquid laundry detergent containers
- Three 74 oz Dawn dish detergent containers
- Three cases of paper towels
- Five cases of industrial garbage bags
- One case of shop towels
- Eight large plastic storage totes
- One 140 oz Simple Green cleaner



Acknowledgment

The significant accomplishments achieved during this fiscal year are a direct result of our resolute investigative professionals. Their efforts create safer workplaces and ensure those who attempt to commit fraud in workers' compensation are held accountable to the fullest extent of the law. SID Management celebrates the successes of each SID employee and thanks BWC Executive Staff and the Board of Directors for their continued support in our efforts to fight fraud and investigate workplace safety.

Conclusion

Fiscal Year 2024 proved to be another successful year for SID as we investigated thousands of allegations, ended hundreds of open cases, saved the State Insurance Fund more than \$72M, and worked as "One Agency" with other departments in state and local government to effectively prevent and detect fraud. We remain united in our commitment to protecting this fund and the Ohio workers and employers it serves. We join our colleagues throughout this agency in delivering the people of this state the world-class workers' compensation system they deserve.

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