



Commonwealth of Massachusetts
Office of the State Auditor
Suzanne M. Bump

Making government work better

Official Report – February 18, 2021

Bureau of Special Investigations Annual Report

Fiscal Year 2020
July 1, 2019–June 30, 2020



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ABOUT THE BUREAU OF SPECIAL INVESTIGATIONS

As part of the Office of the State Auditor, the Bureau of Special Investigations (BSI) is charged with investigating allegations of public assistance fraud throughout the Commonwealth. The diligent work of BSI examiners ensures that taxpayer dollars, which fund Massachusetts’s public benefits programs, are used effectively so that those benefits are available to residents who truly need them.

Under state law, BSI’s investigative authority extends to any assistance program administered by the Department of Transitional Assistance (DTA), the Department of Children and Families,¹ and the Division of Medical Assistance (which administers MassHealth, the state’s Medicaid program). Although the Department of Early Education and Care (EEC) is not included in the BSI statute, BSI works with EEC through a memorandum of understanding. As a result of BSI’s investigations, public assistance fraud cases are referred to agencies for administrative action, fraudulent overpayments are recovered through civil agreements, individuals are disqualified from programs for specified periods of time, and cases are prosecuted in state district or superior courts and the US District Court for the District of Massachusetts. BSI recommends cases for prosecution based on the severity of the fraud, the intent of the perpetrator, and the possibility for the case to serve as a deterrent to future fraud.

Working under Section 17 of Chapter 11 of the Massachusetts General Laws, BSI examiners operate from five offices across the Commonwealth. BSI consists of three separate investigative units: the Central Processing Unit, the MassHealth/DTA Unit, and the Data Analytics Unit. Each unit is headed by an assistant director who reports directly to the director of BSI. While each unit has its own specific concentration, all of the BSI units collaborate with one another, as investigations often involve more than one benefit program activity. BSI participates in joint investigations and task forces that focus on combating fraudulent activities with other state and federal agencies across the Commonwealth.

This report, as statutorily required, summarizes BSI’s work in fiscal year 2020.

1 The Department of Children and Families does not administer public assistance funding and therefore does not fall within the scope of BSI’s investigative work.

EXECUTIVE SUMMARY

On March 10, 2020, Massachusetts Governor Charles Baker issued a Declaration of a State of Emergency in response to the COVID-19 pandemic. On March 13, 2020, President Donald Trump issued a similar declaration of a national emergency. The COVID-19 pandemic has effected nearly every aspect of government work, including the work of BSI. Beginning in March 2020, BSI staff members transitioned to working outside of their primary office locations in Boston, Chicopee, and Brockton. Although faced with unprecedented challenges, the work of BSI continued by using technology and innovation. The fiscal year 2020 (FY20) Bureau of Investigations Annual Report summarizes BSI's work and initiatives to execute the Office of the State Auditor's mission to make government work better. This is done through BSI's statutory charge to investigate fraud, abuse, and illegal acts involving public assistance benefits throughout the Commonwealth. During FY20, BSI continued to investigate and identify fraud in order to maintain program integrity and uphold the Commonwealth's residents' faith in public assistance programs. BSI's efforts ensure that public assistance programs operate with transparency so that benefits are available to residents who truly need them.

In FY20, BSI opened 3,770 new investigations and completed 4,191 total investigations.² This report includes a comprehensive breakdown of the fraud identified within each program BSI investigates. Of the 482 completed cases with identified fraud,³ the average amount of fraud was \$16,938.67.

**In FY20, BSI identified
\$8,164,438.85
in fraud.**

Public assistance programs administered by the Department of Transitional Assistance, the Department of Early Education and Care, and MassHealth provide vital social services for the Commonwealth's most vulnerable and disadvantaged residents—children, persons with disabilities, low-income individuals and families, and seniors. Statistical data on BSI cases from FY20 demonstrates that the cases BSI investigated most frequently involved allegations of undisclosed employment, an unreported non-custodial parent in the home, or a dependent no longer in the home. By contrast, BSI investigated cases with allegations of other earners in the home the least. Looking at the cases BSI investigated during FY20

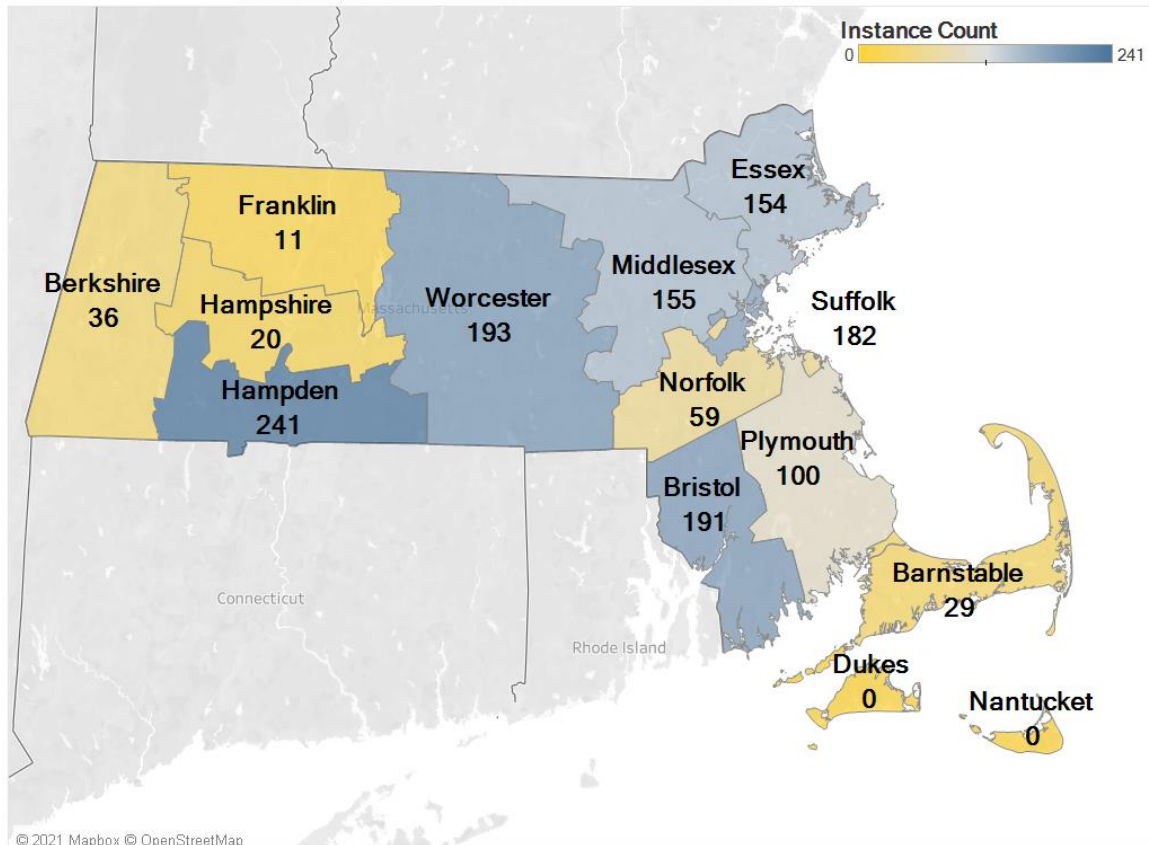
2 Although BSI does not investigate allegations of fraud pertaining to the Department of Unemployment Assistance (DUA), BSI served as a conduit for citizens potentially impacted by DUA fraud. From May 2020 through June 2020, BSI fielded 579 phone calls from citizens reporting DUA fraud and relayed their information to DUA.

3 Certain aspects of BSI's business processes were significantly impacted at the end of FY20 due to COVID-19. The reflected total does not include up to 50 cases that were completed but did not have a fraud calculation at the close of FY20.

from a different perspective, the geographical statistical data shows that Hampden, Worcester, and Bristol Counties generated the most allegations overall. Dukes, Nantucket, and Franklin Counties generated the least number of allegations.

Highlighting the new capabilities of the Data Analytics Unit's analytical support services, the following maps illustrate FY20's total fraud allegations by county.

Figure 1. Fiscal Year 2020 (FY20) Total Fraud Instances by County



Note: The total number of allegations is higher than the total completed case count because there are often multiple allegations per BSI case number. The grand total as reflected does not filter out duplicate BSI case numbers; the count only includes the unique number of allegations.

Table 1A. FY20 Total Fraud Allegations by Allegation Type and County

Allegation	Barnstable	Berkshire	Bristol	Dukes	Essex	Franklin	Hampden	Total
Assets	1	1	4	0	6	0	3	<u>15</u>
Child Care	0	0	0	0	0	0	0	<u>0</u>
Dependent Not in Home	7	8	30	0	19	2	29	<u>95</u>
EBT Fraud	0	0	0	0	1	0	0	<u>1</u>
Employment	8	6	68	0	39	2	69	<u>192</u>
False Identity	0	0	0	0	5	0	0	<u>5</u>
Multiple Assistance	0	0	2	0	0	0	1	<u>3</u>
NCP Present	4	8	33	0	32	2	64	<u>143</u>
Non Resident	3	1	10	0	8	1	10	<u>33</u>
Other	0	0	1	0	0	0	0	<u>1</u>

Allegation	Barnstable	Berkshire	Bristol	Dukes	Essex	Franklin	Hampden	Total
Other Earner in the Home	1	3	13	0	17	0	28	<u>62</u>
Out of State	0	1	3	0	8	2	6	<u>20</u>
Personal Care Attendant	2	5	3	0	9	1	8	<u>28</u>
Subject Living Above Means	3	2	19	0	8	1	21	<u>54</u>
Support Payments	0	0	3	0	2	0	1	<u>6</u>
Trafficking	0	0	2	0	0	0	0	<u>2</u>
Unemployment Compensation	0	1	0	0	0	0	1	<u>2</u>
Grand Total	<u>29</u>	<u>36</u>	<u>191</u>	<u>0</u>	<u>154</u>	<u>11</u>	<u>241</u>	<u>662</u>

Table 1B. FY20 Total Fraud Allegations by Allegation Type and County

Allegation	Hampshire	Middlesex	Nantucket	Norfolk	Plymouth	Suffolk	Worcester	Grand Total
Assets	2	2	0	2	1	4	3	<u>14</u>
Child Care	0	1	0	0	0	0	0	<u>1</u>
Dependent Not in Home	3	21	0	8	9	17	37	<u>95</u>
Electronic Benefit Transfer Fraud (EBT) Fraud	0	1	0	0	2	0	1	<u>4</u>
Employment	3	46	0	13	33	66	44	<u>205</u>
False Identity	0	1	0	0	0	2	1	<u>4</u>
Multiple Assistance	1	1	0	0	0	1	4	<u>7</u>
Non-Custodial Parent (NCP) Present	4	28	0	9	19	29	38	<u>127</u>
Non Resident	1	3	0	3	4	11	7	<u>29</u>
Other	0	0	0	0	0	0	0	<u>0</u>
Other Earner in the Home	4	16	0	12	11	19	21	<u>83</u>
Out of State	0	5	0	1	2	6	8	<u>22</u>
Personal Care Attendant	1	8	0	1	2	12	6	<u>30</u>
Subject Living Above Means	1	19	0	8	16	13	23	<u>80</u>
Support Payments	0	2	0	1	0	1	0	<u>4</u>
Trafficking	0	0	0	0	0	0	0	<u>0</u>
Unemployment Compensation	0	1	0	1	1	1	0	<u>4</u>
Grand Total	<u>20</u>	<u>155</u>	<u>0</u>	<u>59</u>	<u>100</u>	<u>182</u>	<u>193</u>	<u>709</u>

FY20 Itemized Fraud Instances by County

Figure 2. Employment Fraud Instances

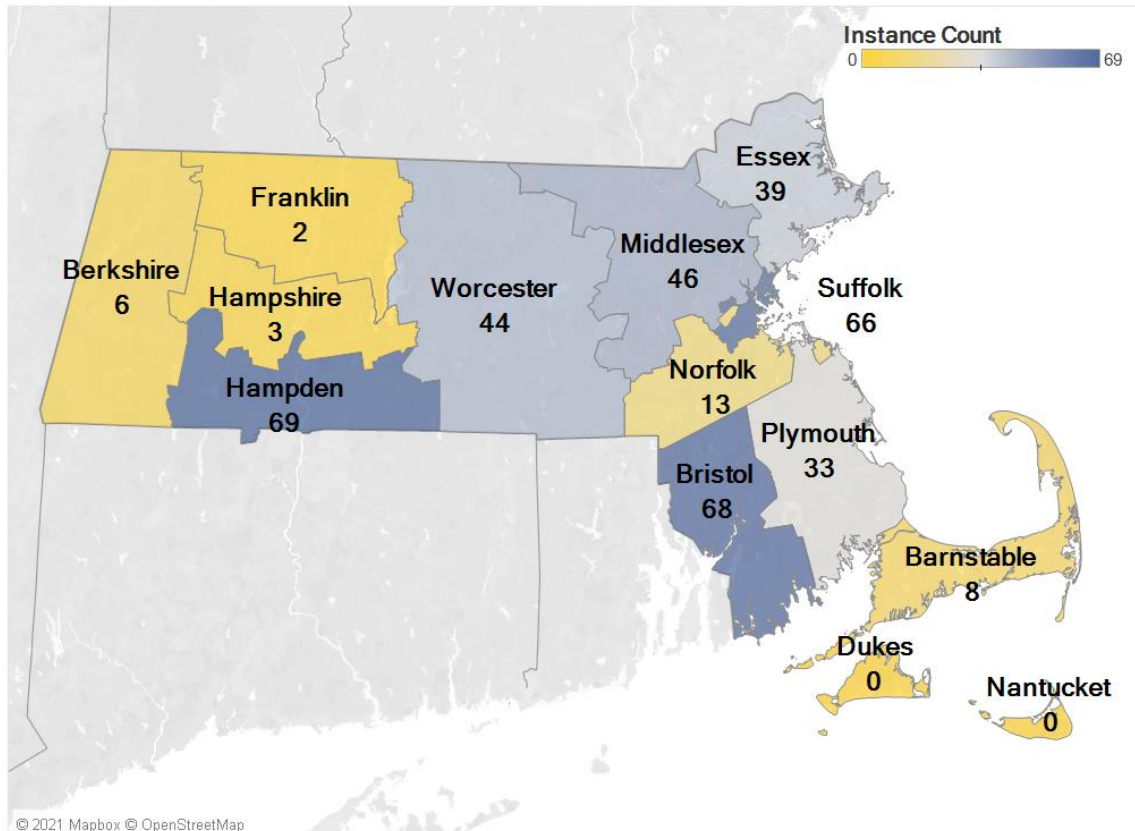


Figure 3. Non-Custodial Parent Fraud Instances

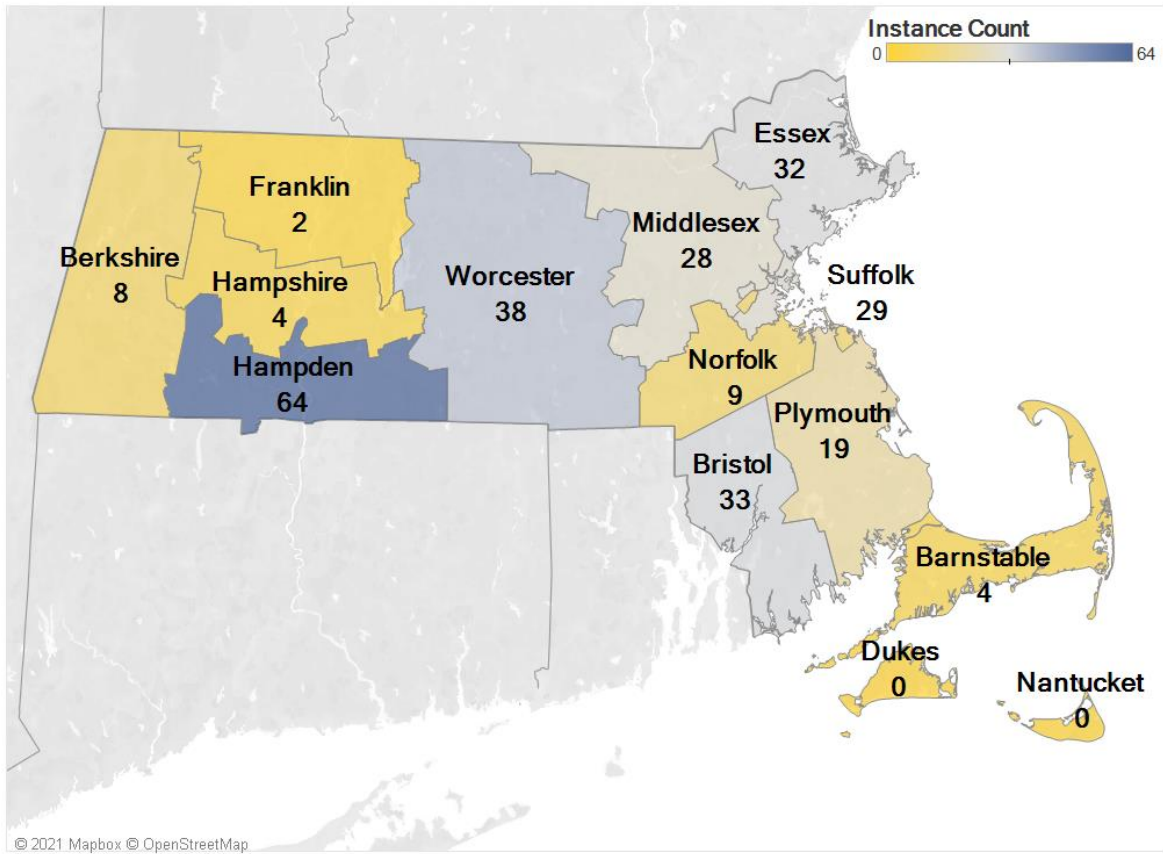


Figure 4. Dependent Not in the Home Fraud Instances

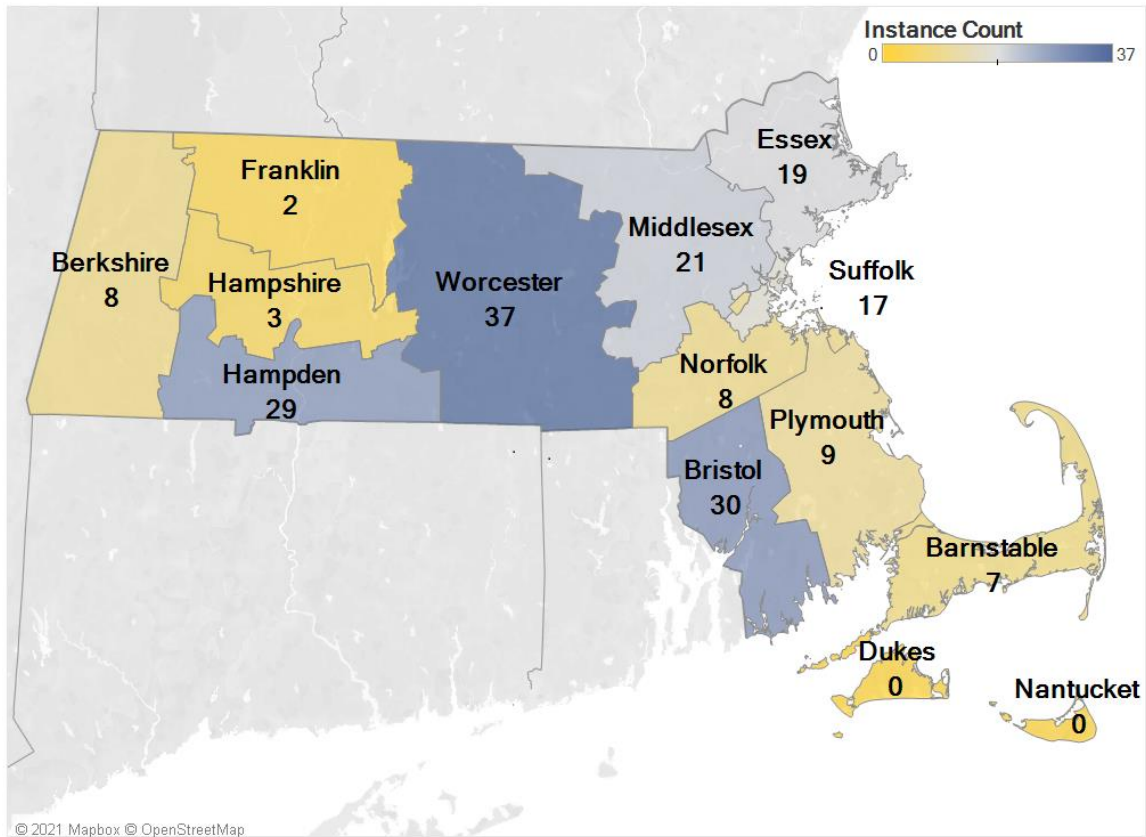
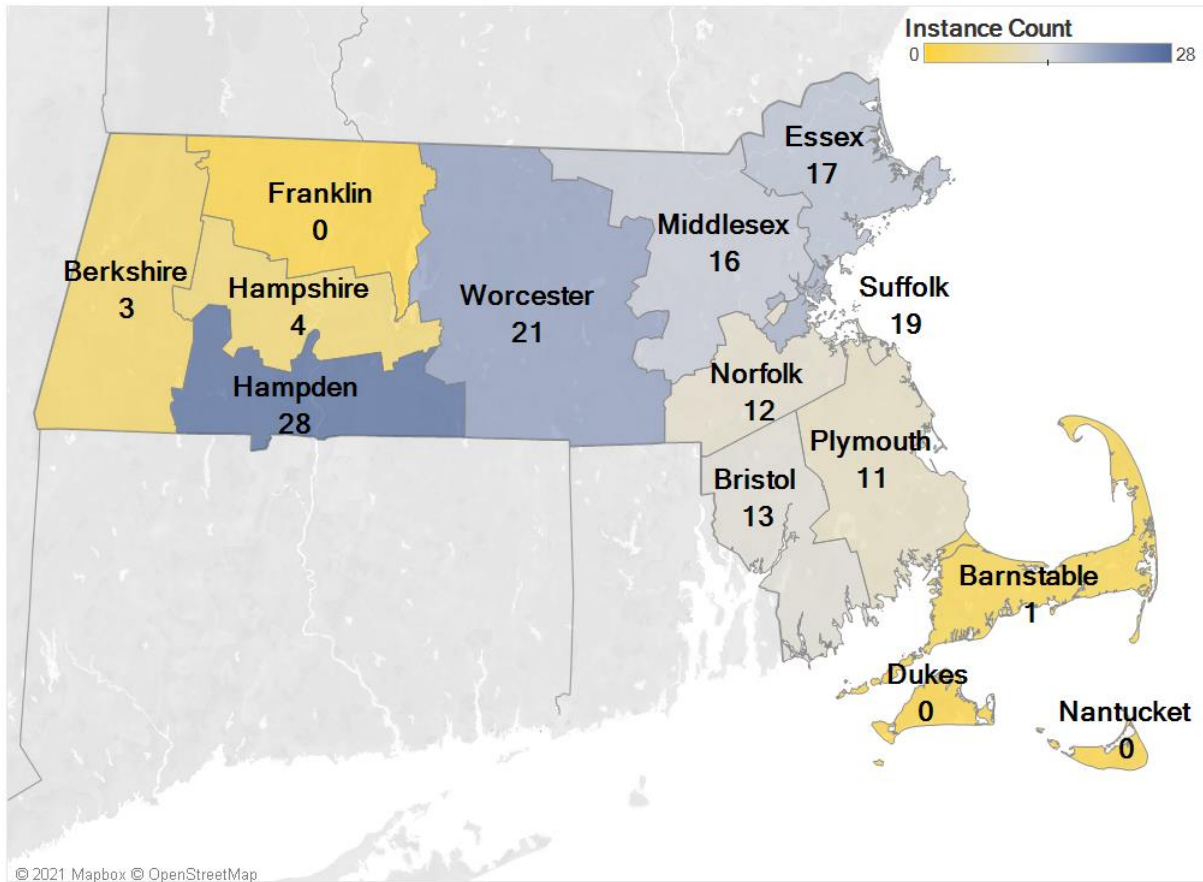
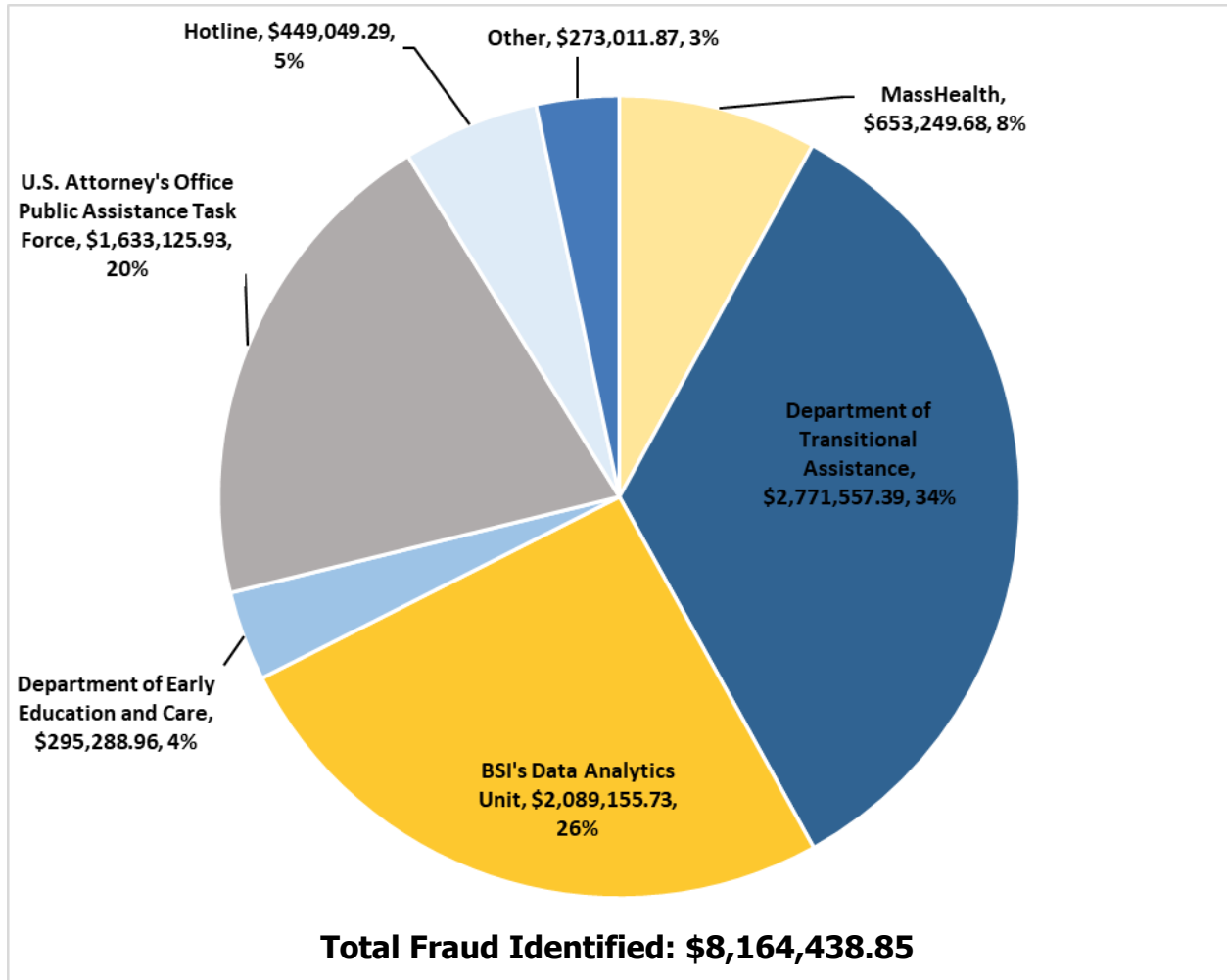


Figure 5. Other Earner in the Home Fraud Instances



BSI YEAR IN REVIEW

Figure 6. Fiscal Year 2020 Fraud Dollars Identified by Public Benefit Program



BSI By the Numbers

- 1,952: BSI cases at the start of fiscal year 2020 (FY20)
- 3,770: New investigations
- 4,191: Total completed investigations
- 482: Completed investigations with identified fraud
- 1,531: BSI cases at the start of fiscal year 2021

Table 2. FY20 Caseload by Referral Source

Caseload	Department of Early Education and Care	Data Analytics Unit	MassHealth	Department of Transitional Assistance	Hotline	Task Force	Other	Total
Beginning Balance	12	50	266	1,318	257	40	9	<u>1,952</u>
New Investigations	7	160	968	2,151	451	14	19	<u>3,770</u>
Total Completed Investigations	9	75	1,004	2,539	527	29	8	<u>4,191</u>
Completed with No Fraud	2	29	951	1,377	434	7	7	<u>2,807</u>
Completed with Identified Fraud	7	46	51	316	39	22	1	<u>482</u>
Completed as Potential Intentional Program Violation	0	0	2	846	54	0	0	<u>902</u>

Closed Cases with Identified Fraud by Disposition

When BSI investigations are completed, BSI fraud examiners have to make determinations regarding the final resolutions of the cases, which may include referring the matter for prosecution, completing a civil recovery or referring the matter for further action. Cases referred for prosecution are cases in which BSI files a criminal complaint against the subject(s) or refers the case to the District Attorney's Office, the Attorney General's Office, or the US Attorney's Office.

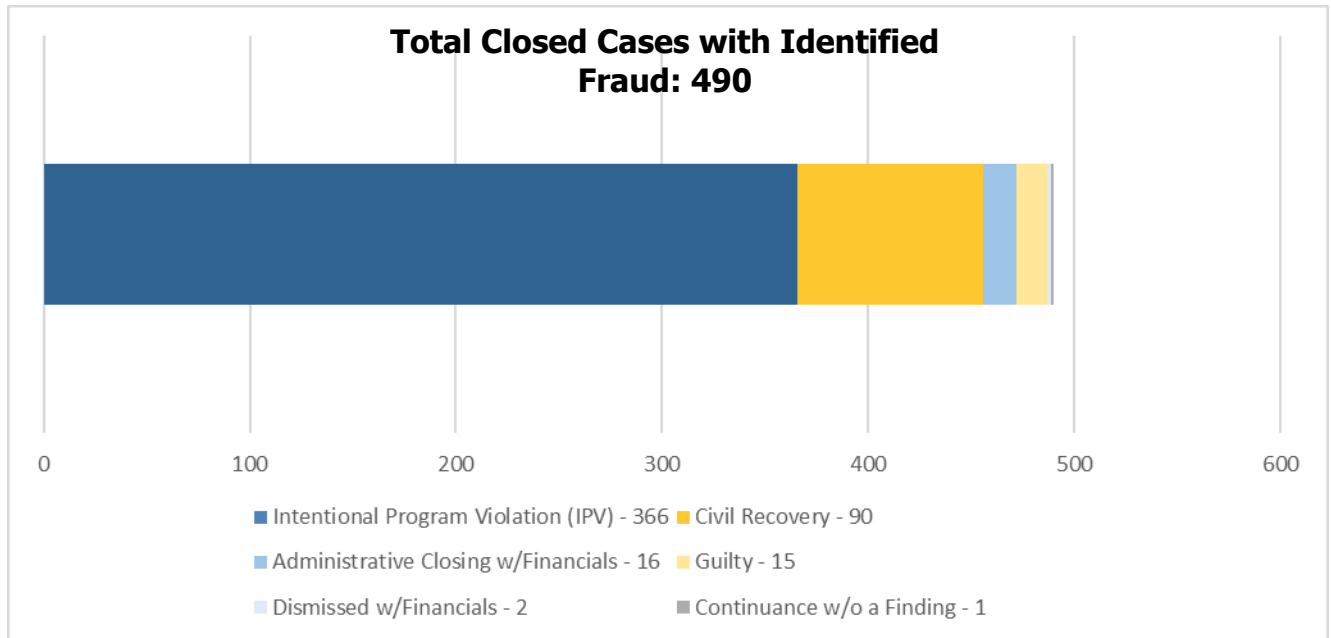
All investigations that are completed and closed by BSI are considered closed cases, with or without identified fraud. In some instances, cases are closed not because there was no fraud present, but because BSI cannot obtain the necessary documentation to substantiate the fraud, or because the individual was not receiving public assistance benefits during the period of allegation. Closed cases have been adjudicated completely, and BSI will not pursue any further action.

BSI uses different disposition codes to categorize closed investigations with identified fraud: intentional program violation (IPV), administrative closing with financials, civil recovery, continued without a finding, guilty, dismissed with financials, and warrant issued. During FY20, BSI closed 490 cases with identified fraud: 366 IPVs, 90 civil recoveries, 16 administrative closings with financials, 15 guilty court dispositions, 2 dismissals with financials, and 1 continuance without a finding.

- IPVs are cases that are returned to the DTA, MassHealth, or the Department of Early Education and Care to be handled administratively by those agencies.
- Administrative closing with financials are cases that are completed with an overpayment calculation, but recovery was not completed due to various factors (subject deceased, subject moved and BSI unable to locate, BSI error).
- Civil recovery cases are resolved through an agreement in which subjects agree to pay back part or all of the fraudulently obtained benefits to the Commonwealth. Repayment terms must follow the originating agency's rules and regulations.
- Continuance without a finding are completed cases with identified fraud that were referred for prosecution where the subject admits that there is sufficient evidence against him/her for a reasonable jury to find them guilty of the charged offense(s).
- Guilty are completed cases with identified fraud that were referred for prosecution where the subject has either pleaded guilty or received a guilty verdict after a bench or jury trial.

- Dismissed with financials are completed cases with identified fraud that were referred for prosecution where the court dismisses the case; the matter may be returned to the benefit program for further action.

Figure 7. Summary of Closed Cases with Identified Fraud for FY20



FISCAL YEAR 2020 SUMMARY BY UNIT

Central Processing Unit

The Central Processing Unit (CPU) received 3,770 new referrals for investigation in fiscal year 2020 (FY20) from the following sources.

Table 3. FY20 CPU Referral Sources

Source	Number of Referrals	Percentage of Total
Department of Transitional Assistance	2,151	57%
MassHealth	968	25.7%
Hotline	451	12%
Data Analytics Unit	160	4.2%
Other	19	0.5%
Task Force	14	0.4%
Department of Early Education and Care	7	0.2%

The following is a breakdown of the public assistance programs involved in the 3,770 new referrals.

Table 4. FY20 CPU Caseload by Public Assistance Program

Type	Number of Cases	Percentage of Total*
Supplemental Nutrition Assistance Program	1,661	44%
MassHealth	1,400	37.1%
Transitional Aid to Families with Dependent Children	448	11.9%
Emergency Aid to the Elderly, Disabled and Children	246	6.5%
Other	9	0.2%
Classification to Be Determined	5	0.1%
Department of Early Education and Care	1	.03%

* Percentages do not total 100 because of rounding.

In FY20, CPU processed, analyzed, and reviewed 3,892 referrals. CPU team members identified 778 referrals as potential intentional program violation (IPV) cases, where BSI determined that a fraud claim had merit but returned the case to the Department of Transitional Assistance (DTA) for further action based on the evidence. Typical agency actions include civil recovery, disqualification, and recalculation

of benefits. Additionally, CPU closed 2,204 referrals administratively with no fraud determined after completing preliminary investigations. CPU designated 910 referrals for case assignment. CPU team members continued to carry a small caseload in FY20. The unit also completed 51 individual investigations.

In March 2020, with the onset of the COVID-19 pandemic, CPU team members and BSI staff began working remotely. Necessity created the opportunity to think outside of the box and apply technology in order to work efficiently and with minimal interruption while still meeting the unit's goals and completing vital tasks. The entire agency has become paperless and streamlined; it employs web-based communications using GoToMeetings and Slack. Our video communications simulate the office experience and have improved overall morale, connectivity, and productivity.

MassHealth/DTA Unit

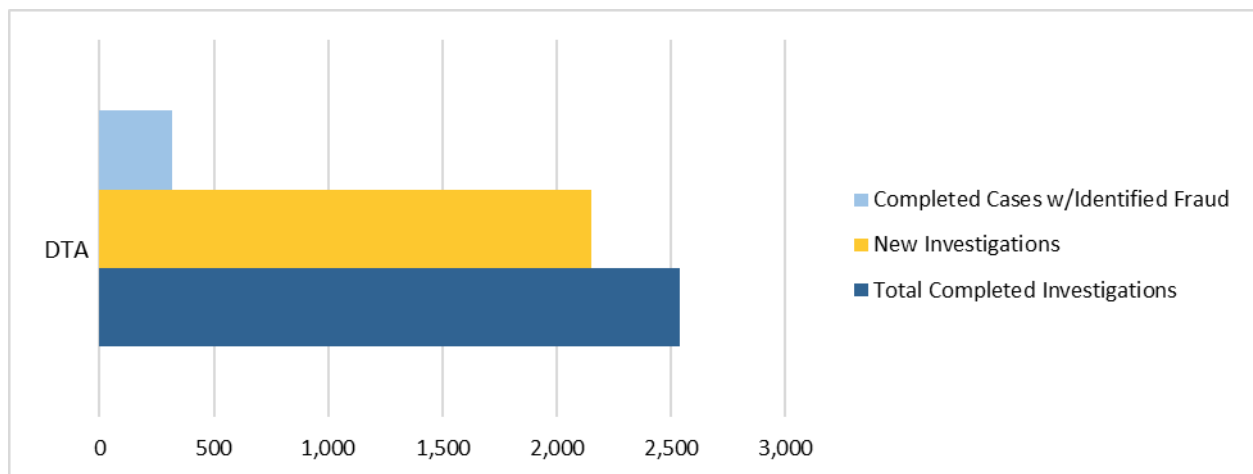
In recognizing that fraud can occur in more than one public benefit program, as shown in BSI investigations, the MassHealth and DTA units combined to create the Super Fraud Unit. As a result, the Super Fraud Unit consists of six fraud examiners and six senior fraud examiners who are under the supervision of an assistant director and two supervising fraud examiners.

The Super Fraud Unit was assigned 573 new cases in FY20, completed 769 cases, and identified fraud totaling \$6,172,898.55 in 444 cases. The unit’s breakdown of identified fraud by public benefit program was as follows:

- \$2,461,996.60 for MassHealth (MA) investigations (39.9%)
- \$2,089,460.76 for Supplemental Nutrition Assistance Program (SNAP) investigations (33.8%)
- \$771,178.86 for Transitional Aid to Families with Dependent Children (TAFDC) investigations (12.5%)
- \$266,633.86 for Department of Early Education and Care (EEC) investigations (4.3%)
- \$165,915.28 for Emergency Aid to the Elderly, Disabled and Children (EAEDC) investigations (2.7%)

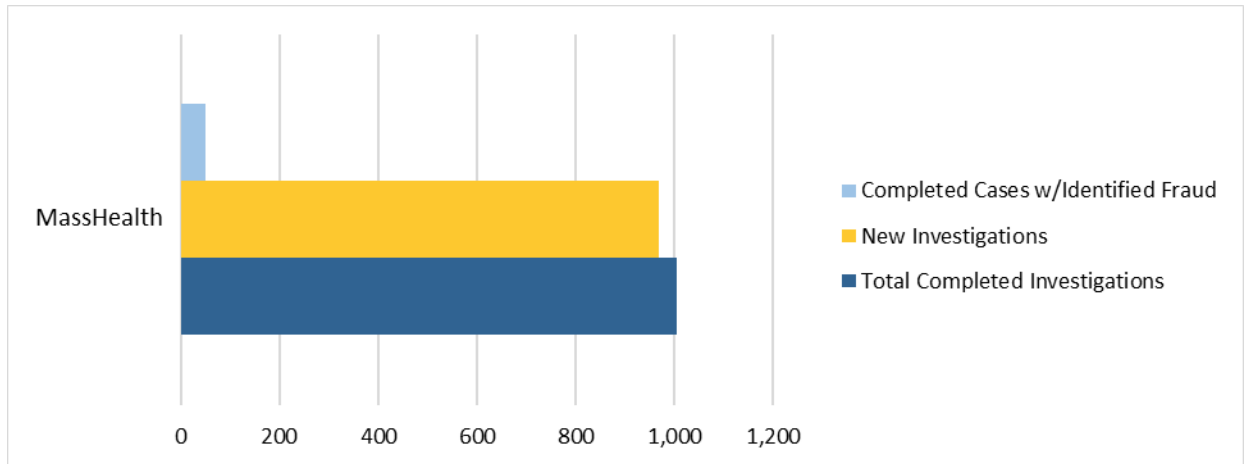
In FY20, the unit filed criminal charges in 10 cases in various courts throughout the Commonwealth. Two cases resulted in an indictment in US District Court, while 8 cases were charged in district courts.

Figure 8. FY20 DTA Caseload



Note: BSI’s DTA caseload for FY20 included SNAP, TAFDC, and EAEDC cases.

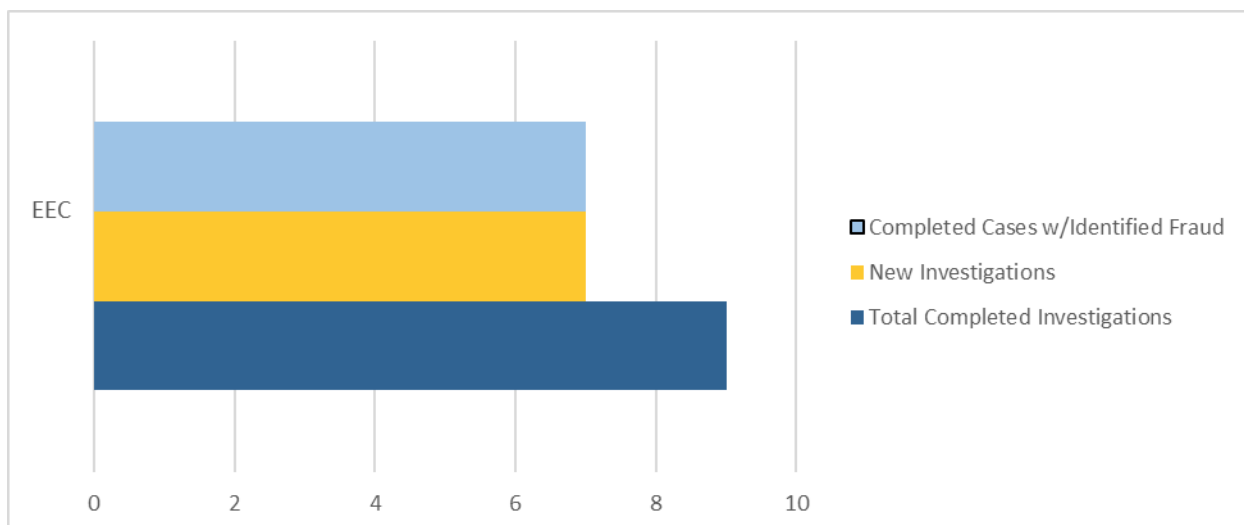
Figure 9. FY20 MassHealth Caseload



In addition, the unit received seven referrals from EEC and identified \$295,288.96 in fraud from these referrals. As part of BSI’s continued working relationship with EEC, EEC’s designated financial assistance worker liaison with BSI is able to efficiently track and assist with BSI’s EEC caseload and provide much-needed documentation and information in an expedited manner for speedier investigations.

Because individuals suspected of defrauding EEC often also receive other forms of public assistance, BSI routinely checks EEC subjects’ other public assistance benefits and, in particular, their reporting of household income and composition to other agencies. These supplemental investigations have led to the discovery of additional fraud in DTA and MassHealth public benefit programs.

Figure 10. FY20 EEC Caseload



The unit also conducted 90 civil recoveries in FY20. In those cases, subjects had the opportunity to enter into repayment agreements with DTA and/or EEC. In FY20, BSI initiated repayment agreements and disqualification consent agreements (DCAs) totaling \$2,073,379.24. DCAs are agreements subjects sign to disqualify themselves from receiving further DTA and/or EEC benefits because of their IPVs. When pursuing civil recovery for DTA and EEC cases, BSI requires DCAs rather than administrative hearings.

Data Analytics Unit

The growth of BSI's Data Analytics Unit (DAU), its increasing technical capabilities, and its continued collaboration with partners led to 160⁴ referrals to CPU. Indeed, BSI's DAU's referrals increased by more than 125% in FY20. The majority of these referrals alleged that personal care attendants (PCAs) falsely submitted timesheets for services to MassHealth members in long-term-care facilities and PCAs were not reporting income earned as PCAs to DTA as required while receiving public assistance benefits. BSI's DAU also continued to field referrals from BSI's Public Assistance Fraud Hotline. BSI's DAU received and analyzed 12 referrals made through the hotline alleging provider fraud, many of which remain ongoing.

In addition, using advanced data analysis, BSI's DAU was able to identify MassHealth providers with a high potential for fraud. The unit identified and referred seven MassHealth providers. The analysis of these referrals focused on improper billing associated with a variety of healthcare providers and services, including, but not limited to, dental services, hospice services, physician services, evaluation and management services, and the use of certain claim modifiers.

In accordance with the standard operating procedure between Audit Operation's DAU, BSI's DAU, and the Office of the State Auditor's (OSA's) Medicaid Fraud Unit, BSI's DAU referred six MassHealth providers to OSA's Medicaid Audit Unit before FY20. This cross-unit collaboration led to the Medicaid Audit Unit featuring BSI DAU's findings in four audits issued in FY20. These audits examined adult foster care, home health, and physical therapy services. (<https://www.mass.gov/lists/audits-initiated-based-on-referrals-from-bsi>)

BSI's DAU continues to support multiple state and federal partners through joint investigative work in addition to accepting referrals for investigation and creating and sending referrals to the appropriate entities. During FY20, BSI's DAU continued to collaborate with federal partners, including the Office of the Inspector General's Office of Investigations and the Executive Office of Health and Human Services, on two ongoing investigations related to services provided within both the Medicaid and Medicare programs.

4 During FY20, DAU generated 244 referrals to CPU. However, only 160 of these referrals were entered into BSI's case management system before the end of the fiscal year, so the remaining 84 referrals will be included in the FY21 Annual Report.

Lastly, BSI's DAU continued to collaborate with OSA's Information Technology team and Audit Operation's DAU to identify and acquire new software and technology for use by several divisions within OSA. Specifically, BSI's DAU assisted with the acquisition of OSA's Optical Character Recognition (OCR) software. BSI's DAU continues to test this software and will implement the tool in several of BSI's work processes once complete. The implementation of the OCR software will assist in automating and streamlining several aspects of BSI's work by electronically converting images into a word, excel, or plain text format and extracting images into searchable files.

NOTABLE BSI ACTIVITY

Indictments issued in US District Court for Theft of Government Benefits.

On July 31, 2019, a Fitchburg woman was indicted in the US District Court in Boston on three counts of theft of public funds and two counts of making false statements. The woman entered a plea of not guilty. The indictment alleges the woman fraudulently received \$71,462 in Social Security benefits, \$6,444 in MassHealth benefits, and \$13,505 in Supplemental Nutrition Assistance Program (SNAP) benefits by falsely informing the Department of Transitional Assistance (DTA) and the Social Security Administration about the members of her household.

On February 21, 2020, a Cambridge woman was indicted in the US District Court in Boston on two counts of theft of government benefits. The woman entered a plea of not guilty. The indictment alleges the woman fraudulently received approximately \$71,636 in Social Security benefits and \$13,923 in SNAP benefits from December 2009 through September 2018 by failing to report that her mother, the rightful recipient of these benefits, was deceased.

Lowell Woman Found Guilty of Public Assistance Fraud and Larceny Following Bench Trial.

On January 10, 2020, a Lowell woman was found guilty, following a bench trial before Judge Michael Fabbri, of larceny over \$250 and public assistance fraud in Lowell District Court. The complaint alleged that the woman intentionally withheld information from the Department of Early Education and Care (EEC), by failing to disclose to EEC that the father of her dependent was employed and residing in her home. Over the course of seven months, she fraudulently collected \$8,812.02 in EEC childcare vouchers for her dependent. Had the woman disclosed she was living with the dependent's father and in receipt of additional earned-income, she would not have been eligible to qualify for EEC childcare benefits. Sentencing is still pending due to the pandemic.

North Attleboro Woman Sentenced for Larceny and Public Assistance Fraud.

On February 28, 2020, a North Attleboro woman admitted to sufficient facts on one count of larceny over \$1200 and public assistance fraud. She was originally charged with one count of public assistance fraud, one count of making a false statement for medical assistance, and one count of larceny over \$1200 for failing to report her household income and composition to MassHealth and DTA. However,

the medical assistance charge was dismissed as part of her plea agreement. The court sentenced her to a continuance without a finding for two years until February 28, 2022; administrative supervision during that time; and \$2400 in restitution to DTA payable through monthly payments of \$100.

Despite Pandemic, BSI Participation in Document and Benefit Fraud Task Force Continues.

As an active member of the US Attorney’s Public Assistance Fraud Task Force, BSI received 16 referrals in fiscal year 2020. BSI also continued to serve on the Homeland Security Investigation’s Document and Benefit Fraud Task Force (DBFTF), which comprises various local, state, and federal agencies with expertise in detecting, deterring, and disrupting organizations and individuals involved in various types of document, identity, and benefit fraud schemes.

DBFTF’s “Double Trouble” investigation continued to identify suspected aliens, predominately from the Dominican Republic, who allegedly obtained stolen identities of United States citizens living in Puerto Rico and then used those identities to obtain documents and public benefits that they would not otherwise be eligible to receive. Most frequently, these benefits included Registry of Motor Vehicles identity documents, Social Security numbers, Medicaid, unemployment compensation, and public housing subsidies. During FY20, the defendants in two separate Double Trouble cases pleaded guilty. (<https://www.justice.gov/usao-ma/pr/25-charged-federal-document-and-benefit-fraud-sweep>).

On August 2, 2019, Jose Lopez Rosado, 51, who escaped prison in Puerto Rico in 1994 while serving a 40-year sentence for murder, pleaded guilty to one count of false representation of a Social Security number and one count of aggravated identity theft. Rosado’s true name was unknown until his arrest during the federal sweep in July 2018.

Lopez Rosado applied for a duplicate Massachusetts driver’s license using the name and Social Security number of another US citizen on February 9, 2016. Based on the application, Lopez Rosado was issued a duplicate driver’s license in the name of the other US citizen. Lopez Rosado also used that name and Social Security number to receive MassHealth benefits. (<https://www.justice.gov/usao-ma/pr/worcester-man-pleads-guilty-social-security-fraud-and-identity-theft>)

On April 22, 2020, Wandil Mejia Jimenez, a Dominican national previously residing in Dorchester, was sentenced in connection with using a US citizen’s identity. Mejia Jimenez was detained following his arrest in June 2019, and in January 2020, he pleaded guilty to one count of false representation of a

Social Security number. At a videoconference hearing before US District Court Judge Denise J. Casper, Mejia Jimenez was sentenced to time served, approximately 12 months, and became subject to deportation proceedings.

In 2014, Mejia Jimenez used the name and identifiers of a US citizen to apply for a Massachusetts driver's license and other identification documents from the Massachusetts Registry of Motor Vehicles. Mejia Jimenez used this citizen's name to open bank accounts, including bank accounts that were closed with negative balances. He was also arrested for cocaine trafficking under this citizen's name. It was around the time of his arrest that police seized a Dominican Republic passport in Mejia Jimenez's true name. (<https://www.justice.gov/usao-ma/pr/dominican-national-sentenced-identity-theft-10>)

While the bulk of cases BSI investigates are referred from state agencies and law enforcement, the general public also plays a vital role in reporting fraud. The State Auditor's Office has an online form to report public assistance fraud: <https://www.mass.gov/forms/report-public-benefit-fraud-online>. Citizens can also use BSI's fraud reporting hotline: (617) 727-6771.

All complaints are kept confidential.