

AHCCCS FRAUD PREVENTION DETERMINATION AUTHORIZATION

MC Name *(Last, First, M.I.)* _____ Case No/HEAplus Appl ID _____
 Application Date _____ CA/NA Interview Date _____ AFPU Referral Date _____
 AFPU Phone Date _____ Email Address AFPU Report Sent to _____
 Date Sent _____

AFPU FINDINGS/COMMENTS <i>(Do not send to AFPU when the finding is "No Violation Found")</i>	
Findings	Comments:
Potential Violation Found	
Violation Found	
Inconclusive	
FAA VERIFICATION SOURCE / COMMENTS	
Verification Source	Comments:
Knowledgeable Person	
AZTECS / Wage Base	
AHCCCS Link (PMMIS)	
Assessor's Information	
Public Records Search	
Hospital Information	
Verification Specialist	
Other: <i>(Specify):</i> _____	

Case Approval Date _____ Case Denial Date _____
 Reason Case Approved/Denied _____

Supervision Signature _____ Date _____

**Email completed form and documentation to: FPU@azahcccs.gov
 Indicate either Maricopa or Pima in the Subject Line.**

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 • Free language assistance for DES services is available upon request.

**Completion Instructions for FAA-1182AFORFF
AHCCCS FRAUD PREVENTION DETERMINATION AUTHORIZATION**

A. Purpose. The purpose of the AHCCCS Fraud Prevention Determination Authorization form is to document the resolution of the AFPU potential violation or violation found and management's review and approval. This form is to be completed prior to ANY AFPU referred case being approved when a potential violation or violation is indicated.

B. Completion

CASE NAME: Enter the name of the Primary Informant (PI)/Main Contact (MC)

CASE NO.: Enter the AZTECS case number or HEAplus Application ID.

APPLICATION DATE: Enter the date of application.

AFPU REFERRAL DATE: Enter the date the case was referred to AFPU.

AFPU PHONE DATE: Enter the date AFPU contacted the FAA office.

EMAIL ADDRESS REPORT SENT TO: FAA Office Customer Service email address the report was sent to.

AFPU FINDINGS: Indicate with a (✓) check mark the AFPU findings. Document the investigators comment when the FAA office is contacted.

FAA VERIFICATION

SOURCE/COMMENTS: Indicate with a (✓) check mark the verification source. Document the type of verification used (mortgage statement, birth certificate, pay stubs, etc.) and why it is credible.

CASE APPROVAL/DENIAL DATE: Document the date the case/participant was approved or denied.

REASON CASE APPROVED/DENIED: Document the reason(s).

SUPERVISOR SIGNATURE: All MA approvals, which have AFPU findings with a negative impact on eligibility MUST have a Supervisor sign off before the determination is complete.

DATE: Date the review was completed.

C. Routing. Upload the FAA-1182A to OnBase and email the completed form to FPU@azahcccs.gov. In the Subject Line of the email indicate Maricopa or Pima.