## ARIZONA DEPARTMENT OF ECONOMIC SECURITY Family Assistance Administration

## **AHCCCS FRAUD PREVENTION DETERMINATION AUTHORIZATION**

MC Name (Last, First, M.I.):		Case No./HEAplus App ID:	
Application Date:	CA/NA Interview Date:	AFPU Referral Date:	
AFPU Phone Date:	Email Address AFPU Repo	rt Sent to:	
Date Sent:			
(Do not	AFPU FINDINGS/COM send to AFPU when the finding		
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 (Specify):			
Case Approval Date:	Case Denial Date:		
Reason Case Approved/Denied:			
Supervision Signature:		Date <sup>.</sup>	

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

## FAA-1182A FORFF (7-23) – Reverse Completion Instructions for FAA-1182A FORFF 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.

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