

THE COALITION QUARTERLY

Advocacy • Information • Outreach
Spring 2022

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EXECUTIVE DIRECTORS CORNER

Executive Director, Matthew J. Smith, Esq.

It certainly frightens me to say that somehow life appears to be returning to “normal.” We may not yet, or ever, have COVID totally behind us. However, it is refreshing to see our world and the anti-fraud community working so hard to move beyond the pandemic of the past two years.

As you will see in this issue, for the first time since COVID-19 raced across our world and nation, your Coalition is back on the road working hard to support our member’s programs and conferences to help spread the anti-fraud message and the need, especially for insurers to not scale back but increase their anti-fraud staffing and budgets coming out of the pandemic. Worldwide statistics show a [600% spike in phishing scams](#). The FTC reporting [identifies theft complaints doubling](#) during COVID, and the [DOJ announced indictments](#) in a major fraud case, including \$1.1Billion of telehealth fraud. This is not the time for insurers to be slashing dollars and staffing in their anti-fraud programs. Still sadly many are doing just that and electing to pass along the cost of insurance fraud through higher premiums. Doing so is nothing more than another form of insurance fraud.

The stories which follow in this edition of *Coalition Quarterly* detail how your Coalition is working diligently and strongly to spread the anti-fraud message. Take the time to meet our new Director of Communications, Joe Matos, who shares his vision for taking our outreach programs to new heights. Learn more about our advocacy efforts, whether regulatory, legislative or in the courts. You



Coalition Against
Insurance Fraud



will read about our many victories and we also try to educate our members on what we believe are bad new laws or decisions. We can best fight insurance fraud when we are fully informed.

Our research efforts are clearly a defining mission of the Coalition. In Data Point you can read about the two studies we have already completed in 2022 and the start in June of one of the most ambitious, and potentially impactful, studies the Coalition has ever undertaken dealing with the ethical use of data to fight insurance fraud.

I also genuinely hope you will join us in Orlando on June 6th & 7th for our [2022 Midyear Meeting](#). The Coalition always strives to provide you with important and informative leading-edge programming to assist your efforts. We are especially honored to announce [North Carolina Insurance Commissioner Mike Causey](#) will be one of our featured presenters for this meeting. Commissioner Causey has long been a friend, and ally of the Coalition and he will be sharing with our members about the case involving [Gregory Lindberg, a billionaire](#) insurance company executive who offered the Commissioner a bribe to avoid regulatory oversight. A federal jury convicted Lindberg, and sentenced him to more than 7 years in prison. Come hear the story directly from Commissioner Causey at our June meeting.

Thank you for your ongoing support of our efforts, for your willingness to always step up and out to assist and expand exponentially our work through your volunteering to serve on our committees, task forces and in so many other ways. We exist to support and help you but in no way could ever do so without each of you. You are our anti-fraud heroes. Keep up your great work.

Sincerely,

COALITION UPDATES

WELCOME JOE MATOS! MEET OUR NEW DIRECTOR OF COMMUNICATIONS



My [career](#) has taken me through a myriad of industries successfully working with and leading the charge for many fortune 100 brands, elevating each brand to its highest form of consumer recognizability. I've been honored with various awards and recognized by prestigious organizations across our nation. My passion for building and strengthening organizations led me to join the Coalition which adds another vital gear to the amazing internal work machine that consistently keeps both the Coalition's members and the public alike informed so they remain aware and at times ahead of the fraud curve. I look forward to working with each of our members.



JOIN US FOR OUR MIDYEAR MEETING



[Registration is now open](#) for the Coalition’s Midyear Meeting in Orlando, on June 6 & 7. We will gather again at the beautiful [Caribe Royale Resort](#), which underwent a complete renovation during the pandemic closure. Attendees will be treated to a wonderful opening reception on Monday night, followed by an action-packed anti-fraud agenda for Tuesday’s meeting. Speakers include North Carolina Insurance Commissioner Mike Causey, who will tell the story of “*Insurance Fraud at the Highest Levels.*” If you are not aware, Commissioner Causey was offered a bribe by a billionaire insurance executive to

stop regulators from looking too closely at his companies. In cooperation with federal officials, the Commissioner wore a “wire,” resulting in the billionaire’s conviction for fraud. You will also hear updates on Coalition programs, committees, and task forces and the very special announcement of the first update in a quarter-century of the Coalition’s \$80B cost of insurance fraud estimate. Our June meeting is truly one not to be missed! Be sure to stick around after the meeting, as on Wednesday, the ever-popular [Florida Insurance Fraud Education Committee \(FIFEC\) Conference](#) returns for the first time since 2019.



WELCOME TO OUR NEWEST FRAUD FIGHTING MEMBERS

Your Coalition continues to grow with new members raising our ranks to more than 260 anti-fraud organizations. Our new members represent both the diversity and the changes occurring across the fraud-fighting profession. Special kudos are owed to our Coalition Public Interest Co-Chair and Ohio’s Assistant Director of Fraud & Enforcement, Michelle Rafeld, who continues the quest of having all 51 state

departments of insurance as Coalition members. Through Michelle’s efforts, every DOI except four (Hawaii, Indiana, Maine, and South Dakota) are now a part of the Coalition ranks. Our goal remains to have all 51 on the membership roll by our Annual Meeting in December. In the meantime, please join us in welcoming our new industry, associate, and public sector Coalition members:



SIGNET CLAIM SOLUTIONS LLC



Coalition Against Insurance Fraud



OUR NEWEST TASK FORCE SETS ITS FIRST MEETING



In January, we announced the formation of our new Fraud Risk Management Task Force, along with plans for the inaugural meeting this Spring. Under the leadership of co-chairs James Rumph of Nationwide and Arteniece Lee of State Farm, the task force will kick off its first meeting on Friday, April 22nd, at 1 pm ET. The mission of the task force is to bring fraud risk professionals and leaders from Coalition member organizations together to collaborate, share best practices and build awareness of the need for collective enterprise fraud risk management. The task force aims to further enable the fight against all forms of fraud impacting the insurance industry and consumers. Focus areas will include fraud risk management, principles of fraud risk governance, risk assessment, control activities, and program monitoring. If you are interested in participating, please reach out to [James](#) or [Arteniece](#) to let them know.

PLANNING FOR OUR FUTURE

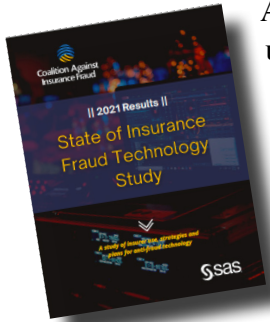


The strength of the Coalition rests on the tremendous efforts put forth by you, our members, and your willingness to support the Coalition's efforts in so many ways. Perhaps no group does more "behind the scenes" work to keep the Coalition strong than our tremendous [Executive Committee](#). This group oversees and directs the Coalition's mission, efforts and programs. Unlike any other anti-fraud organization, our By-Laws mandate this highest leadership level to be equally balanced between public and private sector Coalition member organizations. This helps fulfill the original founding goal of the Coalition to bring together both consumer advocacy and public entities with industry professionals all devoted to fighting against insurance fraud. In advance of our upcoming

Midyear Meeting, the Executive Committee gives their time and tremendous resources to meet for a special two-day planning and visioning session to chart out the Coalition's future for the next 3-5 years and perhaps beyond. Especially with an organization that has grown by more than 33% in the past two years, both new opportunities and new challenges are facing us moving forward. Our leaders welcome your thoughts and suggestions as they undertake this important step. Please share your ideas, visions, and thoughts by directing an email to [Executive Director Matthew Smith](#) who will forward all information for consideration.



OUTREACH



According to the latest insurance fraud technology study by the Coalition and SAS, insurers' use of predictive analytics to fight fraud has reached an all-time high. [The State of Insurance Fraud Technology](#) study reveals that 80% of insurers use predictive modeling to detect fraud, up 55% in 2018. In a category new to the 2021 survey, the study also underscores the importance of identity verification software, cited by 40% of survey respondents. Identity analytics is quickly becoming a must-have technology for insurers amid an alarming spike in malicious phishing scams, up 600% since the pandemic's onset.

This past February, with over 1000 fraud fighters registered, the Coalition dove deeper into the results of the technology report in a webinar event. This important webinar showcased a roster of subject matter experts such as **Kim Kuster**, Principle Business Consultant, Global Security Intelligence Practice, SAS, **David Hartley**, Global Director, Fraud and Financial Crime Practice, SAS, **Pranay Mittal**, V.P., of Investigative Services, Travelers Insurance, and **Dave Rioux**, V.P., Investigations & Internal Controls, Erie Insurance. It's a fascinating conversation that you will want to watch over and over. Catch up on what you missed and [watch the webinar today](#).



A glimpse back: As many of you may or may not know, our current [FraudPod](#) began in 2015 under the name "*FraudFeed*" and has been providing information to our members ever since. Initially all audio and available on both *SoundCloud* and *iTunes* with topics ranging from dental fraud, arson, and various arson cases. The episodes were delivered monthly. With the help of a research assistant, the information was gathered and interwoven with scripts that brought it all together. The Coalition elevated the execution of delivery using a professional voice-over talent, and topics became singular in nature for more of an in-depth dive, but from

2017 to 2021 the episodes were on hiatus.

Currently: The podcasts returned and rebranded as "*FraudPod*" blending in multimedia. It currently focuses less on just singular topics and cases and more on current insurance fraud trends, cases, and events/member happenings within the Coalition itself. The logo itself is a nice visual play on our brand identity utilizing headphones to signify listening.

What's ahead: With the addition of the new DOC, the *FraudPod's* effectiveness will be assessed in order to continue improving it for our current and future members, this will include, analytics based on the overall popularity to ensure that it has been a useful tool for everyone. Quality and marketing will also come into play to ensure ease of delivery and exposure to the membership. We will be looking into how the scheduling will continue for episode availability and scheduling guests ahead of time with topics that are incredibly relevant, informative, and gripping. How we deliver future *FraudPods* for our members is currently being discussed, so stay tuned.



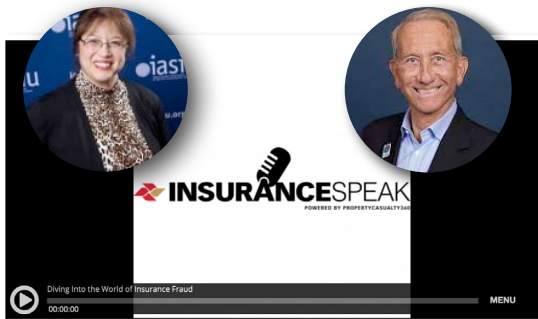
FRAUDBLOG

Our members have enjoyed the Coalition’s [FraudBlog](#) which contains the latest fraud news, trends, analysis and insightful updates. Topics can range from social media, DEI, public awareness, judicial to artificial intelligence. As stated on our website, it is considered to be America’s largest hub on the pulse of insurance fraud. Once only written by the Coalition staff, it has been opened up to members and partners alike who want to write on a topic of their choosing that they feel is worthy of sharing with the entire membership and the Coalition itself. Completely informative and thought provoking.

It is truly refreshing to know that we have hundreds of outstanding dedicated individuals who are passionate about what they do and who are ready, willing and able to share information through our *FraudBlog* platform. We urge our members to keep up with the latest news, cases and trends focusing on fraud by visiting our website under the publications tab. Actionable insight delivered year-around from the nation’s largest source of fraud news — all a “click” away. If you have not done so please sign up [here](#), it is easy and convenient. So you can learn what’s going on around you, and why it is happening.



INSURANCESPEAK PODCAST



Earlier this year host [Patti Harmon](#) Editor & Chief of [Claims Magazine](#) interviewed our own Executive Director Matthew Smith on the *InsuranceSpeak* podcast after he delivered the closing keynote address at the [ACE conference](#), Patti wanted her listeners to get a better idea about the creativity of frauderster during the pandemic crisis of the last couple of years.

Matthew touched upon the evolution of the new normal while addressing the audience at the ACE Forum in New Orleans, La. The latest *Insurance Speak* podcast recaps some of the highlights from his presentation. Patti provided highlights from Matthew’s speech saying, “we learned we can do way more than we ever thought,” describing how insurers pivoted quickly to working in a remote environment while serving policyholders. “Change and chance aren’t necessarily negatives in the world of insurance. We can keep the good, throw out the bad and keep looking toward the future.”

As the Coalition has mentioned before, it was reported in May 2020 by the United Nations, that a mind-boggling 600% [spike in phishing scams](#) took place. And our friends around the globe such as Spain reported spikes by 21% and cases in the U.K. rose by 32% by June 2020.

You can listen to the full *InsuranceSpeak* podcast interview hosted by [PropertyCasualty360](#)’s Patti Harmon [here](#).





INFOGRAPHICS

It took more than a year for our dedicated Workers Compensation Task Force to re-evaluate the annual cost of comp fraud in America. The Coalition released a new [infographic](#) that called attention to the \$32B a year in total damages caused by employees filing bogus claims and employers dodging premiums. The infographic shares tips on how to spot workers comp fraud by employers and employees.



SOCIAL MEDIA

An integral part of the Coalition's outreach efforts is social media. We are currently redefining and developing a strategic marketing and content plan that better aligns to social media marketing and industry-specific trends, campaigns, and activities to ensure we are on track with our future goals. This past quarter we ensured that our social media activities were culturally and industry-relevant. Our social media program is broken up into three quarters (Q1 Jan - Apr, Q2 May - Aug, Q3 Sept-Dec) throughout the year, with a specific theme for each quarter and each month. Our theme for Q1 was called New Year New Fraud, using the hashtag #NewYearNewFraud, in which we focused on insurance fraud-specific trends as no other organization had ever done it before. In January, the coalition focused on creating content around the top 10 insurance fraud trends. In February, the focus was on creating content that discussed technology insurance fraud trends. In March, we focused on creating content around consumer insurance fraud trends. And currently in April, we are focusing on creating content that involves insurer and fraud fighter-specific insurance fraud trends.



HIGHLIGHTS FROM EACH MONTH

January:

Created video showcasing the top 10 insurance fraud trends for 2022

February:

Messages educating the public about how the black community is disproportionately impacted by insurance fraud for Black History Month

March:

Participated in the Federal Trade Commission's "National Consumer Protection Week"

April:

Partnering with State Farm to promote their arson dog program during Canine Fitness Month in partnership with the New York Alliance Against Insurance Fraud

The committee is set for its next meeting on May 11 at 2pm ET



LAW360

An article that was written on March 18, 2022, mentions that tough times are ahead for insurers who are now facing a ruling that settlements for fraud are insurable. As an example the *Federal Insurance Co.* told the Seventh Circuit earlier this month that a lower court incorrectly found it must cover part of a \$100 million settlement between policyholder *Astellas Pharma U.S. and the U.S. Department of Justice* over an alleged Medicare fraud scheme. The lower court erred in saying the payment was insurable compensation for damages, Federal argued, saying the payment was “restitutionary in character” and therefore an uninsurable penalty because it deprived *Astellas* of gains from its allegedly fraudulent conduct.

This will surely have fraudsters licking their lips in preparation to become bolder than ever before. The article also mentions that “disputes over the nature of fraud claims are not new; some jurisdictions bar insuring fraudulent conduct, and most directors and officers or errors and omissions policies include exclusions for fraud, usually triggered by a final judgment on fraud.” This story sheds light on judicial rulings which

insurers find disturbing. Aside from identifying and apprehending fraudsters constantly, insurers now have to fight to protect themselves.

As Michael Savett, a partner with Clark & Fox, who represents insurers, told *Law360* “these decisions run contrary to the public policy argument and the traditional rule that you can’t insure a moral hazard.” Our own Executive Director, Matthew Smith, stated to *Law360*, “such rulings encourage fraud because, under the rulings, an insured entity that is accused of fraud can retain the proceeds of its conduct as long as it buys insurance beforehand.” He also shared that “anybody that looks at the document that *Astellas* signed - you don’t pay \$100 million of damages under the federal False Claims Act with the Department of Justice investigation and say, ‘Oh, this was just simply an oversight on our part,’” The Coalition has submitted an amicus brief in support of Federal in the *Astellas* litigation.

“these decisions run contrary to the public policy argument and the traditional rule that you can’t insure a moral hazard.”

DATA POINT

Research remains a vital part of the Coalition’s mission and makes us unique in the anti-fraud community. 2022 is certainly off to a great start in keeping our research studies at the forefront of the Coalition’s efforts.



If you have not already done so, be sure to read the most recent version of our [“State of Insurance Fraud Technology Study”](#) released in January. It is filled with information about how insurers are using technology in new ways such as image verification and increasingly in property and other lines of insurance beyond tech’s most common usage in auto claims. The study is especially timely, given

a presentation this month at the [NAIC’s Big Data and Artificial Intelligence Working Group](#) meeting in Kansas City where regulators discussed anti-fraud efforts that represent the second-highest usage of

artificial intelligence and machine learning by insurers. Attendees at last month’s Insurance Fraud Management Conference in Orlando heard a presentation by the Coalition and our research partner the [SAS Institute](#) detailing the key findings from the study.

Every two years the Coalition also sponsors our [Benchmarking Study](#) conducted by our partner [Aon and the Ward Group](#) . This year more than 40 insurers





participated in the study to provide insurers a database tool to gauge how well they are doing compared to the overall market and similar competitors. Participants in this year’s study have been invited to a private webinar on April 27th to hear an overview of the study results and receive the completed study report. The *Benchmarking Study* is the only research study conducted by the Coalition. Members pay a fee to participate and may also purchase additional, more in-depth analyses of their SIU operations. In keeping with the Coalition’s mission and commitment to sharing information across all facets of the anti-fraud community, an overview of the 2022 study’s key findings will be available to all members next month.

Our next research study will open in June, leading the Coalition into several new research areas. In conjunction with our Associate Member [Protiviti](#) the study is designed to research “*The Ethical Use of Data in Fighting Insurance Fraud.*” In 2022 more than half of all fraud-related laws pending in the U.S. deal with data security and privacy issues. As a consumer advocacy organization, the Coalition strongly supports appropriate oversight of these issues while equally calling on legislators to contain specific language protecting the ability to use data correctly to protect consumers and insurers from insurance fraud. To date, no study has sought to address the specific “guardrails” for data usage when the goal is fighting insurance fraud. Our new survey is directed toward three primary respondent groups: public sector legislators and regulators, insurance industry stakeholders, and perhaps most importantly, American consumers. For the first time in our history, the Coalition has retained the services of an independent research company that will secure responses from across the U.S. to the Coalition’s Study, which represents the demographics of our diverse nation. To make the study successful, we need YOUR help as well. Look for the survey when it opens in June, and please take the time to respond. We want and need your input and voice on this vital issue.



ADVOCATE

The Coalition’s diverse advocacy programs are in full swing as we move into the second quarter of 2022. We are currently monitoring more than [180](#)

[bills](#) across the nation relating to the fight against insurance fraud on the legislative front. Most are at the state level, but the Coalition also monitors key bills impacting our members on capitol hill. So far in the new year, 14 new laws have already been enacted.

West Virginia’s Governor recently signed into law our [counterfeit airbag bill](#) marking a significant achievement with 30 states now adopting the necessary protection effort undertaken by the Coalition and Honda America. Our goal remains to pass this law in the remaining 20 states.



In California, the Coalition is working to support an expansion of the state’s insurance fraud immunity law to allow

both insurers and self-insureds to meet with state district attorneys when they in good faith suspect insurance fraud. The [bill](#) is currently pending in the State Assembly where in late March it passed the Insurance Committee unanimously. The measure is now before the Assembly Judiciary Committee. Coalition staff member and former San Diego County Assistant District Attorney, Dominic Dugo, has been instrumental in securing support across the state from the DA offices to pass the bill.



Our efforts to advance legislation to fight towing fraud in conjunction with the [American Trucking Associations](#) and the [APCIA](#) are also continuing. The bill we supported in [Virginia](#) passed and is now awaiting transfer to the Governor for hopeful signing into law.

Unfortunately, the Florida legislature adjourned last month without undertaking any serious attempt to address the rampant fraud across the state, making the Sunshine State the epicenter of insurance fraud in America. While a number of important bills were filed, most failed to advance. A few bills are awaiting transfer to the Governor’s office for signature. One of those [bills](#) doubles the penalties for violations by public adjusters to \$20,000 if prohibited acts occur during a natural disaster state of emergency. It also imposes a fine of up to \$2,000 per day on insurers who fail to cooperate with the Division of Investigative and Forensic Services in a fraud investigation. Efforts to make reform to the state’s rampant auto glass fraud problem, driven by Florida having a zero deductible for such losses, failed, and perhaps most importantly, despite a worsening crisis, legislators failed to consider property insurance reforms. Across the state, many voices, including state legislators themselves, are calling for a [special legislative session](#) to be called to address the problem—a step the Coalition fully supports.

We celebrate our successes but equally try to inform our members when bad legislation becomes law. In January, the New Jersey legislature passed and the Governor signed a [badly-worded bill](#) creating personal liability for insurance professionals accused of acting in bad faith on UM/UIIM claims. While the Coalition is not opposed to bad faith laws, we do oppose the imposition of personal liability on insurance company employees, allowing them to be named in lawsuits. Such laws cause a chilling effect on the willingness of claims personnel to refer potentially fraudulent claims to the SIU if there is a risk they will be named as a lawsuit defendant. When individuals are named as lawsuit defendants, it directly impacts their ability to secure credit, apply for mortgages, or even lease an apartment or vehicle. Unfortunately, legislators seem to fail to consider passing this type of legislation.

JURIS

The Coalition’s [amicus curiae program](#) remains a vital part of our efforts and is off to a fast start in 2022. One of our most significant victories came in a unanimous decision in March by the Colorado Supreme Court in the case of [Skillet v. Allstate](#). The justices were answering a certified question from the U.S.

District Court asking whether state bad faith laws permit the naming of individuals employed or working with insurance companies to be named in lawsuits. The overwhelming response was NO. In 2019 the Coalition won a nearly identical case in [Washington State](#).

In the U.S. Seventh Circuit Court of Appeals the federal appeals court is considering the case of



[Astellas v. Federal Insurance](#)

where the Coalition has filed our brief. Astellas was investigated by the U.S. Department of Justice for violations of [federal false claims act](#) and, as a result of their actions, agreed to pay a \$100 million fine for their violations. The company then submitted a claim to their insurer for reimbursement and

attorney fees, asserting they never actually admitted any wrongdoing. Amazingly, the U.S. District Court ordered the insurer to pay for the fraud. In our brief, the Coalition argues for overturning the lower court, noting if the decision stands, fraudsters and scammers are in a win/win situation. If they don’t get caught, they profit from their fraud. But if they



do get caught and then collect back from an insurer for their wrongdoing, there is simply no incentive for them actually to stop or change their improper behaviors.

The Coalition has additionally filed *amicus* briefs in two other cases as well. In California, we intervened in a case before the state’s Second District Court of Appeal. Our [brief](#) asks the appellate court to find the California Insurance Fraud Prevention Act applies to fraudulent claims presented to HMOs and ERISA plans. Such plans account for approximately 90% of California’s private health care market. The Coalition argues applying the IFPA to fraudulent claims made to HMOs and ERISA plans is consistent with the legislative purposes and policies behind the law intended to combat all forms of insurance fraud including health care fraud. Finally, in Minnesota the Coalition took the unusual step of [filing a brief in a case](#) pending and awaiting trial in the United States District Court. The case addresses the issue of insurers’ use of anti-fraud efforts by identifying medical providers they allege are committing PIP billing improprieties and then entering into “billing moratorium” agreements with those clinics to stop billing the company. The Coalition argues such consumer protection efforts should be done with full disclosure but do not violate the state’s no-fault law.



AROUND THE COALITION

As the world looks to move beyond the pandemic, the Coalition is back to “hitting the road” to support our members and spread the word of the need to fight insurance fraud even more forcefully as a result of the explosion of fraud scams arising from COVID-19.



Conference, which was last held in 2019 in Florida. We believe it is vitally important for those leading state anti-fraud efforts, whether through departments in insurance, commerce or attorneys general, to meet in person to share new and more effective ways to protect consumers from insurance fraud.

At the NAIC’s Spring Meeting in Kansas, we presented programs on the improper marketing of health care plans and how state DOI’s can more effectively protect American Indian and Alaska Native peoples from insurance fraud. We also shared the stage in California at the highly-attended [AFA Conference](#) with Commissioner Ricardo Lara and TV personality Dr. Phil.

In the past months we have also presented programs for the Rocky Mountain Chapter of the IASIU, in Florida at the [IFM Conference](#), the [Eastern Claims Conference](#), for the [American Claims Executive Leadership Forum](#) in New Orleans, the [Pennsylvania Insurance Fraud Prevention Authority, Claims and Litigation Management \(CLM\)](#) in California and we appeared on a panel with insurance commissioners gathered in New Mexico for the [American Association](#)

The Coalition is also actively partnering with the NAIC to revive the National Fraud Directors



of [Ancillary Benefits](#) Anti-Fraud Conference. These are only a few of the many ways the Coalition seeks to engage, support and help in the fight against insurance fraud.

As part of the Global Insurance Fraud Summit leadership, we are also working with our strategic partners to continue this event. The first-ever global meeting of fraud fighters occurred in 2019 in Barcelona, Spain. The Summit has grown over the past two years being held virtually. The leadership team is currently assessing the feasibility of returning to an in-person meeting this Fall, possibly in Lisbon, Portugal.

Look for us as well at upcoming important anti-fraud events. These include:

- *The Wisconsin IASIU Chapter Spring meeting in Milwaukee on April 21st.*
- *We will be presenting highlights from our Tech Study on April 26th for the [Kentucky Insurance Fraud Council](#).*
- *The Property Insurance Plans Service Office (PIPSO) has invited the Coalition to present a program at their meeting in Asheville, North Carolina. For those not familiar with [PIPSO](#) the organization, its purpose is to provide assistance to state residual property insurance plans.*
- *The Florida Insurance Fraud Education Committee ([FIFEC](#)) Conference in Orlando immediately following the Coalition's own Midyear Meeting.*
- *[IASIU Europe's Meeting](#) in Malmo, Sweden kicking off on June 13th.*

As the world continues to return to a post-pandemic level of “new normal,” we look forward to seeing many of you again in person and partnering with you as our members to help fight against insurance fraud. Please remember we are always here to help, support and assist your tremendous work in any way possible. So please keep in touch and reach out to us at any time.



It's never too early to submit your recommendations for PROSECUTOR OF THE YEAR!



The [Prosecutor of the Year award](#) honors insurance-fraud prosecutors for achievements in hands-on courtroom cases, or for broader leadership in the field of insurance prosecutions. This is the only national award solely for prosecutors focused on insurance fraud. Successful courtroom cases can include a single fraud, a complex fraud ring, a series of separate cases that represent a turning point against a fraud trend, or other forms of prosecution. Co-nominees are eligible if they jointly led a prosecution, but entire teams or departments aren't eligible. Nominations for broader leadership can include achievements such as a ground-breaking legal strategy, success in leading a prosecutorial department, or similar leadership achievement. Nominations also can be made for hands-on cases and overall leadership combined. Please send your submission to joseph@insurancefraud.org.



Coalition Against Insurance Fraud



The *Coalition Quarterly* is our way of keeping you updated and informed about the work of your Coalition.

We value your feedback and suggestions.

We want to provide you the information you need, in the easiest format possible.

Please send your comments and suggestions to:
Matthew@insurancefraud.org

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ABOUT US

The Coalition Against Insurance Fraud is America's only anti-fraud alliance speaking for consumers, insurance companies, government agencies and others. Through its unique work, the Coalition empowers consumers to fight back, helps fraud fighters better detect this crime and deters more people from committing fraud. The Coalition supports this mission with a large and continually expanding armory of practical tools: Information, research & data, services and insight as a leading voice of the anti-fraud community.

For additional information on the Coalition Against Insurance Fraud contact us at 202-393-7330 or info@insurancefraud.org



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