

**DEPARTMENT OF JUSTICE
DIVISION OF MEDICAL FRAUD AND ELDER ABUSE
INVESTIGATIONS SECTION
DUTY STATEMENT**

NAME:

CLASSIFICATION: Special Agent

WORKING TITLE: Special Agent

STATEMENT OF DUTIES: The mission of the Division of Medi-Cal Fraud and Elder Abuse (DMFEA) as the State's Medicaid Fraud Control Unit ("Unit") is to investigate and prosecute, both criminally and civilly, (a) health care providers who defraud the Medi-Cal program and (b) those who abuse or neglect elders and dependent adults in care facilities.

The Special Agent conducts criminal investigations and investigates allegations of fraud perpetrated against the California Medicaid Program (Medi-Cal) Program by providers of medical and related services; specifically, those complaints that appear criminal in nature. Independently, or in a team, conducts and assists with complex and difficult investigations. May be required to conduct collateral duties as necessary. In accordance with Penal Code Section 13651, duties shall be conducted with an emphasis on community interaction and collaborative problem solving.

SUPERVISION RECEIVED: Under the direction of a Special Agent Supervisor or Special Agent In-Charge.

SUPERVISION EXERCISED: None.

TYPICAL PHYSICAL DEMANDS: The physical demands as set forth in the "Essential Duties of Peace Officer Classifications" are incorporated herein. See attachment.

TYPICAL WORKING CONDITIONS: Travel may be required locally and within the state for investigations, meetings, and training. The working conditions as set forth in the "Essential Duties of Peace Officer Classifications" are incorporated herein. See attachment.

ESSENTIAL FUNCTIONS:

- 20% Obtains various documentation from computer programs at the fiscal intermediary agencies, including miscellaneous (confidential) documents such as bank records, medical records, welfare files, business records, and other records to be used as evidence in judicial proceedings. Researches this documentation to detect or verify patterns of billings which indicate suspected violation of laws, rules or regulations, often working with an auditor. Develops schedules of provider billing practices, which tend to provide culpability.
- 20% Locates and interviews witnesses, suspects, principals, and possible expert witnesses. Prepares written and recorded statements and evaluates their testimony for credibility for possible use in judicial proceedings.
- 15% Prepares comprehensive investigation reports for presentation to the Deputy Attorney General or local district attorney for criminal complaint.
- 15% Conducts undercover surveillance operations. Coordinates and assists in the preparation and service of search warrants. Signs complaints resulting in arrest warrants. Makes physical arrests of suspects.
- 15% Confers with, and assists, the Deputy Attorney General, and/or trial deputy district attorney, in planning and coordinating investigations and in preparing cases for court. Locates and serves subpoenas on witnesses and suspects. Testifies in all criminal and administrative proceedings as necessary.

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10% May act as a lead investigator, advising, instructing, and reviewing the work of, and providing training to Special Agents and/or Special Agent Trainees in field investigations.

5% Participates in both on-the-job training and structured instruction, including firearms safety and use.

I have read and understand the essential functions and typical physical demands required of this job (please check one of the boxes below regarding a Reasonable Accommodation):

- ☐ I am able to complete the essential functions and typical physical demands of the job without a need for a reasonable accommodation.
- ☐ I am able to complete the essential functions and typical physical demands of the job, but will require a reasonable accommodation. I will discuss my reasonable accommodation request with my supervisor.
- ☐ I am unable to perform one or more of the essential functions and typical physical demands of the job, even with a reasonable accommodation.
- ☐ I am not sure that I will be able to perform one or more of the essential functions and typical physical demands of the job, and will discuss the functional limitations I have with my supervisor.

Employee Signature

Date

Supervisor Signature

Date

Employee Name

Supervisor Name