

# Insurance Fraud Investigation



## « *Prevention and Investigation of Insurance Fraud* »

Insurance fraud occurs when an individual tries to obtain benefits from an insurance company that he or she is not entitled to. From deliberately making false or inflated claims to manipulating data, insurance fraud schemes are not only illegal and dangerous, they will adversely impact the industry, business partners, clients, and the general public. Fighting fraud should be a serious priority for every insurers to protect their business and clients from fraud.

Insurance fraud investigation provided by Integrity Asia aims to assist insurers in identifying insurance fraud schemes. Our team will gather evidence to uncover whether an individual or organization has fabricated false claims, inflated claims, or intentionally manipulated data. This particular service includes underwriting investigations as well as insurance claim investigation.

## Underwriting Investigation

Integrity Asia will conduct underwriting investigations and obtain evidence to support the underwriting process based on the agreed scope of work. Our consultants may investigate misrepresentation, false information, fictitious policies, and other potential underwriting irregularities.

## Claim Investigation

Based on preliminary information provided, our fraud investigators will verify, cross check and research to provide adequate data and evidence for insurance companies to decide whether to accept or reject an insurance claim.

For more than a decade, Integrity Asia has conducted various insurance investigations in the following areas:

- *Health insurance.* Determine whether the claimant is getting paid for health care they do not actually receive or is filing health care claims that are not valid or necessary.
- *Life insurance.* Uncover cases of pre-medical conditions, faked or staged death, fraudulent coverage of murdered individuals.
- *Workers compensation insurance.* Verify the accident and severity of the injury from workers who claim compensation for an injury.
- *Other general insurance.* Verify the incidents related to damage, theft, fire, accidents, liability, etc.
- *Broker / Agent fraud.* Investigate the involvement of brokers and agent in fraudulent activities.

## Our methodology:

- Surveillance
- Witness search
- Interviews
- Medical reports
- History search
- Background check
- Activity check
- Directory search (phone directories, online directories, database)
- Focused media check (Internet and newspapers, obituaries, etc)
- Verification with relevant institutions or organizations (police units, hospitals, clinics, laboratories, doctors, undertakers, funeral homes, etc)
- Collection of photographic evidence