ANTI-INSURANCE CRIME TRAINING GUIDE
Your Complete Guide to NICB/NICTA Training Resources

INTRODUCTION

NATIONAL INSURANCE CRIME BUREAU – Who We Are

The National Insurance Crime Bureau (NICB) is a not-for-profit organization that receives support from approximately 1,100 property and casualty insurance companies and self-insured organizations. The NICB partners with insurers and law enforcement agencies to facilitate the identification, detection and prosecution of insurance criminals.

The vision of the NICB is to be the preeminent organization fighting insurance fraud and crime.

The mission of the NICB is to lead a united effort of insurers, law enforcement agencies and representatives of the public to prevent and combat insurance fraud and crime through data analytics, investigations, training, legislative advocacy and public awareness.

NATIONAL INSURANCE CRIME TRAINING ACADEMY– What is NICTA?

NICTA is an online anti-insurance crime training resource that delivers training and information for insurance personnel, law enforcement and the public through online courseware using rich media to enhance a user's training experience.

ABOUT THIS GUIDE

This guide will introduce various training resources the NICB Training Department has to offer to member companies, law enforcement and the public. We create new training aids and courses on a regular basis. Please check the various websites that are mentioned in this guide for the most up-to-date information.

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NATIONAL INSURANCE CRIME TRAINING ACADEMY (NICTA)

APPENDICES

The NICB Training Department offers a number of courses that address the needs of students. From the rookie claims representative to the seasoned special investigator, the NICB's curricula provides fraud and theft fighters with the skills and expertise necessary to protect their corporate assets.

FraudSmart Training
The FraudSmart training courses were designed for the new "frontline" claims personnel. These one-to two-hour PowerPoint presentations allow members to choose different training modules to create a more personalized training program. Additionally, the FraudSmart training is held at the company's selected location at no cost. The courses have also been approved for continuing education credit in certain states. A complete list of states can be found on page 16.

NOTE: Various Departments of Insurance charge a continuing education processing fee to submit credit. Upon submitting credit, NICB/NICTA pays the fee and seeks reimbursement from students/companies.

Customized Training
The NICB coordinates training through its Training Directors (TDs). Each TD is responsible for assembling customized training courses that meet member's specific requirements. Members are encouraged to contact their TD to discuss training needs and ideas. The TD will craft a comprehensive training plan tailored to the member's goals, their geographic area and time constraints. The Training Directors and their specific regional coverage can be found in Appendix C in the back of this publication.

NICB FraudSmart Topics

NICB Overview
This course explains NICB's five disciplines and discusses various ways insurance companies and law enforcement can best utilize their partnership with NICB. This course is suitable for claims and/or underwriting and other insurance company personnel, as well as, law enforcement agencies.

Learning Objectives:
      -State the benefits NICB offers
      -List NICB's five disciplines
      -State NICB's mission statement

Questionable Claims Submission
This course demonstrates how to "submit" a questionable claim and shows the benefits of submitting the claim as questionable to ISO. This course is for insurance company personnel responsible for submitting claims as questionable.

Learning Objectives:
      -Explain the benefits of submitting questionable claims
      -Explain how to submit questionable claim

GENERAL

Application Fraud for Underwriting & Insurance Agents
This course addresses the cost of insurance fraud and explains the levels/elements of proof and describes five common fraud schemes. Additional instructions on how underwriting and/or insurance agents can help meet legal requirements and recognize fraud indicators and action steps are explained. This course is suitable for underwriters and other insurance company personnel.

Learning Objectives:
  -Expalin the fraud problem
  -Recognize the levels/elements of proof
  -State five common fraud schemes

Digital Photos (metadata) and Claims
The Digital Photos (Metadata) and Claims course provides instruction on how to define what is Metadata. The pro¬gram is taught in a manner to sharpen the awareness skills by providing the knowledge and resources to identify and access metadata. The student will identify the type of information available in the metadata file, and the action steps to investigating questionable metadata.

Learning objectives:
  -Student will define what metadata is.
  -Student will list how to access metadata.
  -Student will identify the type of information available in the metadata file.
  -Student will identify the action steps to investigate questionable metadata.

Identity Theft & Insurance Fraud (Commercial Version Available)
This course provides an overview on how to prevent being a victim of identity theft and explains the identity theft problem and the effects on the insurance industry. Identity theft indicators and action steps are explained. This course is suitable for people who work claims, underwriting, and other insurance company personnel.

Learning Objectives:
  -Demonstrate steps taken to prevent being victimized by identity theft
  -Recognize and list the identity theft fraud indicators
  -Apply action steps to resolve fraud indicators

Insurance Fraud Prevention Briefing for Management
This course provides an overview on how management can encourage employees to fight fraud and lessen the cost of investigating fraudulent claims. This course is suitable for management personnel who work in claims, underwriting and other insurance company personnel.

Learning Objectives
  -Define fraud
  -List two ways management can encourage employees to fight fraud
  -List three resources used to fight fraud

Introduction to Insurance Fraud
This course provides an overview of insurance fraud and ways to fight the problem. The levels/elements of proof and fraud indicators and action steps are explained. This course is suitable for people who work in claims, underwriting and other insurance company personnel.

Learning Objectives:
-Define insurance fraud
-Name two different ways to fight fraudulent claims
-Identify fraud indicators and apply action steps

Money Laundering & the Insurance Industry (as it relates to Commercial Claims/Policies/Cases)
This course defines money laundering and explains its ties to the insurance industry. The difference between fraud and money laundering and how money laundering schemes are committed are described. Fraud indicators and action steps are explained. This course is suitable for insurance agents, underwriters and property claims personnel.

Learning Objectives:
-Define money laundering
-List five money laundering schemes
-Explain the difference between money laundering and fraud
-Identify fraud indicators and apply action steps

Opportunities for Insurance Fraud from Application to Policy
This course explains the process for obtaining insurance. "Voluntary" and "assigned risk" and instructions on how to recognize fraud indicators and action steps are explained. This course is suitable for underwriters and other insurance company personnel.

Learning Objectives:
-Name three types of insurance agents
-Explain the difference between "voluntary" and "assigned risk"
-Identify fraud indicators and apply action steps

Organized Fraud Activity
This course defines organized fraud groups and the people involved. Different organized rings are identified and instructions on how to recognize fraud indicators and action steps are explained. This course is suitable for people who work in claims, underwriting, and other insurance company personnel.

Learning Objectives:
-Identify key players of an organized group
-List ways organized groups are involved with an insurance business
-Identify fraud indicators and apply action steps

Preparing a Case For Prosecution (Commercial Version Available)
This course defines the elements of fraud and explains the requirements for a successful presentation. A list of important documents to be included and how to present a case to a prosecutor is explained. This course is suitable for SIU and insurance company personnel who help prepare cases for court prosecution.

Learning Objectives:
      -Identify the elements of fraud
      -List four requirements for successful prosecution
      -Develop a list of documents needed for prosecution

Rate Evasion

This course explains how rate evasion fraud is committed and explains the difference between resident and non-resident rate evasion. Rate evasion fraud indicators and action steps are explained. This course is suitable for underwriters and other insurance company personnel.

Learning Objectives:
      -State the difference between resident and non-resident rate evasion
      -Explain how rate evasion is committed
      -Apply action steps to resolve fraud indicators

What is Internal Fraud? A Crime (Commercial Version Available)

This course explains how internal fraud is committed and how to recognize internal fraud. Potential individuals involved and various system reports used to uncover internal fraud are explained. This course is suitable for people who work in claims, underwriting, and other insurance company personnel.

Learning Objectives:
      -Recognize the signs of internal fraud
      -List potential individuals involved
      -Describe system reports used to uncover fraud

PROPERTY

Additional Living Expenses

The purpose of this training is to familiarize you with Additional Living Expense (ALE) claims that might arise following catastrophic losses for insureds, including the types of expenses that are typically covered by most carriers. Information is provided regarding indicators of fraud and subsequent action steps one can take to resolve these fraud indicators.

Learning Objectives:
      - Understand the value of examining ALE claims carefully.
       - Describe the types of ALE fraud.
      - Detail the indicators which are most prevalent in ALE fraud

Arson for Profit (Commercial Version Available)

This course provides an overview on how to identify a questionable fire claim. Patterns of arson claims and classifications of fires are described. The arson triangle, fraud indicators and action steps are explained. This course is suitable for property claims personnel, people who take first reports, and other insurance company personnel.

Learning Objectives:
      -Describe three types of fires
      -Document the patterns of arson and classify fires
      -Recognize the arson for profit indicators
      -Apply action steps to resolve fraud indicators

Catastrophe Fraud
This course provides an overview on fraudulent catastrophe claims and explains the difference between a normal/catastrophe claim environment and provides examples on how unscrupulous claimants take advantage of a catastrophic situation. This course is suitable for people who work in claims, underwriting and other insurance company personnel.

Learning Objectives:
      -Recognize a fraudulent catastrophe fraud claim
      -List ten common CAT related insurance fraud schemes

Hit While Parked
A student will describe a hit while parked accident and how to recognize the fraudulent claims.

Learning Objectives:
      -Recognize the differences between legitimate hit while parked claims are fraudulent HWP claims.
      -List fraud indicators of HWP accidents.
      -Discuss the action steps to resolve indicators.

Hail Fraud
This course defines and provides an overview of hail damage and fraud, explains how hail is formed, the damage that hail can do as well as the indicators of questionable hail claims. This course will cover the actions of some unscrupulous roofing contractors and their schemes and some action steps to take to identify questionable hail claims. This course is suitable for property claims people, people who take first reports, and other insurance company personnel.

Learning Objectives:
      -Identify the elements needed in order for a hail storm to occur
      -List the indicators of questionable hail damage claims
      -Recall several different roofer/contractor schemes
      -Recognize the indicators of roofer/contractor fraud

Identifying "Questionable" Mold Claims
This course defines and provides an overview of mold, explains the difference between a "good" and "bad" mold, and describes several techniques used to intentionally spread mold. Fraud indicators and action steps are identified. This course is suitable for property claims personnel, people who take first reports, and other insurance company personnel.

Learning Objectives:
      -Define mold
      -Explain the difference between a good and bad mold
      -Liste three techniques used to spread mold
      -Identify fraud indicators and action steps

Mysterious Disappearance Claims
This course on mysterious disappearance claims provides an overview on how to identify suspect scheduled property claims. An in-depth definition of what a mysterious disappearance claim is will be given. Various fraud scenarios commonly used will be discussed and fraud indicators and the fundamental action steps taken will be identified. This course is suitable for people who work in claims, underwriting, and other insurance company personnel.

Learning Objectives:

    -Define a mysterious diasappearance claim

    -Identify fraud indicators and action steps

Property Fraud (Commercial Version Available)

This course describes different types of fraudulent property claims. Fraud indicators and action steps are identified. This course is suitable for people who handle property claims, people who take first reports, and other insurance company personnel.

Learning Objectives:

    -Explain various types of property related claims

    -Identify fraud indicators and action steps

SKILLS TRAINING

Listening Skills Part I

This course points out the difference between hearing and listening. Various blockers of concentration and many ways one can improve their concentration skills are explained. This course is suitable for people who work in claims, underwriting, and for those responsible for taking first reports.

Learning Objectives:

    -Distinguish the difference between hearing and listening

    -List several blockers to concentration

    -State three ways to improve concentration skills

Listening Skills Part II

This course discusses specific things to listen for when conducting telephone interviews. Phrases and potential responses that appear deceptive are explained. This course is suitable for people who work in claims, those who take first reports, underwriters, and other insurance company personnel.

Learning Objectives:

    -List five things to listen for during a phone interview

    -Recognize phrases that contain potential fraud

    -Recognize phrases that are pointed out

Presentation Basics

This course demonstrates how to be an effective trainer. Various delivery and presentation methods, the proper class preparation, and various technical considerations are explained. This course is ideal for newly assigned presenters and trainers and those who would like to refresh their presentation skills.

Learning Objectives:

    -List various delivery and presentation methods

    -Explain technical considerations

    -List several ways to prepare for class

Writing Skills
This course explains what should and should not be written in diary entries and referrals. The difference between active and passive writing is described and writing to inform versus writing to impress is explained. This course is suitable for people who work in claims, underwriting, and other insurance company personnel.

Learning Objectives:
- -Explain what should be written in referrals and diary entries
- -Explain the difference between passive and active voice
- -Develop an informational writing sample
- -Develop an impressive writing sample

BODILY INJURY

Casualty Fraud
This course defines casualty fraud and how bodily injury fraud is synonymous to casualty fraud, the participants involved and the types of schemes used to claim injuries. Types of casualty claims and the opportunities for fraud that comes with each type of claim is also discussed. This course is suitable for people who handle bodily injury claims and those who take first reports.

Learning Objectives:
- -Identify schemes, indicators, and the participants involved in questionable casualty claims
- -Identify the action steps needed to resolve the identified indicators
- -Identify the action steps needed to review and verify the medical treatment records

CPT Codes & Medical Reports (Commercial Version Available)
This course provides an understanding of the common office visit codes and ways to identify suspicious medical claims are explained. This course is suitable for people in claims who deal with medical bills.

Learning Objectives:
- -Define various office visit codes
- -Define X-Ray codes
- -List various ways to identify suspicious medical claims

Durable Medical Equipment Fraud
This course defines and describes the primary use of durable medical equipment. The DME cycle and the most commonly used fraud schemes are reviewed. DME fraud indicators and action steps are identified. This course is suitable for people in claims who deal with medical bills.

Learning Objectives:
- -Define durale medical equipment
- -Explain DME's primary use
- -Identify fraud schemes
- -Identify fraud indicators and apply action steps

Managing LIST & MIST Claims
This course describes low impact and minor impact soft tissue claims. How LIST and MIST claims differ from staged accidents and various ways to identify a fraudulent claim is explained. Fraud indicators and action steps are explained. This course is suitable for people who handle bodily injury claims and those who take first reports.

Learning Objectives:
      -Explain the elements of a low impact soft and minor soft tissue claim
      -List ways on how to identify a fraudulent LIST and MIST claim
      -Identify fraud indicators and apply action steps

Medical & Legal Aspects of Bodily Injury Claims (Commercial and Personal Lines)
This course outlines how medical and legal professionals can be involved in fraudulent medical and legal claims. Various roles the professionals play are described and medical fraud indicators and action steps are identified. This course is suitable for those who work BI claims.

Learning Objectives:
      -Explain medical/legal professionals involvement
      -Identify fraud indicators and apply action steps

Pedestrian Staged Accidents (aka Pedestrian Knockdowns)
This course provides an overview on fraudulent pedestrian accident claims. Various pedestrian fraud schemes and descriptions of bodily reactions as they relate to the facts of the claim are explained. Fraud indicators and action steps are identified. This course is suitable for those who work BI claims.

Learning Objectives:
      -List the common pedestrian fraud schemes
      -Compare bodily reactions to the facts of the claim
      -Identify fraud indicators and apply action steps

PIP Claims & Insurance Fraud
This course provides an overview of personal injury protection claims. Various aspects of PIP and "no fault" claims and the characteristics of a fraudulent claim are described. Fraud indicators and action steps are identified. This course is suitable for people who deal with PIP Claims and those who take first reports. (This course is in conjunction with other auto injury courses).

Learning Objectives:
      -List aspects of a PIP and no fault claim
      -Describe the fraudulent characteristics of a PIP claim
      -Identify fraud indicators and apply appropriate action steps

Prescription Drug Fraud

Prescription Drug Fraud covers the impact that the abuse of prescription drugs has on the P&C Industry. This course provides instruction into the ways in which insurance fraud is used to obtain or dispense prescription drugs. Students will learn to recognize fraud in a claim when prescription drugs are involved.

Learning objectives:
-   -The student will list the two main methods of obtaining prescription drugs through insurance fraud.
-   -The student will list the three types of most commonly abused prescription drugs.
-   -The student will define drug diversion and drug compounding.
-   -The student will list the elements needed for a successful prescription drug fraud investigation.

Slip and Fall Claims (Commercial Version Available)

This course describes various injury schemes used by dishonest people who commit fraud. Important elements that should be documented and authenticated are explained. Fraud indicators and action steps are identified. This course is suitable for people who handle bodily injury claims.

Learning Objectives:
-   -Describe various slip and fall schemes
-   -List the elements that should be documented when investigating a claim
-   -Identify fraud indicators and apply action steps

Staged Auto Accidents (Commercial and Personal Lines)

This course describes different staged accident schemes. Three common staged accident schemes are explained and fraud indicators and action steps are identified. This course is suitable for people who process casualty and no-fault auto injury claims and those who take first reports.

Learning Objectives:
-   -Describe a staged accident
-   -Describe three common staged accidents
-   -Identify fraud indicators and apply action steps

VEHICLE

Auto Physical Damage Claims and Fraud Schemes

This course provides an overview on how to recognize auto physical damage fraud schemes. Three common fraud schemes will be described and auto physical damage fraud indicators and action steps are identified. This course is suitable for those who work on physical damage claims, appraisers, and people who take first reports.

Learning Objectives:
-   -Recognize the various auto physical damage fraud schemes
-   -Identify fraud indicators and apply appropriate action steps

Boat Theft and Fraud (Commercial and Personal Lines)

This course provides an overview on how to identify various types of boats and their terminology. The components of a Hull Identification Number (HIN) are described and boat theft fraud indicators and action steps are explained. This course is suitable for those who work boat/vehicle/motor theft claims, boat vehicle appraisers, people who take first reports, and other insurance company personnel.

Learning Objective:

 -Identify various types of boats
 -Recognize boat terminology
 -List the components of a Hull Identification Number (HIN)
 -Identify fraud indicators and apply action steps

Direct Repair Body Shop Fraud (Commercial Version Available)

This course explains how to identify direct repair body shop questionable bills. General problems when dealing with a body shop that is suspected of fraud are discussed and fraud indicators and action steps are explained. This course is suitable for those who work on physical damage claims and other insurance company personnel.

Learning Objectives:

 -Describe concerns of direct repair body shop fraud
 -Define direct repair
 -List advantages to insurance companies/consumers
 -Identify fraud indicators and apply appropriate action steps

Identifying Fraudulently Altered & Stolen Vehicles (as it also Involves Commercial Policies)

This course describes vehicle fraud and provides an overview on how a person may unknowingly become involved in trafficking, financing or insuring stolen vehicles. Tools used to recognize stolen vehicles, bad loans or a fraudulent insurance policy are described and various schemes are explained. This course is suitable for people who work vehicle theft claims, vehicle appraisers, people who take first reports and other insurance company personnel.

Learning Objectives:

 -Define automobile fraud
 -List ways of fraudulent involvement
 -Compile a list of tools used to recognize a stolen vehicle
 -Describe common fraud schemes

Motorcycle Theft and Fraud

This course focuses on problems related to motorcycle theft and describes ways to identify various types of motorcycle classifications and their major components. Fraud indicators and action steps are explained. This course is suitable for people who work vehicle theft (motorcycle theft) claims, underwriters and other insurance company personnel.

Learning Objectives:

 -Discuss problems associated with motorcycle theft
 -List and describe motorcycle classifications and the major components
 -Identify fraud indicators and apply action steps

Sport Compact Vehicle Fraud

This course discusses sport compact vehicle street races. Elements of potential fraud and how they relate to vehicle theft fraud are described. Indicators of illegal street racing and action steps are explained. This course is suitable for people who work vehicle theft claims, vehicle appraisers, those who take first reports, and other insurance company personnel.

Learning Objectives:
       -Explain sport compact vehicle fraud
       -List the elements of potential fraud
       -Identify fraud indicators and apply action steps

Vehicle Arson Involving Insurance Fraud
This course provides an overview of vehicle arson and explains the elements of an arson investigation. Fire is defined and fraud indicators and action steps are explained. This course is suitable for people who work vehicle claims and appraisers. (This course is in conjunction with the Vehicle Theft Fraud course).

Learning Objectives:
       -Define fire and vehicle arson
       -List and describe elements of an arson investigation
       -Identify fraud indicators and apply appropriate action steps

Vehicle Theft Fraud
This course discusses the vehicle theft problem and explains the effects on consumers and the insurance industry. Various reasons why vehicle theft fraud is committed is explained. The characters of a Vehicle Identification Number (VIN) are described and fraud indicators and action steps are explained. This course is suitable for people who work vehicle claims and appraisers.

Learning Objectives:
       -Explain how vehicle theft effects consumers and the insurance industry
       -List reasons for committing insurance fraud
       -List VIN characters
       -Identify fraud indicators and apply action steps

Vehicle Inspections "101" for Insurance Agents
This course provides a basic overview on how to inspect and identify a vehicle. Various ways to identify a fraudulent VIN are explained and fraud indicators and action steps are identified. This course is suitable for insurance agents and others.

Learning Objectives:
       -Explain proper ways to inspect/identify a vehicle
       -Describe ways to identify a fraudulent VIN
       -Identify fraud indicators and apply action steps

Commercial Fraud Training Courses
Plus the 8 courses annotated (Commercial Version Available) in the previous section

Commercial Claims– The First Ten Minutes
In this course, trainers will facilitate several practical exercises listing the steps taken during the first ten minutes of a commercial claims process. Important elements involving an incident and data collection of key evidence is explained. This course is suitable for those who work in claims, underwriting, and other insurance company personnel.

Learning Objective:
- List the steps taken after an accident has occurred
- List information that should be collected for a commercial claim
- Describe data that is collected when a claim is filed

Heavy Equipment Fraud

This course provides an overview of the difference between construction and farm equipment. Various identification methods, fraud indicators and action steps are explained. This course is suitable for those who work vehicle/motor theft claims, vehicle appraisers, individuals who take first reports, and other insurance company personnel.

Learning Objective:
- Explain the difference between construction and farm equipment
- List ways to identify heavy Equipment
- Identify fraud indicators and action steps

Introduction to Commercial Fraud and Theft

This course provides an overview of commercial insurance claim fraud and theft. The scope of the commercial fraud problem and various fraud schemes are explained. This course is suitable for individuals who work in claims and other insurance company personnel.

Learning Objectives:
- Explain the commercial fraud problem
- Explain how the NICB and insurance companies work together
- List and describe commercial fraud schemes

Premium Fraud in the Workers' Compensation Market

This course provides an overview on how workers' compensation premium fraud is committed and explains the terms: premium leakage, premium avoidance and premium fraud. Fraud indicators and action steps are explained. This course is suitable for people who handle workers' compensation claims, workers' compensation underwriters and other insurance company personnel.

Learning Objectives:
- Define premium fraud, premium avoidance, and premium fraud
- Recognize the elements of premium fraud
- Identify fraud indicators and apply action steps

Workers' Compensation Fraud

This course demonstrates the basic concepts of workers' compensation fraud. Two general types of workers' compensation fraud and the participants involved are described and fraud indicators and action steps are identified. This course is suitable for people who handle workers' compensation claims and for those who write workers' compensation coverage.

Learning Objectives
- Describe the basic concepts of workers' compensation fraud
- Describe the two general workers' compensation fraud schemes
- Construct a list of likely participants
- Identify fraud indicators and apply action steps

The states listed below are those states that require claims adjusters to fulfill Continuing Education (CE) training courses. The majority of the FraudSmart and the NICTA online training courses have been approved in the 13 states that require Claims Adjusters to have CE credit to maintain their state license.

Arkansas**
Delaware*
Florida
Georgia
Louisiana
Montana**
New Hampshire
North Carolina***
Oklahoma
Texas
Utah
Vermont****
Wyoming

*Only resident Adjusters are required to comply with the Delaware CE laws.

**NICTA ONLY. For a complete list of approved courses refer to the CE Information on www.nicta.org.

***FraudSmart ONLY. NICTA does not provide CE credits for North Carolina. This is due to technology requirements the North Carolina DOI has implemented. As NICTA does not fulfill these requirements we can not provide CEs for North Carolina.

****Only Workers' Compensation Adjusters require CEs, therefore, only the appropriate courses are approved.

In addition to the states that require continuing education, several other states and the District of Columbia require anti-fraud training for Claims Adjusters and/or SIU, but do not require the training to be pre-approved by the Departments of Insurance. Please refer to the NICB State Mandated Training Guide for additional information regarding mandated training requirements. It outlines each states specific anti-fraud training requirements. Below is a list of states that require anti-fraud training.

The FraudSmart and NICTA online courses should satisfy these states' requirements:

California	New Mexico
Kansas	New York
Kentucky	North Dakota
Maine	Ohio
Maryland	Pennsylvania
Massachusetts	Tennessee
Minnesota	Washington
New Jersey	

NOTE: NICB and NICTA have tried to be as thorough and accurate as possible, however, we encourage licensees to check with each state to verify our research concerning CEs and mandatory anti-fraud training.

This four-day event provides an intense training curriculum taught by industry/technical experts, law enforcement and NICB personnel. The academy serves as an excellent forum to network and develop productive relationships with dozens of antifraud professionals. Student eligibility for academy attendance is restricted to the direct (not contracted) employees of member companies, and additionally, on a space available basis, the NICB, government agencies and law enforcement.

Special Investigations Academy

The Special Investigations Academy offers general sessions and specialized elective courses concurrently at the same location and date, thereby, convening more investigative expertise in an educational setting than ever before. This larger setting provides greater learning opportunities for attendees and offers improved efficiency in administrative costs.

Overview of the Academy

The Special Investigations Academy focuses on training SIU investigators and others in the different types of property, casualty and workers' compensation claims with regard to fraud awareness. The academy teaches the fundamental techniques required for a professional insurance fraud investigator, and provides instruction in investigation skills and insurance knowledge. The specialized elective courses provide training in complex, multiple-claim investigations and in advanced investigative techniques. This training is designed to supplement, not replace, individual company training.

Analyst Academy I
Instructors present systematic techniques to identify and analyze potential fraud in your company's claims data. Students process data to uncover patterns of possible fraud, create supporting visuals, and prepare reports needed to assist in developing investigational strategies, claims decisions, and where applicable, referral to NICB or Law Enforcement. The Analyst Academy I is a basic course for new insurance analysts with up to three years of experience. Supervisors responsible for insurance fraud analytical functions may also benefit from attending. Students must pass a pre-test prior to registering (a score of 92 percent or higher is required to pass).

Analyst Academy II
The Analyst Academy II builds upon skills learned in the Analyst Academy I. This academy reviews analytical concepts, and applies the technology skills necessary for analysis. Topics include database creation, constructing queries, mapping data, and link analysis. Students are guided through analysis projects to utilize the skills taught. The class is designed to enhance an analyst's analytical skills. This class applies analytical theory to multiple "hands on" exercises. Students must pass a pre-test prior to registering (a score of 92 percent or higher is required to pass). Prior completion of the Analyst Academy I is recommended.

Academy Information
- Student will be provided with a computer for both classes, which will have all of the programs necessary for the class.
- Registration is limited to 20 students per session
- Academy attendance is restricted to the direct (not contracted) employees of member companies. Additionally, on a space available basis, government agencies and law enforcement are eligible to attend.
- Registration and academy bulletins are located on www.nicta.org

Prerequisites
- Pass pre-test located on www.nicta.org (Other Learning Section)
- Knowledge of Microsoft Word & Excel functions
- Understanding of intelligence cycle, insurance fraud schemes and the analytical process
- Analyst Academy I is recommended prior to attending Analyst Academy II

Analyst Academy I Course List
Analysis for Competing Hypotheses
Creative and Critical Thinking
Dirty Data
Excel Data Manipulation
Generating Hyptheses
Inference Development
ISO Demonstration
Logical Thinking
Recommendation Development
Reports Creation
Safe Auto Case Study
Strategic Analysis Presentation & Practical
Tactical Analysis Presentation & Practical
Tactical and Strategic Analysis
Visual Aids

Analyst Academy II Course List
Access
Excel
Internet Searching
Anlytical Cycle and Methodologies
Word
Social Media
Mapping
Strategic Part 1
Strategic Part 2
Tactical Practical
Claim Search Illustartor

The NICB Medical Investigations Academy training provides investigators in the insurance industry, law enforcement, and NICB, the skills required to recognize and understand **basic** medical fraud and is intended for investigators **new** to medical fraud investigation. Student eligibility for academy attendance is restricted to the direct (not contracted) employees of member companies, and additionally, on a space available basis, the NICB, government agencies, and law enforcement.

Limited Registration
Academy registration is limited to 30 students per session.

Medical Investigations Academy Course List
Aggragated Medical Database
Clinic Inspections
Chiropractic Made Simple
Diagnostic Testing
Durable Medical Equipment (DME) & DME Case Study
Drug Diversion
Forensic & Compliance Case Review
ICD-10 Codes & Classifications
Internet Searching
Medical Bill Review
Medical Billing Forms/CPT Coding/HCPCS
Medical Investigation Legal Overview

NICB Document Download Center is available to member companies only. NICB provides member companies the capabilty to download the training and job aids contained in the site. Downloaded material must not be distributed or used outside the member company.

To download material, log into the download center at www.nicbdocs.org. All new users will be required to establish an account to gain access to the site.

Below you will see all the training and job aids that are available for download:

Indicators of Fraud*

Additional Living Expenses (ALE) Fraud	Pedestrian Staged Accident Fraud
Application Fraud	Property Fraud
Baggage Claim Fraud	Rate Evasion Fraud
Casualty Fraud	Recruited/Solicited Patient Fraud
Catastrophe Fraud	Repair Facility Fraud
Classic Vehicle Fraud	Residential Rental Fraud
Contractor/Public Adjuster Fraud	Slip and Fall Fraud
Diagnostic Testing Fraud	Smoke and Ash Fraud
Durable Medical Equipment (DME) Fraud	Staged Accident Fraud
Hail Damage Fraud	Transportation Network Company (TNC) Fraud
Hit While Parked Questionable Claims	Vehicle Glass Fraud
Identity Theft Fraud	Vehicle Rental Fraud
Illegal Street Racer Fraud	Vehicle Theft Fraud
Medical Billing Fraud	Vessel Theft Fraud
Motor Vehicle Theft & Fraud**	Water Mitigation Fraud
Motorcycle Theft and Fraud	Workers' Compensation Fraud
Online/Internet Application Fraud	Workers' Compensation Premium Fraud
Organized Fraud Activity	

Investigative Guides

Catastrophe Claim Investigation Guide

Examination Under Oath and Statement Guide

Fire Investigation Guide: Volume I - Property Fires, Volume II - Vehicle Fires

Injury Claim Investigation Guide

Insurer Anti-Fraud Program Guide

NICB/NICTA Training Resources Guide

Property & Casualty Insurance Fraud Encyclopedia - The Book of Schemes

Property Claim Investigation Guide

Questionable Claim Program Guide

Staged and Caused Accident Investigation Guide

Vehicle Theft Claim Investigation Guide

All FraudSmart Courses

All FraudSmart Courses are available for download. Please refer to page 4 in this guide for a complete list of classes that are available.

Indicators of Fraud are Only Available Through the NICB Download Center
Includes: Illegal Street Racer, Motorcycle Theft Fraud, Vehicle Theft Fraud, Vehicle Rental Fraud and Vessel Theft Fraud

To order materials, log into the members-only section at www.nicb.org. If you do not have members-only access, please refer to Appendix A and B in the back of this guide to complete and submit the add/removal form.

Brochures*

Arson Fraud	Motorcycle Theft and Fraud
Boat Theft	NICB Hotline
Cargo Theft Brochure	Staged Automobile Accident Fraud
Commercial Heavy Equipment Theft	Vehicle Cloning
Disaster Fraud	Vehicle Glass Fraud
Hail Damage Fraud	Vehicle Theft
Identity Theft	VINCheck
Insurance Fraud	Workers' Compensation and Medical Fraud

Guides and Publications

Catastophe Claim Investigation Guide	Property Claim Investigation Guide
Examination Under Oath and Statement Guide	Questionable Claim Program Guide
Fire Investigation Guide Volume I – Property Fires	Staged and Caused Accident Investigation Guide
Fire Investigation Guide Volume II – Vehicle Fires	Vehicle Theft Claim Investigation Guide
Injury Claim Investigation Guide	
Insurer Anti-Fraud Program Guide	
NICB 2013 Annual Report	

Property & Casualty Insurance Fraud Encyclopedia - The Book of Schemes

Pocket Guides for Law Enforcement

Cargo Theft Pocket Investigation Guide
Fire Pocket Investigation Guide
Staged Accident Pocket Investigation Guide
Vehicle Theft/Fraud Pocket Investigation Guide

Passenger Identification Manuals
Years Available: 2011, 2013, 2014, 2015, 2016

Commercial Identification Manuals
Years Available: 2010, 2015

Passenger Manual Compilation CD - Includes years 1937-2011

Posters**
NICB Hotline
Staged Automobile Accident Fraud
Workers' Compensation and Medical Fraud

Brochures available in English and Spanish and limited to 3,000 per brochure per order
**Posters are available in English and Spanish*

TrueStory Case Studies

TrueStory Case Studies are based on actual claims. They are interactive exercises, less than 30 minutes long, designed to increase fraud awareness and to facilitate discussions concerning the detection of insurance fraud during the claims handling process. The following are the case studies that are available to download:

Caused Accidents - Great White North
Caused Accidents - Life in the Fast Lane
Caused Accidents - Where's a Cab
Commercial (Auto Physical Damage) - The Great Commercial P.O Box Round Up
Fraudulent Structural Homeowner's Claim - Tree-Mendous
Hit While Parked - Old Folks
Medical Clinic - Medical Mishap
Medical Clinic - Scanners to Scammers
Medical Mill - No Pain, No Gain
Property Claim Fraud - Not Too Smooth
Slip and Fall - Tag Team
Staged Accident - Dumpsters, Trees, and Poles. Oh My!
Stolen Motorcycle and Electronics - Lost and Found
Stolen Scheduled Property - Georgia Peach
True Story Templates - Create Your Own Case Studies
Staged Accident - Crash and Buy
Vehicle Theft - TN vs VA
Water Damage - One Too Many
Workers' Compensation - Flipping Burgers
Workers' Compensation - Wright to Wrong

Other Items Available

Anti-Fraud Puzzles
Interactive Indicator Guide (Available as a download for PC or App download for smart phones ONLY)
InterviewAssist
Indicators of Potential Deception
Anti-Insurance Fraud Training Guide (NICB/NICTA Training Resources)
Accident & Fraud Prevention Checklist & Towing Guide
Vehicle Identification Inspection Guide
State Mandated Fraud Warnings
State Mandated Training Guide

The National Insurance Crime Training Academy (NICTA) meets the online training needs of the insurance industry. As a result of this training, insurance personnel can increase the deterrence, detection, investigation and prevention of fraudulent claims to protect customers and the public at large.

Programs offered satisfy most states CE and/or mandatory anti-fraud training requirements (complete list of states can be found on page 16). NICTA completes the CE submissions to the state DOI and provides management reports. For further information regarding registration go to www.nicta.org.

NOTE: Various Departments of Insurance charge a continuing education processing fee to submit credit. Upon submitting credit requires, NICB/NICTA pays the fee and seeks reimbursement from students/companies.

NICTA Online Training Courses (Eligible for CE credits)

At the end of each NICTA course you will be given an exam that you must pass in order to recieve a CE credit(s).   Please refer to page 16 of this guide or NICTA website for additional CE Information.

GENERAL

Contractor, Vendor, Provider Fraud

Learn to spot the indicators of Contractor, Vendor and Provider Fraud. Learn the various types of schemes used to defraud the insurance industry. Upon completing this course, students will be able to analyze and appraise the different circumstances surrounding contractor, vendor, and provider fraud. Detect CVP fraud by using available indicators and details, or lack thereof, specific to the situation and/or damage. Assess the hidden possibilities of CVP Fraud activity in a single claim amongst a majority of legitimate claims and apply what they know about CVP Fraud to their work in the field.

Customer Service & Fraud Investigations

The premise of this course is that good customer service must be provided even if fraud is suspected. There-fore when interacting with an insured (or claimant, or vendor or provider) and fraud is suspected, care must be taken to ensure the insured is treated properly and provided explanations that maintain their satisfaction as a paying customer. In today's very competitive insurance industry quality customer service is a critical element in whether an insurer retains their customers or whether their customers take their business to a competitor. If an insurer isn't able to retain their valued customers, this impacts profitability.

Detecting Fraud for Underwriters

This course is on the identification and investigation of fraud indicators that might be encountered by an under-writer. It provides an overview of the indicators of this type of activity and shows the proper steps to take when presented with an insurance application that might be fraudulent. This course is designed to help students understand the ways in which application fraud is committed and identify the best methods to combat it.

Field Safety Course

There are plenty of consequences that make it important to know about personal safety in your job. This course is intended to help individuals avoid dangerous situations, prevent injuries, abuse, or theft and to them you to continue to be a healthy, productive member of their company's team. Individuals will learn how to plan and organize thei day for maximum personal safety.

Identity Theft/Fraud

This course addresses the issues associated with identity theft/fraud. Throughout this course students will discover the indicators of identity theft/fraud and an outline of the investigative steps that will be used as claims are investigated.A number of new terms will be introduced in the course of this training module. Students will learn how to idenitfy the investigative steps that are part of a questionable identity theft/fraud case.

IASIU Ethics Course
This course is intended to give insurance personnel a solid background of the daily issues they face. During the course of several rhetorical questions will be asked and the possible action steps that should be taken when faced with and ethical problem will also be discussed. The course is designed to help sturdents understand various avenues they can take when confronted with an ethical decision/situation.

ISO ClaimSearch User Training
The ISO claimsearch training course provides instruction on how to properly submit a questionable claim to the ISO database. Additional instruction on how to read and understand match reports and benefits of submitting referrals are also discussed. This course is intended for insurance claims adjustors and insurance fraud investigators and/or agents.

Insurance Fraud Basics
This course presents the fundamentals of insurance fraud to claims personnel, adjustors, field personnel, and new investigators. For the major types of property and casualty insurance fraud, students discover details of the schemes, indicators, and actions to take based on those indicators. In addition, students find out how insurers prevent and handle fraud committed by opportunistic customers as well as organized groups.

Introduction to Commercial Lines Fraud
This course on the identification and investigation of commercial fraud provides an overview of the indicators of this type of activity and shows the proper investigative steps to take when presented with a questionable claim involving commercial fraud. This course is designed to help students understand the ways in which commercial fraud is committed and identify the best methods for conducting their investigations.

Introduction to Insurance Fraud Investigation
This course teaches the basics of investigating questionable claims. The course interactively leads students through the steps and tools of a fraud investigator. Students will learn to spot the indicators of fraud, understand what must be proven, and know the action steps that must be taken.

Listening for Deception in Claims Interviews (by Phone)
This course on listening for deception in claims interviews provides an overview of the types and techniques of deceptive language that claimants and other parties might use during the interview process. This course is designed to help students understand the ways in which deceptive language is recognized and identify the best methods for conducting an investigation.

Online Application Fraud
Underwriters in the property and casualty insurance industry, who are in a position to detect fraud perpetrated during the online application process, will learn how to identify indicators of online application fraud, choose actions to take based on those indicators, and identify common schemes related to this type of fraud. Students work through two case studies of online application fraud and then discover the characteristics of other variants of the fraud.

Rate Evasion
This course provides the tools to spot the indicators of Rate Evasion Fraud across a range of types of claims. Learn the various types of schemes used to defraud the insurance industry.

Recorded Statements

This course address the preparation and steps necessary to take recorded statements during a property and casualty insurance claim investigation. Recorded statements are a crucial tool for establishing details associated with a claim. As a part of the fact-gathering process, they help establish the pertinent information (locations, parties involved, injuries, the extent of the loss, etc.) are often used for comparison to future statements.

Training Theory & Skills for Fraud Investigators

This course teaches students how to prepare and deliver effective anti-fraud training that positively affects the company's bottom line. During this course, students will learn how to write proper learning objectives and how to conduct effective anti-fraud training sessions.

Writing Investigative Reports (for claims)

This course details the type of information you should record to explain the steps you implemented and the basis for any decisions or recommendations made during a claim. While this course discusses creating in-depth reports involving claims with questionable aspects, the concepts are applicable to the documentation of routine claims as well.

PROPERTY

Arson for Profit

This course provides instruction about property fraud as it relates to arson for profit and what indicators make a claim a "questionable" claim. Arson for Profit is defined and ways to determine if a claim is suspicious is discussed. Students become familiar with scams they may come across as claims are processed and they learn how to examine some of the action steps that can be taken when those incidents occur.

Body Shop Fraud

This course on the identification and investigation of Body Shop fraud provides an overview of the indicators of this type of activity. It shows the proper investigative steps to take when presented with a questionable claim involving a vehicle repair where fraud indicators point to potential fraud at the body shop. This course is designed to help the student understand the ways in which body shop fraud is committed and identify the best methods for cunducting an investigation.

Catastrophe Fraud

This course on the identification and investigation of catastrophe fraud provides an overview of the indicators of this type of activity and shows the proper investigative steps to take when presented with a questionable claim involving a claim after a catastrophe.

Classic Car Insurance Fraud

This course will show insurance professionals the steps to take when investigating a suspicious claim involving a classic car. This course is designed to help you understand the characteristics of classic car insurance and their related fraud schemes, and to identify indicators of classic car insurance fraud and choose the appropriate actions to take based on specific indicators.

Hit While Parked

This course addresses potential fraud in Hit While Parked automobile claims. Sometimes, individuals will falsely claim that their automobile was hit while parked in order to submit a claim for damage that their insurance policy wouldn't cover if the insured had been driving the vehicle. There are a number of steps that you can take to determine whether a car was indeed parked when it sustained the damage that the insured is submitting the claim for.

Investigating Property Fraud
This course shows insurance professionals the steps to take when investigating a suspicious property claim. The various types of claims are discussed and possible legitimate causes for these claims are taught. Fraud indicators are shown and action steps to resolve the indicators are discussed.

Investigating Questionable Water Claims
Students will be able to understand the elements of a water claim and identify indicators of fraudulent water claims. They will also be able to choose actions to take based on specific indicators and identify schemes related to fraudulent water claims.

Investigating Vehicle Theft Fraud
This course teaches insurance professionals the steps to take when investigating a suspicious vehicle theft claim. The reasons for vehicle theft and vehicle theft fraud are discussed. The vehicle identification number (VIN) is discussed in detail as it is the "identity" of a vehicle. Vehicle theft indicators are pointed out and possible action steps are discussed. Throuout the course, students will have to follow along and complete a simulated theft claim investigation. This will give them a better understanding of how this type of fraud is conducted.

Mold Insurance Fraud
This course on the identification and investigation on mold insurance fraud provides an overview of the indicators of this type of activity and shows the investigative steps to take when presented with a questionable claim involving mold damage.

Smoke and Ash Fraud
The premise of this course is to address the investigation of questionable or false smoke and ash damage claims in which there is not any smoke, ash or fire damage to the residence. It will enhance the investigation techiniques to look for other signs, i.e. the residence is not in close proximity to the fire, homeowner does not report the damage or submit the claim, third party submits on behalf of homeowner etc.

Street Racing and Sport Compact Vehicle Fraud
This course on the identification and investigation of street racing and sport compact vehicle fraud provides an overview of the indicators of this type of activity and shows the investigative steps to take when presented with a questionable claim that might involve street racing and/or sport compact vehicle fraud.

Vehicle Glass Fraud
This course will help the student understand the significant effect of vehicle glass fraud on the insurance industry, and to help define the common ways vehicle glass fraud occurs. It will also help to identify indicators of vehicle glass fraud from shops, identify indicators of vehicle glass fraud that come from the insureds, and describe the course of action to be taken with questionable vehicle glass claims.

INVESTIGATIONS

Investigating Organized Groups
This course on the identification and investigation of organized groups of insurance fraud criminals, provides an overview of the indicators of group activity and one of the common schemes that organized groups perpetrate to defraud insurance carriers. This course is designed to help students understand the ways in which insurance fraud organized groups operate and identify the best methods for conductiing an investigation.

Pedestrian Staged Accidents
Learn how to identify and act on claims involving accidents staged by pedestrians or bicyclists. Claims personnel and adjusters will learn the indicators of this type of fraud, actions to take based on those indicators, and about the various types of pedestrian/bicyclist staged accident fraud. This course is also appropriate for underwriters and new investigators.

Preparing a Case for Prosecution
This course is designed to teach insurance professionals how to prepare a case for presentation to law enforcement or the prosecutor's office for possible prosecution. It demonstrates what is needed to prosecute a criminal case involving insurance fraud. Students will be able to recognize and select documents for presentation to a prosecutor that will answer the elements of proof.

Recognizing Organized Group Fraud
Claims personnel, adjusters, and field personnel will discover what constitutes organized group fraud, how to identify it, and what they can do when they suspect it. Students work through a sample bodily injury case involving an organized group and another sample case involving property. The students also learn about other common variants of organized group fraud.

Staged Auto Accidents
This animated learning module will guide the student through the basics of this staged accident fraud. Learn how to identify questionable automobile claims. Students will learn how to identify the scope of staged accident fraud problem. Fraud indicators of questionable accident claims and action steps needed to resolve the claims will be taught.

The Internet: An Investigative Tool
Learn how to use the internet to aid in your investigations. This is a basic course for claims personnel and SIU Investigators. It explains how the World Wide Web (WWW) works to give you access to information. Various internet based sources used to investigate a suspicious property or casualty claim and the Internet tools used to gather information is discussed.

Using the Social Network for Investigations
Define social media, and explain how it can aid in the investigation process. Summarize the various research options available, and understand the difference between the tools available in order to secure the right type of content for potential use in a claim decision. Recognize the role privacy laws, corporate policy, and ethics play in the use of social networking and other electronic means when used for investigation. Identify the risks both as an investigator and as an insurance company representative and how you and your company can be exposed due to improper use of social media during investigation. Apply the use of social networking research to supplement traditional investigative techniques, and identify both legitimate and questionable claims.

Workers' Compensation Premium Fraud
This course on the identification and investigation of workers' compensation premium fraud provides an overview of the indicators of this type of activity and shows the investigative steps to take when presented with a questionable claim that might involve workers' compensation premium fraud. This course is designed to help students understand the ways in which Workers' Compensation Premium Fraud is committed and identify the best methods for conducting investigations.

MEDICAL

Casualty Insurance Fraud
This course on the identification and investigation of casualty fraud in commercial & personal lines provides an overview of the indicators of this type of activity and shows the investigative steps to take when presented with a questionable claim involving a casualty claim.

Diagnostic Testing (DT) Fraud
Learn to spot the indicators of Diagnostic Testing (DT) Fraud. Learn to determine whether the tests billed within a claim are legitimate expenses or fraudulent. Course material includes descriptions of some of the most common DT Fraud schemes and action steps to take during your claim investigation.

Durable Medical Equipment (DME) Fraud
When students finish this course, they will be able to understand the definition of durable medical equipment, and the many schemes involved in DME fraud. They will be able to identify all the components and "players" that could be involved in DME fraud. They will also be able to choose actions to take based on the investigative tools they can utilize while reviewing documents involved in durable medical equipment fraud.

Evaluating Medical Bills for Fraud 101
This introductory course on evaluating medical bills for fraud provides an overview of how to identify the indicators of this type of activity and shows the steps to take when presented bills for medical services that might be fraudulently billed. This course is designed to help the student understand the ways in which medical billing fraud is comitted and how to compare bills and supposrting documents to combat it.

Introduction to CPT Codes in Medical Billing Fraud
Learn how CPT codes work and how they can be abused to commit medical billing fraud. This course explains, in layman's terms, the mystical world of Current Procedural Terminology (CPT).

Introduction to Medical Billing Fraud
This course on the identification and investigation of medical billing fraud provides an overview of the indicators of this type of activity and shows the investigative steps to take when presented with a questionable claim that might involve medical billing fraud.

Medical Clinic Inspection
This course provides the knowledge to plan a clinic inspection with data obtained from inspecting medical bills. Students will learn the sources of information needed to conduct a background investigation on a health care provider. The course describes, in detail, the various pieces of medical equipment that are often used in medical facilities. Students learn what to look for when conducting an outside clinic inspection.

Modalities and Procedures Questionable Billing
Learn the difference between modalities and procedures and how they can be used to fraudulently bill for up coded services or services not rendered. Distinguish the difference between the two types of Physical Medicine services - modalities and procedures. Show the ability to identify the modality code or procedure code that most accurately identifies the service performed. Examine different types of CPT codes that vary in the amount of provider skill and supervision to determine and validate proper guidelines are met. Apply methods to identify a questionable or fraudulent claim situation.

Workers' Compensation Fraud
This course describes how to spot the indicators of workers' compensation fraud, as well as the likely partici-pants and scams used to bill undeserved money from the exclusive remedy designed to protect the American worker. Students will learn how to identify indicators that point to questionable workers' compensation claims. The five parts of a questionable workers' compensation claim will be demonstrated. Students will also gain an understanding of why claimants might misrepresent the facts of a workers' compensation claim.

OTHER LEARNING (Not eligible for CE credits)

NICB Questionable Claims Submission
This course provides instruction on how to submit a questionable claim and explains the value of submitting questionable claims to NICB. The five (5) benefits of submitting a claim and a tutorial on submitting it to ISO is demonstrated.

IAATI Level 1 Online Certification Test
This is a certification test for IAATI's online Level 1 Auto Theft Investigator Certification.

IAATI Level 2 Online Certification Test (Advanced)
This is a certification test for IAATI's online Level 2 Auto Theft Investigator Certification.

IAATI Level 3 Online Certification Test (Master)
This is a certification test for IAATI's online Level 3 Auto Theft Investigator Certification.

NICB Analyst Academy I & II Pre-Test and Registration

Online Reference (Not eligible for CE credits)
PDF Files containing strategic analysis of the below topic and how they relate to insurance fraud.

California Small Claims Court Tips & Regulations
Glossary of Insurance Terms

Medical Snapshots (Not eligible for CE credits)
Provides the claims rep or investigator a brief overview of causes and treatments

Ankle Injuries
Carpal Tunnel Syndrome
Cervical Strain
CPT Modifiers
Diagnostic Testing
Lumbar Strain
Orthopedic Testing
Schizophrenia
Stress
X-ray CPT Code Abuse

Streaming Videos (Not eligible for CE credits)
Bodily Injury Fraud
Catastrophe Fraud
Confessions of an Insurance Fraud Offender
Property Fraud
Staged Auto Accidents
The Give Up
Vehicle Theft Fraud
VINnie's Story
Workers' Compensation Fraud

Webcasts (Not eligible for CE credits)
Webcasts provide concise definitions and descriptions of the title topic in video format. Their purpose is to supply immediately needed information "Just In Time" for the user.

Medical Fraud Webcasts
Billing Modalities as Procedures
Billing Supervised Modalities & Constant Attendance Modalities
CPT Codes
Drug Compounding
Epidural Steroid Injection (ESI)
Fraudulent Treatment (SOAP) Notes
ICD Diagnosis Codes
Improperly Billing Procedures
Initial Bill Review
Linking ICD Codes to CPT Codes
Low Level Laser Therapy (LLLT)
Medical Necessity of Chiropractic Manipulation
Medical Necessity of Radiographs (x-rays)
Overutilization of Modalities
Platelet Rich Plasma (PRP) Therapy
Treatment Privided by Unqualified Providers
Trigger Point Injections
Understanding MedAWARE Alerts

Vehicle Fraud Webcasts
Crash Data Retrieval
Heavy Equipment Identification
Vehicle Identification Numbers
Vehicle Identification Points
Vehicle Repair Fraud
Vessel Identification

Organized Fraud Webcasts
Organized Groups & Insurance Fraud
Personal Injury Protection (PIP) Schemes
Recruitment of Patients
Staged/Caused/Paper Accidents

Property Fraud Webcasts
Dime Spinning & Mechanical Damage (Hail)
Metal Theft

The National Insurance Crime Training Academy (NICTA) offers a corporate licensing program for the insurance industry. The program provides all full-time employees of an organization unlimited access to 100% of NICTA's online anti-fraud training courses and more. It will provide great ROI and virtually pay for itself through the detection and non-payment of fraudulent/inflated claims.

A NICTA corporate license works in conjunction with NICB membership. When a NICTA corporate license is purchased, a small fee is calculated based on a company's annual NICB assessment. The NICTA annual fee ranges from a maximum of $12,000 to a minimum of $500. The NICTA fee is invoiced on the quarterly NICB invoice. Often just one fraudulent claim detected as a result of NICTA training pays for the entire year's license.

The Process:
Corporate license members are provided a NICTA corporate license code. The organization distributes the code to its employees. Employees log onto www.nicta.org and complete the registration process using their corporate code. Students will then select and enroll in an online anti-fraud training course at no charge.

The Content:
NICTA corporate license members receive all training and products on the NICTA web site free of charge. Plus, through NICTA, members enter the world of online learning.

Note: Non-NICTA Corporate License holders are required to pay $50 per course and will also be required to pay for all training products offered on the NICTA site.

What is the payment plan?
The fee is divided into quarterly payments to NICTA in conjunction with the NICB invoice.

What is the price for an individual to purchase a cyber (online) course?
The cyber courses are $50 each. If company employees purchased each of the online courses individually, the accumulated cost would quickly exceed the discounted license fee. With a corporate license you have unlimited access to all courses and material, free of charge, saving you a significant amount of money.

Is any special software required for the courses?
A one-time free download of Macromedia Flash Player is needed. Instructions are given at the beginning of each NICTA online course.

What would my NICTA corporate license fee be?
Currently the fees are:
If the assessment is > than 800K the fee is $12,000
If the assessment is > than 400K and less than 800K the fee is $6,000
If the assessment is > than 200K and less than 400K the fee is $3,000
If the assessment is > than 100K and less than 200K the fee is $2,000
If the assessment is > than 50K and less than 100K the fee is $1,000
If the assessment is > than 25K and less than 50K the fee is $750
If the assessment is < than 25K the fee is $500

What if a company decides to purchase a corporate license mid quarter?
Their fee is prorated.

What is the corporate license savings compared to what a non-NICB member would pay?
The current non-NICB member site license fee structure is double that of member companies.

Why are the fees so deeply discounted?
NICB is a primary partner of NICTA.

What does NICTA do with the fees collected?
The fees are used to develop new courses for NICTA and assist in maintaining and improving the NICTA web site. Additionally, any "surplus" fees are used to repay NICB for their investment in NICTA. This allows NICB to provide additional services to its members.

Can companies monitor their NICTA use?
Yes. Designated personnel can be given "manager" access. This will allow them to enter the NICTA Learning Management System and see the courses taken by individual employees, as well as run various reports.

Why should I renew a NICTA corporate license next year?
New courses will be added annually. Also, the traditionally high turnover of claims personnel virtually ensures you will save money with a NICTA corporate license (compared to providing new hires traditional training). The addition of new courses and new personnel means you will always have sufficient individuals utilizing this vital anti-fraud training to make NICTA's discounted corporate license program a sound investment year after year.

Can I look at the online courses before I purchase a corporate license?
Yes. NICTA can arrange temporary free access to the online courses so you may preview them.

How can I most effectively utilize and realize the benefit from a NICTA corporate license?
Four ways:
1. Corporately sponsor, endorse, advertise and encourage the training. Stress how this training will increase the identification of questionable claims by training more people to stop potentially un-meritorious payments. This improves financial performance and the bottom line.
2. Emphasize online training saves money and improves productivity by conserving training and travel dollars and reducing "down time" due to travel.
3. Encourage the managers to dedicate time to the online training sessions. Discourage employees from "squeezing in" courses between processing claims. There are too many interruptions and training becomes disjointed and less effective.
4. Repeat number one. Corporate sponsorship and bottom line results have the most impact.

How long is each course?
Each course is an hour to an hour and a half.

How does NICTA help my company with Continuing Education (CE) compliance and state mandated training?
To the best of our knowledge, 13 states require continuing education to maintain an adjuster license. These states are Delaware, Florida, Georgia, Louisiana, Montana, New Hampshire, North Carolina, Oklahoma, Texas, Utah, Vermont (Workers' Comp only) and Wyoming. NICTA has been approved as a provider in all of these states except for North Carolina. Please refer to page 16 for additional information.

In addition, there are 16 states and the District of Columbia whose DOIs have mandated (NICTA's interpretation) that anti-fraud training be given to Claims Adjusters on an annual basis. As this mandate/requirement is for "generic" training and not for DOI pre-approved courses, it is NICTA's belief that its online courses satisfy this requirement as well. These states are: Arkansas, California, Colorado, Florida, Kentucky, Maine, Maryland, Massachusetts, Minnesota, New Jersey, New Mexico, New York, Ohio, Pennsylvania, Tennessee and Washington.

There are also several states that require adjusters to have a license, but they do not require CEs to maintain the license. These states are Alabama, Arkansas, Kentucky, Michigan, New Mexico, Oregon, Rhode Island, South Carolina, West Virginia.

A limited number of NICTA programs are approved for continuing education credit for Agents/Producers in Florida, Georgia, Louisiana, New Jersey, Pennsylvania and Texas.

What benefits does my company realize from using NICTA?

- A huge return on your training dollar.
- Additional training and investigative aids.
- Anti-fraud training available to all of your employees 24/7.
- Assists you to stop paying fraudulent claims.
- Improvement of your bottom line.

- Improved financial performance with increased detection of questionable claims.
- No productivity loss due to travel day absences.
- Quick, easily accessible training.
- Satisfies state CE and training requirements.
- Savings in your travel dollars.

Are there any "performance guarantees" or refund procedures?
No. However, if within the first 30 days of receiving your corporate license you encounter a hardware problem or similar problem preventing you from using the NICTA courses (in mass), we will refund your fee minus the cost (on an individual basis) of any courses or NICTA products you have used or received.

NICB Members-only Website Administrator Form

This document must be signed by an individual in a senior management position within your company who has the authority and responsibility to obligate the company for the level of access requested for the individual user(s) listed on the "NICB Members-only Website Add/Removal Form." This individual must sign below and will be listed in NICB's records as the administrator for your company. This individual also will be responsible for the timely addition and removal of users from the account.

Administrator Name: _____ Insurance Code:_____

Company Name:_____ Title:_____

Address:_____ City:_____

State:_____ZIP:_____Phone: _____ Fax:_____

Email Address: _____

Administrator Signature:_____Date:_____

Access Levels

Basic Access

This will provide the user access to the following fraud-fighting tools:

- Registration for NICB Mega Academies
- Synopsis of NICB's Top 25 Cases and major cases
- Legislative/Regulatory anti-fraud compliance guides
- NICB Personnel – This feature allows a user to locate an agent and obtain their contact information, their assigned territory and area of expertise. It also provides contact information for training directors and field analysts.

*Fore*WARN℠ Access

This will provide the user access to all of the fraud-fighting tools of basic access with the addition of NICB's online information delivery system that alerts NICB members of insurance fraud and vehicle theft activity threats. These weekly alerts contain detailed information about questionable insurance claims. Among other benefits and solutions, NICB members can utilize *Fore*WARN℠ Alerts to check their claim files for potential exposure to organized crime schemes, gather useful information about current fraud and theft trends, and access specialized NICB research studies that can help them manage and process claims more effectively.

*Med*AWARE℠ Alert Access

This will provide the user access to all of the fraud fighting tools of basic access with the addition of NICB's online information delivery system that alerts NICB members of medical insurance fraud threats. These alerts contain detailed information about results of the Aggregated Medical Database (AMD). Among other benefits and solutions, NICB members can utilize *Med*AWARE℠ Alerts to check their claim files for potential exposure to organized crime schemes, gather useful information about current medical fraud trends, and access specialized NICB research studies that can help them manage and process claims more effectively.

Clinic Inspection Access

This will provide the user access to all of the fraud-fighting tools of basic access with the addition of an online clinic inspection database that allows member companies to register their clinic inspections after completing an onsite clinic inspection. It also allows authorized users to search the data to learn about specific facilities that have previously been inspected by other SIUs.

Reminder: Any dissemination outside your organization of information that appears on the Members-only section of the NICB Website without the prior written approval of the NICB Law Department is prohibited and is a violation of your company's agreement with NICB and grounds for immediate termination of access to this information.

NICB Members-only Website Add/Removal Form

Copy and use additional pages to list other authorized users (and additions or removals).

NOTE: NICB will automatically email the user ID and password to each individual user. If you do not want NICB to e-mail this information, please check here ☐ and NICB Technical Support will contact you to discuss other options.

☐ Add User ☐ Remove User ☐ Update User

Access Levels: (check all that apply)

☐ Basic ☐ *Fore***WARN**℠ ☐ *Med***AWARE**℠ ☐ Clinic Inspection Solutions

Name:_____Title:_____

Address:_____City:_____

State:_____ZIP:_____Phone #:_____Fax #:_____

Email Address: _____

Does the user want to receive a weekly e-mail notification of new Alerts posted? ☐ Yes ☐ No

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Does the user want to receive a weekly e-mail notification of new Alerts posted? ☐ Yes ☐ No

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National Insurance Crime Bureau – Membership Department
Attn: Maggie Cusack, Membership Specialist
Phone: 847.544.7124 ● Fax: 847.544.7101 ● Email: mcusack@nicb.org

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If you are a member of a company that has purchased a corporate license from NICTA, you will need to obtain your six digit corporate code in order to create your profile on NICTA. If you sign up without inputting your corporate code, you will be prompted to pay $50 for each class you take. Contact your company's NICTA Point of Contact (POC) for your company's corporate code. If you are not sure who your company's NICTA POC is, please send an email to info@nicta.org, and state that you need to obtain your coporate code. NICTA will provide you the name of your company's POC.

1. Log onto www.nicta.org.
2. Click on "New Student" at the top right of the page.
3. Review the Terms and Conditions and click on "I Agree."
4. Type in your six digit corporate code, your email address and create a password and click on "Submit."
5. Continue to fill out the remaining fields required.
6. Remember your User ID and Password.
6. Start using NICTA!

If you can't remember your password, enter your email address and click on "Email Password Reminder."

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1. Log onto www.nicbdocs.org.
2. Click on "Sign Up" located in the upper right hand corner.
3. Review the Terms of Privacy Principles and check the box.
4. Fill out the remaining necessary fields and click on Submit.
5. Remember your User ID and Password that you created.
6. An email will be sent to the Training Administrator at NICB requesting your access to be approved. Once approved, you will receive an email advising you have been approved.
7. Log back onto www.nicbdocs.org.
8. Click on "Member Login" in the upper right hand corner, check the "I Agree " box and enter in your User ID and Password and click "login."
9. Start downloading documents!

*Website can also be accessed through www.nicb.org under the "Training" tab on the home page.

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Roland Dumond
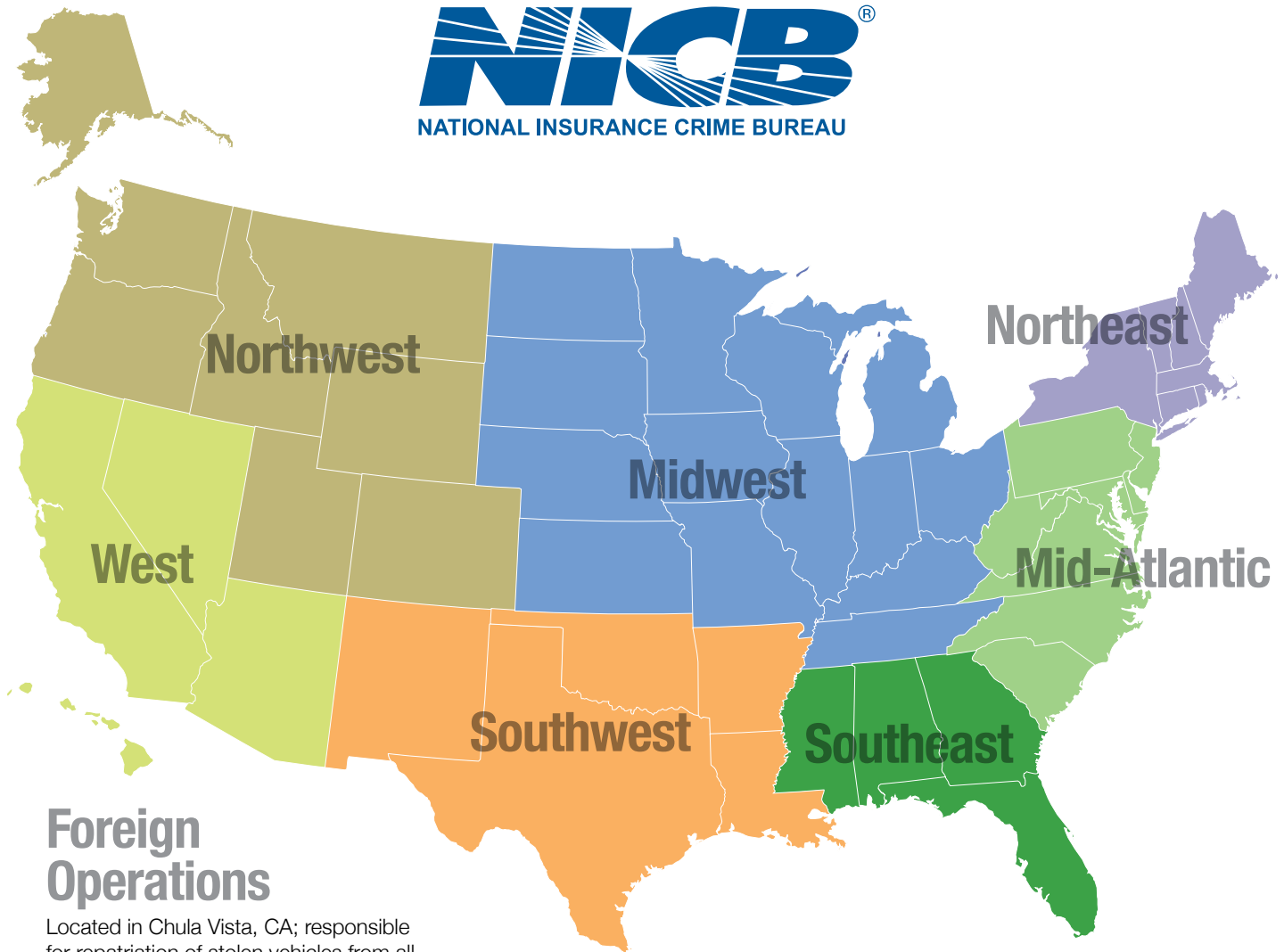Tel: 903.873.6040
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Regions Covered: Midwest, Northwest, Southwest, West and Foreign Operations

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Regions Covered: Mid-Atlantic, New York, Northeast and Southeast

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NICB's Training Department's Mission Statement

Provide training to deter, detect and investigate insurance fraud and auto theft and promote information sharing and cooperation reducing insurance crime's financial impact on member companies and the public.

Message from Training Department's Vice President

Through training, NICB reaches more people face to face than by any other means. If you have ideas for training courses or products, please let us know. The more we have to offer, the more people we can reach.

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