



America's small business insurance specialist®

Eliminate Workers' Compensation Fraud Before it Eliminates Your Business

EMPLOYERS® offers preventative fraud protection services to help your business get ahead of workers' compensation fraud before it impacts your bottom line.

\$60.2 BILLION in workers' compensation claims are paid out annually¹

\$6 BILLION ANNUALLY in fraudulent workers' compensation claims, amounting to 10% of all claims payments¹

WHAT DO WE DO?

EMPLOYERS provides fraud prevention support and proactive assistance once a suspected fraudulent claim has been submitted. We help your business combat workers' compensation fraud, so your experience rating will not suffer and annual premiums will not increase.



BE VIGILANT TO POTENTIAL FRAUD IF YOUR EMPLOYEE...

- reports an injury first thing Monday morning or late Friday
- has a history of filing suspicious claims, or has the same doctors and lawyers used by a group of claimants
- describes the accident in a way that conflicts with the employee's medical history or first report of injury
- refuses a diagnostic procedure to confirm the nature or extent of an injury
- has a history of consistently changing physicians, addresses and jobs



AS A BUSINESS OWNER YOU SHOULD...

- use anti-fraud materials to emphasize the adverse impact of fraud on co-workers and the business
- learn how to recognize the warning signs of fraud
- consider the legal use of video equipment to monitor the workplace
- react immediately to a potentially fraudulent situation by documenting every detail of an accident
- identify witnesses and document witness and claimant statements when fraud is suspected

¹ Source: <http://www.ssa.gov/policy/docs/statcomps/supplement/2013/workerscomp.html>

HOW DOES OUR PROCESS WORK?

Our process is proactive and efficient, and is aimed at helping you mitigate the adverse effects of fraudulent claims and continue with business as usual. **Here's how it works:**



SUSPICIOUS CLAIM



COLLABORATIVE INVESTIGATION



CRIMINAL PROSECUTION



RESOLUTION

- 1** An injury claim is submitted, and if fraud is suspected an investigation begins
- 2** The claims and fraud investigations departments coordinate efforts to determine all of the facts
- 3** If sufficient evidence exists to believe that a crime has occurred, the claim is referred to authorities
- 4** If claimant is prosecuted and found guilty, adverse impact is removed from the policyholder's experience rating

HOW ARE WE IMPACTING BUSINESSES

We understand what to look for and how to execute a smooth investigative process, while helping to ensure fraudulent claims don't negatively impact your insurance rates or experience rating.

CLIENT:

Food-service vendor in Southern California

CLAIM:

In 2013, an employee reportedly slipped and fell, subsequently filing a worker's compensation report. The business owner suspected fraud and reported his concerns to **EMPLOYERS**. **EMPLOYERS** noticed a few additional red flags and stepped in to assist with the case.

RESOLUTION:

EMPLOYERS facilitated a prompt investigation and referral to authorities at the very onset of the claim, **saving the small business owner thousands of dollars**. Within six months, the prosecution was completed.



HOW CAN WE HELP YOU?

If you want to learn more about preventing workers' compensation fraud in your business, talk to your agent today.

CLICK: employers.com

EMAIL: FraudFighters@employers.com

CALL: 1-800-750-3939 (Fraud hotline)

Learn more from our Fraud Webinar Series at www.employers.com/fraudwebinar

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