

DETECTING AND PROSECUTING FRAUD

To help ensure that we do the best possible job of detecting and prosecuting fraud, we employ a wide variety of proven techniques, including:

- Staffing our Fraud Investigations Unit with experienced fraud investigators.
- Reducing claim costs by identifying claimants who abuse the system.
- Using professional surveillance when warranted.
- Pursuing all claim fraud, even if the claimant moves out of state.
- Offering a \$5,000 reward to policyholders' employees for identifying fraudulent claims.
- Improving workplace morale by keeping abuses to a minimum.

The FHM policyholder plays an important role by:

- Reporting fraud issues immediately at time of discovery to your claims adjuster.
- Posting the \$5,000 reward poster in your workplace (additional posters are available on FHM web site at www.fhmic.com or from Policy Services at 888-346-3461 Ext. 401 or 424).

When filing a First Report of Injury with possible fraud issues at time of loss, check the "NO" block in the "agree with description of accident" section and provide details to the claims department at this time.