

 FRASCO® training

UNFILTERED

Using Surveillance to Get the Real Picture



APPROVED BY:
CEU Institute

PURPOSE OF SURVEILLANCE



Compare Objective
Observations To Known
Information



Establish Patterns

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TYPES OF SURVEILLANCE

- Surveilling People
- Surveilling Locations
- Human Led
- Remote Camera

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INJURY/MEDICAL CONDITION RED FLAGS

- Injuries / Limitations
Disproportionate To Incident
- No Improvement In Condition
- Medical Findings Do Not Support
Complaints
- Information Obtained Contradicts
What You Are Being Told

SURVEILLANCE PREPARATION

- Addresses
- Vehicles
- Basic Background / Social Media
- Subject Intel
- Date Specific Events
- Evaluation Of Surveillance Set Up

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WORK-AROUNDS FOR TOUGH SETUPS

Set Up Near Exits To An Area

Find And Stay On The Vehicle

Start At A Known Destination

Two-Person Surveillance Team

TIPS FOR BETTER RESULTS

1

Don't Scatter Days

2

Stay On It

3

Plan Around
Known
Events

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SURVEILLING LOCATIONS

- Homeowner's Insurance -
Property Rental Due To Loss
- Premium Fraud -
Misrepresenting Amount Of
Employees / Type Of Work
- Provider Fraud - Is The Service
Being Provided?

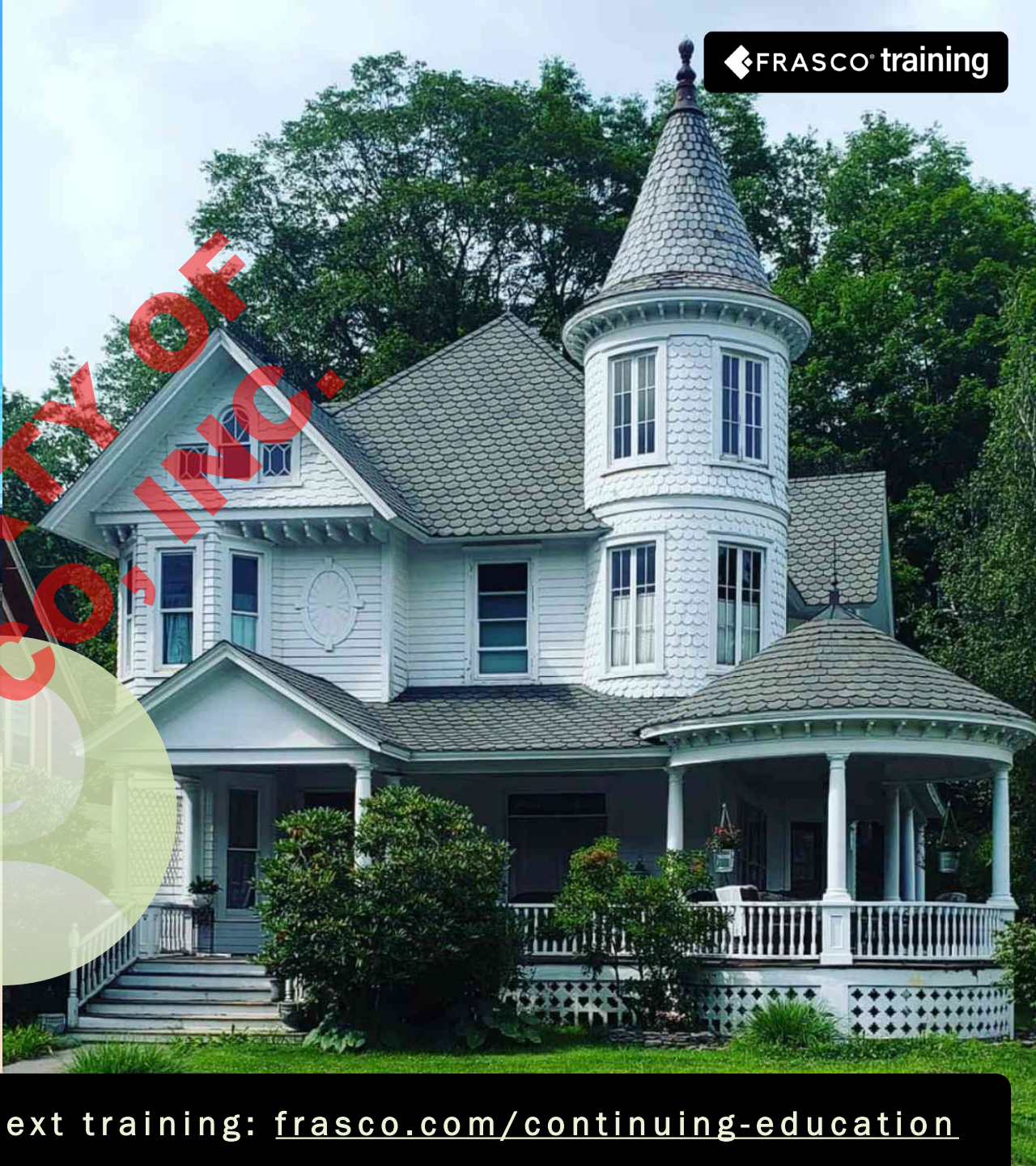
1. RENTAL AMOUNT: Commencing October 13, 2023 TENANT agrees to pay LANDLORD the sum of \$ 8500 per month in advance on the 13 day of each calendar month. Said rental payment shall be delivered by TENANT to LANDLORD or his designated agent to the following location _____.
Rent must be actually received by LANDLORD, or designated agent, in order to be considered in compliance with the terms of this agreement.

(Check If Applicable) ___ A prorated share of rent in the sum of \$ _____ is being paid to cover the period from _____ to _____.

2. TERM: The premises are leased on the following lease term: (please check one item only)
 month to month (OR) _____ until _____.

3. SECURITY DEPOSITS: TENANT shall deposit with landlord the sum of \$ 500/pet fee as a security deposit to secure TENANT'S faithful performance of the terms of this lease. The security deposit shall not exceed two times the monthly rent. After all the TENANTS have vacated, leaving the premises vacant, the LANDLORD may use the security deposit for the cleaning of the premises, any unusual wear and tear to the premises or common areas, and any rent or other amounts owed pursuant to the lease agreement or pursuant to Civil Code Section 1950.5. TENANT may not use said deposit for rent owed during the term of the lease. Within 21 days of the TENANT vacating the premises, LANDLORD shall furnish TENANT a written statement indicating any amounts deducted from the security deposit and returning the balance to the TENANT. If TENANT fails to furnish a forwarding address to LANDLORD, then LANDLORD shall send said statement and any security deposit refund to the leased premises.

4. INITIAL PAYMENT: TENANT shall pay the first month rent of \$ 8500 and the security deposit in the amount of \$ 500 for a total of \$ 9000. Said payment shall be made in the form of cash or cashier's check and is all due prior to occupancy.



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PREMIUM RED FLAGS

Insured Not Cooperating With Audit

Insured Not Allowing Access To Site Or Employees

Injury Mechanism Inconsistent With Policy Class Codes

Employer Fails To Report Injuries



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PROVIDER RED FLAGS

Discrepancies In Dates / Times Of Service

Unusually High Volume Of Treatment

Billing For More Hours Than Possible

Family Member Being Paid For Care



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REMOTE SURVEILLANCE

24/7 Video

Inactive Human Led Surveillance

Premium Issues

Provider Issues

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PRIVACY

- Reasonable expectation of privacy

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ADDITIONAL ETHICAL CONCERNS

Articulate Suspicion

"Rough Shadowing"

Selective Filming/Editing

Trespassing

Impersonating A Real Person / Company /
Government Agency

GPS Tracking

Wire Tapping

Entrapment

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COMPLIMENTARY INVESTIGATIONS

- Background Research
- Social Media Investigation
- Clinic Inspection
- Records
- Depositions/EUO's
- Interviews

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SURVEILLANCE SUBJECT QUESTIONS

- Describe how you are currently feeling and level of pain.
- What activities cause pain?
- Are there activities you can no longer do because of your condition?
- When was the last time you did those activities?
- Have you attempted to do those activities since your injury?
- If you were to try to do those activities now, what would happen?

MEDICAL PROVIDER QUESTIONS

Is it your opinion that the patient accurately represented or misrepresented their:

- Subjective Complaints
- Physical Capabilities And Activities Of Daily Living
- Physical Limitations

Would you have made different decisions on work status/work restrictions/disability status?

If so, please specifically address how and when your decisions would have been different.

Would you have made different decisions on medical treatment?