



2025 NHCAA AWARDS PROGRAM: INVESTIGATION OF THE YEAR NOMINATION FORM

NHCAA invites nominations for the **2025 Investigation of the Year Award**. This distinguished award acknowledges an outstanding and effective health care fraud investigation and its impact on fraud deterrence and prevention. In particular, NHCAA encourages recognition of investigative anti-fraud efforts that feature collaboration among government agencies and health insurers.

Nomination Eligibility:

- NHCAA Member Organizations, Affiliate Members, and Government Liaison agencies are eligible to submit nominations.
- Nominated investigations must be in the final adjudication/resolution stage (or have been adjudicated, resolved or closed) between August 1, 2024, and July 31, 2025.
 - *NOTE: Investigative activity may have commenced prior to August 1, 2024, but the case must be ongoing during the aforementioned timeframe.*
- Nominated investigations must include individuals employed by an NHCAA Member Organization, Affiliate Member, and/or Government Liaison agency.

Nominator's Contact Information

Name: _____ Title: _____

Agency/Company/Organization/Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Office Phone: _____ Mobile Phone: _____

Investigation Information

Title of Investigation (Legal or Court Case Name, Operation Name, etc.)

URL(s) to Official Court Case Document(s) and/or Press Release(s)

Investigation Timeframe

(briefly describe, i.e., when was the investigation launched?, is it ongoing?, when was it referred to law enforcement?).

Note: Nominated investigations must be in the final adjudication stage (or have been adjudicated) between August 1, 2024, and July 31, 2025.

Relevant action dates

☐ Indictment Date: _____ ☐ Conviction Date: _____

☐ Sentencing Date: _____ ☐ Settlement Date: _____

☐ Other Action Date (explain): _____

Please answer the following questions as completely as possible.
If more space is needed, please feel free to include additional attachments to your submission.
Please type all information to facilitate an accurate review by NHCAA's Awards Committee.

In 500 words or less, tell us why this investigation is worthy of acknowledgment.

Provide insight and details about the following aspects of the investigation.

A. Scheme Complexity

B. Financial Impact

C. Impact/Potential Impact to Patients' Health or Health Records

D. Describe any innovative approaches or investigative techniques used that significantly aided in the investigation and resolution of the case.

E. Please describe and characterize the collaboration among the organizations and agencies involved in this investigation, and whenever possible detail how each person being nominated for their role in this case helped to facilitate the success. You are encouraged to highlight specific interactions and partnerships that proved critical in this case.

Key Contributing Government Agencies, Companies, and Other Organizations

Please list the organizations and agencies that contributed to the successful resolution of this health care fraud case, along with the names of the individuals who played pivotal roles within those organizations. Recognition of private insurance plans, public health care programs, law enforcement, regulatory, and prosecutorial agencies involved in the success of this case, is strongly encouraged.

We would typically expect at least one individual to be represented by each organization or agency listed. While we are happy to know of all individuals who played a role in the investigation, NHCAA will typically try and limit awardee teams to no more than 20. If you require additional space to list all organizations and individuals, please provide them with a supporting document.

Agency/Company/Organization Name #1

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.					
#	Name	Title	Office/Division/Dept	Email	Phone
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Agency/Company/Organization Name #2

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.					
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Agency/Company/Organization Name #3

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

#	Name	Title	Office/Division/Dept	Email	Phone
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Agency/Company/Organization Name #4

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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Agency/Company/Organization Name #5

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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Agency/Company/Organization Name #6

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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Agency/Company/Organization Name #7

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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Agency/Company/Organization Name #8

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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Agency/Company/Organization Name #9

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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Agency/Company/Organization Name #10

Agency/Company/Organization responsible for the success or resolution of the investigation.

Individuals who were pivotal to this investigation.

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If your nomination includes more than 10 agencies, companies, or other organizations, please include an attachment with the additional entities and individuals who were pivotal to the investigation.

Submission Instructions

- Nominations must be received by **Friday, July 18, 2025**.
- Submit your completed nomination form and any additional attachments via email to awards@nhcaa.org.
- Please be sure to save a copy of the completed nomination form for your records.
- If you need additional assistance, please email awards@nhcaa.org.