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Program Compliance and Integrity

Annual Report to Congress
January - December 2006



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Issued August 2011

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Contents

PREFACE	iii
EXECUTIVE SUMMARY	1
OVERSIGHT	2
TECHNOLOGY	3
Data Mining and Warehousing	3
Remote Sensing and Imaging	7
COLLABORATION	8
High-Profile Collaborative Investigations	8
Working with FSA	10
Working with Approved Insurance Providers	12
RESULTS	14
APPENDIX	15

Preface

The United States Department of Agriculture's (USDA's) Risk Management Agency (RMA) administers the Federal crop insurance program, the primary source of risk protection for America's farmers and ranchers. In 2006, 242 million insurable acres of the Nation's farmland were protected by Federal crop insurance. The program provided \$49.91 billion of coverage to American farmers and ranchers. Insurance premiums for 2006 totaled \$4.58 billion. Indemnity payments of \$3.5 billion were paid to farmers and ranchers for damages to crops by natural causes or lost revenue from price fluctuations. To ensure that the cost to producers and taxpayers continues to be justified, it is essential that there be adequate safeguards in place to limit mistakes and control abuse.

The Agricultural Risk Protection Act of 2000 (ARPA) enhanced the incentives for producers to buy higher levels of coverage, creating a more effective safety net. ARPA also provided USDA with new requirements and new tools for monitoring and controlling program abuses. It required RMA and the USDA's Farm Service Agency (FSA) to strengthen local level oversight by working together and sharing production and yield data information through compatible databases. ARPA provided for the use of data mining as a technologically advanced tool for more efficiently targeting compliance reviews and investigations. It also increased sanctions that can be imposed for program fraud and abuse.

This sixth annual report, as required under the Federal Crop Insurance Act (7 U.S.C. §1515), documents USDA's progress toward implementing these new tools and their effectiveness. It provides information on how the program is monitored for compliance and describes the steps taken to improve the way detection and enforcement activities are conducted. The report also shows how data mining and other tools are being used to identify areas of potential abuses.

The continued effectiveness of compliance-related efforts saved the Government \$40.85 million in fraudulent or other incorrect payments that might not otherwise have been identified until after the fact. A strong contributing factor in success of the program is the collaboration and partnership among USDA agencies in compliance investigations. This includes the highly effective collaboration between FSA and RMA to refer cases of suspected abuse from FSA's field offices directly to RMA's field offices. USDA is fully committed to preserving the integrity of the Federal crop insurance program and expects to report continued progress toward this goal in the future.

Executive Summary

The United States Department of Agriculture's (USDA's) Risk Management Agency (RMA) is dedicated to safeguarding the integrity of America's agricultural community by implementing the best and most innovative methods to detect, deter, and prevent fraud, waste, and abuse within the Federal crop insurance program. Each year, RMA uses targeted methods to strengthen program integrity, make cutting-edge technological innovations, and improve collaborative work with its partners in the anti-fraud alliance: the Farm Service Agency (FSA) and Federal Crop Insurance Corporation (FCIC)-approved insurance providers. This annual report highlights the progress RMA made in these areas in 2006.

This sixth annual report has been issued, as required by Section 515(i) of the Federal Crop Insurance Act (the Act) (7 United States Code §1515) entitled "Program Compliance and Integrity." The Act, as amended by the Agricultural Risk Protection Act of 2000 (ARPA), requires RMA to report on compliance with the Act by describing the methods employed to minimize fraud, waste, and abuse within the Federal crop insurance program. This report highlights specific cases of fraud, waste, and abuse and the specific actions RMA took to address them. This report also covers RMA's key collaborative efforts, specified by

the Act, with FSA, FCIC-approved insurance providers, State insurance commissions, United States Department of Justice's Attorneys' Offices, the USDA Office of the Inspector General, and other agencies within USDA to combat fraud and strengthen program integrity. This report includes the most recent data available and covers January 1 - December 31, 2006.

In 2006 RMA achieved impressive results and savings in cost avoidance and recoveries. The results of these accomplishments have been significant, producing about \$40.85 million in cost avoidance in 2006, and \$15 million in findings and other recoveries.

A more detailed description of selected projects RMA focused on in 2006 is provided in this report.

Oversight

The Federal crop insurance program is a unique, public/private collaboration. It is a one-of-a-kind hybrid of Federal administration and private insurance company delivery of risk management products and services to American farmers and ranchers. In 2006, there were 17 Federal Crop Insurance Corporation (FCIC)-approved insurance providers delivering crop insurance across America. These approved insurance providers share the risk with the Federal Government and compete with each other for business. They operate within the rules and conditions in the Standard Reinsurance Agreement (SRA) that each company signs with FCIC. FCIC is a Government corporation managed by the Risk Management Agency (RMA).

OPERATIONS REVIEWS OF APPROVED INSURANCE PROVIDERS

Operations reviews are used to assess approved insurance providers' compliance with the terms and conditions of the SRA and FCIC-approved policies and procedures in the delivery of the Federal crop insurance program. In 2006, RMA completed its second of a 3-year, cyclical, program-payment, error rate protocol in conjunction with approved insurance provider operations reviews. This effort makes the best and most efficient use of limited compliance resources. Using this protocol, RMA reviews operations of one-third of the approved insurance providers each year. RMA reviews the approved insurance providers' books of business by randomly selecting 750 policies (50 from each approved insurance provider) every 3 years. RMA's data mining contractor, the Center for Agribusiness Excellence (CAE) at Tarleton State University, Stephenville, Texas, selects the policy samples. CAE has stored all of RMA's crop

insurance data since 1996. This protocol provides a larger sample and therefore a more accurate error rate estimate than any past, random, statistical sample review of approved insurance providers' operations by RMA or any of the Agency's oversight groups in a 3-year period.

Once an entire 3-year cycle of reviews is completed, RMA begins replacing previous error rate data with new data as each approved insurance provider's subsequent review is completed. This protocol provides RMA a rolling error rate with one-third of the error rate findings replaced annually. RMA completed the first 3-year cycle with the reviews conducted in 2007.

Each Operations Review is conducted in two phases – an assessment of the approved insurance provider's established operational systems designed to administer the crop insurance program and an evaluation of the approved insurance provider's delivery of the program through a review of selected policies.

In 2006, RMA conducted reviews of four insurance providers. The program payment error rate on these four insurance providers averaged 3 percent. The report issued to the insurance provider as a result of the Operations Review identifies the errors and the corrections that were required.

Technology

RMA continues to be at the forefront in using state-of-the-art technology to maximize effective and efficient use of precious resources to accomplish its compliance mission. RMA strives to improve the methods it employs continually to adapt these technologies to the Agency's unique mission.

DATA MINING AND WAREHOUSING

RMA highlighted its data warehousing and data mining projects in earlier reports. RMA worked with CAE to incorporate the latest advances in database technology to create a single, centralized "data warehouse" of all crop insurance-related data collected in RMA databases. Investigators and other RMA staff then use this centralized data warehouse to search, or "mine," all existing data records to compare policies and/or detect individual producers whose policies demonstrate atypical patterns, which in some cases may indicate potential fraudulent activity. Data mining is also used to analyze and uncover larger national patterns that may indicate schemes for fraud, waste, and abuse. The results of such data mining techniques allow RMA to quickly focus its efforts on the most problematic areas in the crop insurance program so they can be investigated and corrected. Prior to the development of these tools, it was extremely difficult, and sometimes even impossible, for RMA to conduct this sort of historical research and data analysis, since the various types of data records were stored in different databases that used conflicting data models.

CAE maintains the data warehouse and conducts data mining analysis for RMA. The data warehouse contains more than a billion records, including:

RMA's reinsurance year policyholder data since 1990;

30 years of weather data;
Annual USDA National Agricultural Statistics Service (NASS) data since 1950;

RMA's actuarial data; and

RMA's reinsurance accounting system data.

The data warehouse is updated monthly. RMA is currently mining the warehouse, and the findings from such activities continue to save RMA and American taxpayers millions of dollars each year by preventing cases of fraud, waste, and abuse before they occur. In 2006 alone, the CAE spot check list, created from data mining, saved the insurance program \$35 million in potential costs. RMA expects such savings to continue and perhaps increase as the Agency continues the program.

DATA MINING AND THE SPOT CHECK LIST

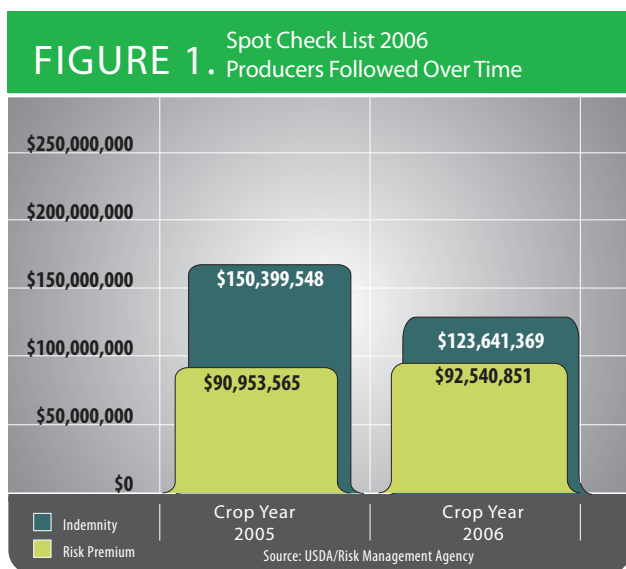
The RMA spot check list has proven to be the data mining method that is the most effective and proactive deterrent to fraudulent activity. Each year, RMA develops a list of agricultural producers whose operations warrant an on-site inspection during the growing season. After RMA's Compliance field offices review the list, it is sent to FSA staff to conduct growing season inspections.

CAE produced the 2006 spot check list by mining data collected in 2005. The evaluation produced a list of 1,818 producers whose patterns appeared to be atypical compared

to others in their region. RMA's Compliance field offices then reviewed the list of names and removed some producers from the list. The field offices then added some producers based on their observations (This list is referred to as the Regional Compliance Office Spot Check list.). The combined list was shared with each producer's local FSA office and approved insurance provider. FSA conducted growing season inspections and sent letters to the producers identified in the spot check process, informing them they were on the list and identified for a growing season inspection.

Statistics show a substantial reduction in indemnities paid to producers that were on the 2006 spot check list. In 2005, all the producers who eventually would be named on the 2006 spot check list claimed \$150 million in indemnity payments. However, in 2006, after they had been informed that they were on the spot check list, these producers only claimed indemnities of \$124 million.

Figure 1. Spot Check List (Producers Followed Over Time) for 2006 (Produced from 2005 Data)



The data table for Figure 1 is located on page 16 of this report

Reduction of Crop Year 2006 Indemnity from \$150 Million to \$124 Million

This pattern had been consistent since the spot check list was first used in 2001 (Figure 1). In 2001, the first year the spot check list was used, indemnity claims for farmers on the list dropped from \$145 million to \$97 million. In 2002, spot check list producers' total indemnities dropped from \$234 million to just over \$122 million. In 2003, indemnities dropped from \$187 million to 106 million. In 2004, indemnities dropped from \$222 million to \$151 million. In 2005, indemnities dropped from \$217 million to \$77 million in 2005. In 2006, indemnities declined from \$150 million to \$124 million. These 6-year results (\$479 million in reduced indemnities), show that producers who knew they were on the list chose to file fewer claims for less indemnity.

When these yearly indemnity reductions are compared with the amount of insurance premium the producers are buying each year, it becomes clear that the amount of insurance this group of producers is purchasing has remained fairly constant, but producers' claimed indemnities have decreased to levels much closer to their premiums, indicating the spot check list is helping to create an improved premium/indemnity balance.

The spot check results shown in figures 1 and 2 demonstrate how financially beneficial the data mining and warehousing program is to RMA in the prevention of erroneous indemnity payments. Further, the program has proven to be cost-effective. The data mining project budget was planned for 5 years with a total expected cost of approximately \$18 million. In only the first 6 years of the project, the spot check list alone has saved the crop insurance program more than \$479 million in potential costs through lower claims and indemnity pay-

ments.

In addition to the spot check list, CAE has implemented and continues to offer several dozen other data mining products that generate savings, including:

A “scoring system” so Compliance field offices can prioritize entities for investigation;

Identification of individual loss adjusters who work all or almost all of a particular agent’s claims, and comparison of these loss adjusters’ claims and actions against those of their peers;

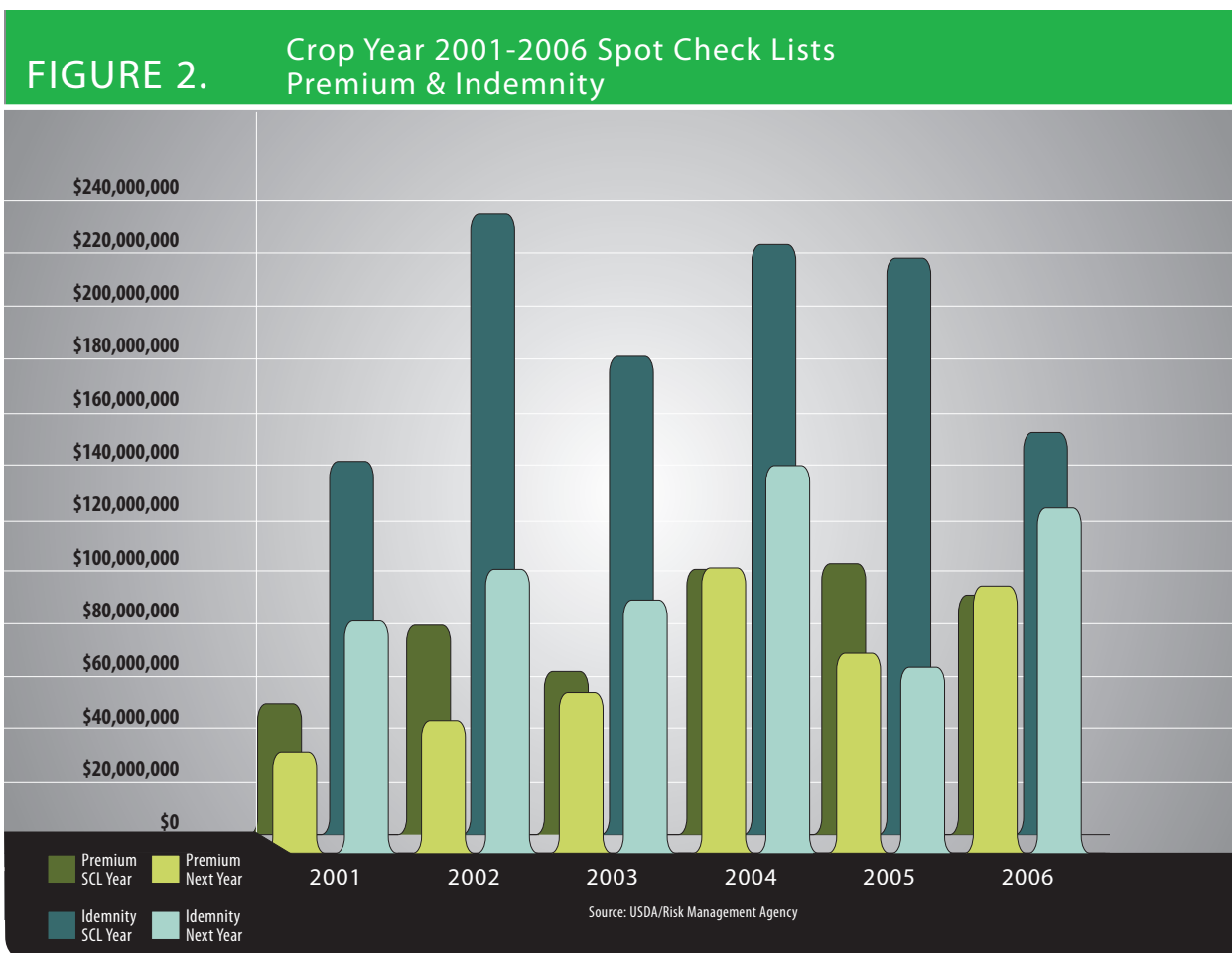
Identification of approved insurance providers with overpaid claims and an

overall account of indemnities that are overpaid each year;

Discovery of “lost producers”—those who were previously on the spot check list, but have started insuring under some other Social Security number or tax identification number;

Development of a simple, user-friendly interface that allows executive-level users to access and identify necessary information easily; and

Development of actuarial tools to help evaluate final planting dates.



The data table for Figure 2 is located on page 16 of this report

The results during the first 5 years of this project encouraged RMA and CAE to develop more investigative data mining scenarios, including:

Developing actuarial tools to help evaluate map rates and map areas;

Providing Geographic Information System (GIS) and weather information as an investigative tool for analyzing indemnity claims;

Integrating GIS and weather information into data mining scenarios to better reflect actual growing conditions producers encounter;

Developing simulation technology to help evaluate pilot programs; and

Developing an interface to provide RMA personnel with the ability to query the data warehouse and create custom reports for analysis.

These developments are only a few examples of the research and development RMA has planned. Working with CAE, Compliance will continue to develop more products that help expose patterns of fraud, waste, and abuse. RMA is confident that the cost savings will continue through the use of the data warehouse and data mining programs.

Disparate Performance Agents and Loss Adjusters

Fraud, waste, and abuse in the crop insurance program are important problems recognized by RMA and its approved insurance providers. The Agricultural Risk Protection Act of 2000 (ARPA) mandates that USDA develops and provides tools, information, and analysis of “loss claims of insurance agents and loss adjusters to identify those agents and loss adjusters who have loss claims that are in excess of 150 percent (or an appropriate percentage specified by RMA) of the mean for all loss claims associated with other agents and loss adjusters operating and adjusting in the same area.”

Using data mining technology, RMA analyzes statistical information on insurance agents whose policies have paid out loss claims that were 150 percent or more above the average for other agents in their local area—a disparity that can indicate fraudulent activity. Similarly, the data mining process identifies loss adjusters who consistently reported significantly lower production yields (both harvested and unharvested) than their peers, which resulted in indemnity payments that were 150 percent or greater than the average for that area—another condition that may indicate suspicious activity.

Beginning in 2001 CAE produced an annual report of agents and loss adjusters whose records reflected disparate behavior. This list identified the top 5 percent of agents who had the greatest disparities in loss claims relative to their local agricultural production area. It also identified the most egregious cases of loss adjusters who consistently reported lower production yield figures than their peers. CAE adjusts and refines its methodology for developing this list using experience and knowledge gained in producing previous years’ lists.

ARPA also mandates that RMA develop procedures to require an annual review of the performance of each agent and loss adjuster. The program's approved insurance providers will conduct these annual reviews.

RMA included a requirement in the 2005 SRA, Appendix IV, Section II. A. (1) that states: "the Approved Insurance Providers are responsible for identifying and documenting the training needs of the employees, agents, agency employees, loss adjusters and contractors that act on behalf of the Company with respect to the applicable procedures and requirements associated with selling and servicing eligible crop insurance contracts." RMA expects the approved insurance providers to perform an evaluation of the performance of agents and loss adjusters in order to determine such training needs.

Non-Spot Check Compliance Office Data Mining

RMA's regional compliance offices use data mining to conduct specific types of reviews where the technology can reveal possible errors within a program. For example, one regional compliance office might discover, through data mining, a crop is over-insured by multiple approved insurance providers. Data mining can identify policies that do not adhere to rules limiting the highest levels of insurance. Regional compliance office, data mining based reviews accounted for savings of \$5.7 million in potential costs avoided in 2006.

REMOTE SENSING AND IMAGING

RMA uses remote sensing data and related technologies to support its program compliance efforts and to aid RMA personnel and outside customers working on the Agency's mission-critical projects.

Based upon the success of using remote sensing in investigating and combating waste, fraud, and abuse, RMA provided remote sensing training to a number of its compliance investigators. Investigators are trained to acquire Landsat 5 and Landsat 7 imagery from the USDA Image Archive, managed by FSA, and then to make preliminary determinations from the imagery to verify a crop insurance claim or forward it on to a remote sensing expert for further investigation. Such training has increased the number of image requests RMA has made to the USDA Image Archive.

Collaboration

The mission to detect, eliminate, and proactively prevent fraud, waste, and abuse could not be accomplished without many parties working together. To meet goals and uphold the integrity of the crop insurance program, RMA relies not only on the cooperative and dedicated work of its own employees, but also on its strong anti-fraud alliance partnerships with FSA and the approved insurance providers. RMA also works with other partners, including the USDA Office of Inspector General (OIG). RMA is dedicated to developing and refining its collaborative efforts with these partner agencies because the Agency understands that only through strong partnerships can America's farmers and ranchers be protected from those who would take advantage of the crop insurance program. Each year RMA improves its collaborations with its partners. The year 2006 continued to build on past successes. This section of the report will show how these collaborative efforts have resulted in bringing some high-profile cases of fraud and potential fraud to justice. It also presents RMA's many other ongoing collaborative partnerships and show some specific examples of how these collaborations work.

HIGH-PROFILE COLLABORATIVE INVESTIGATIONS

Special Investigations Branch

The Special Investigations Branch (SIB) is a specialized unit within RMA's Compliance Office. SIB investigates significant, high-profile cases of alleged fraud, waste, and abuse and collaborates on investigations with OIG, RMA's regional compliance offices, and FSA.

Once a suspected case of fraud is substantiated, SIB investigators refer the case to OIG, which is responsible for investigating the case further and referring suggested cases for prosecution to the U.S. Attorney's office. SIB investigators provide direct assistance to OIG during criminal investigations, including: executing search warrants, conducting interviews, and providing courtroom testimony.

On occasion, SIB also makes referrals to State or local prosecutors regarding insurance fraud. Investigators can also refer cases for Federal civil action to the U.S. Attorney's office through OIG or the USDA's Office of the General Counsel (OGC). SIB may also refer cases to the RMA Administrator for disqualification of producers, insurance agents, loss adjusters, insurance companies, and others who violate program rules.

COLLABORATION IN ACTION HIGHLIGHTED 2006 CASES

Collaboration in Action: Affirmative Civil Enforcement (ACE) prosecution results in \$900,000 paid to the U.S. Treasury from a Civil Settlement in Crowell, Texas – This case, involving William and Bobby Moore, is related to a case last reported in the 2004 Annual Report to Congress involving a Texas farmer and crop insurance agent, Wendell Mints. Mints was convicted of operating an elaborate scheme in which he conspired to falsify crop insurance loss documents and collected insurance money for thousands of acres of cotton, wheat, and sorghum that he did not plant.

The case became known because of astute FSA county employees who detected inconsistent statements Mints made in documents submitted to their office. They physically inspected the fields and found no evidence that Mints had planted his crops as he had claimed. This initiated a criminal investigation where RMA's SIB personnel played a central role.

An expert in satellite imagery testified that infrared satellite photographs taken of Wilbarger County where Mints farmed, indicated that the condition of the fields and crops growing on them were inconsistent with Mints' claims. When Mints was asked to provide receipts showing he had purchased seed to plant the crops, it was proven he went to a seed dealer and had that seed dealer prepare false receipts to reflect bogus sales.

In 2006, William and Bobby Moore, the general partners/joint venturers of one of Mints' larger clients, Moore Farms, paid \$900,000 to settle a civil lawsuit the U.S. Government filed in August 2004 alleging that the two men filed false insurance claims for the 1998 crop year.

This settlement is the result of joint civil and criminal investigations by the U.S. Attorney's Office, OIG, RMA, and FSA in Vernon, Texas. The case was investigated and litigated by the Affirmative Civil Enforcement ("ACE") Unit of the U.S. Attorney's Office. ACE prosecutes civil actions to recover damages for fraud and other offenses and imposes civil penalties for violations.

Collaboration in Action: OIG and RMA Joint Investigation Results: \$2.128 Million in Damages for False Potato Claims in Michigan – A partnership in Bay County Michigan was found liable for \$2.128 million in damages for false crop insurance claims resulting from false claims of loss and false certifications of potato production for multiple years. A judge for the Eastern District of Michigan found that Richard Bli, on behalf of the partnership Bli Farms, violated the False Claims Act by knowingly submitting false claims for crop insurance indemnities on Bli Farms' 1992, 1994, and 1995 potato crops. The court found that these claims were false because Bli Farms had substantial unreported sold potato production for these crop years. Had all the Bli Farms' sold potato production been reported it would have received little or no indemnity for losses on its insured potato crop.

The court determined that Bli Farms received \$704,640 in crop insurance indemnities to which it was not entitled due to actual sold potato production. Under the False Claims Act, these fines can be trebled to \$2,113,920. The Court determined that the defendants are liable for penalties totaling \$15,000. In addition to the monetary judgement, Bli Farms and Richard Bli face exclusion from Federal programs.

Collaboration in Action: North Carolina Crop Insurance Claims Adjuster is Sentenced in Connection with Federal Crop Insurance Fraud Schemes in North and South Carolina— This investigation was conducted jointly with SIB, the Internal Revenue Service, and USDA's OIG. The Federal investigation was assisted by the North Carolina

State Bureau of Investigation and the Henderson County, Tennessee Sheriff's Office for the North Carolina case. The South Carolina Federal investigation was assisted by the FBI and the South Carolina State Law Enforcement Division.

In 2006, an insurance company claims adjuster, Frank Calcutt, was sentenced following his guilty pleas to conspiring to defraud the Federal crop insurance program in North and South Carolina. In the North Carolina case, Calcutt pled guilty to charges concerning claims filed by Robert and Viki Warren, tomato farmers from Candler, North Carolina. Calcutt was an adjuster who approved a claim for \$98,490 filed by the Warrens for losses on a Tennessee farm from a "hail storm" that had actually been caused by Warren employees throwing ice cubes and beating the plants with sticks.

In the separate South Carolina case (transferred to North Carolina) Calcutt pled guilty to charges of making false statements concerning false claims in South Carolina. Following his guilty plea, Calcutt cooperated in the investigation. As a result, the Government filed a motion asking for a reduced sentence to reflect his assistance. Calcutt was sentenced to 4 months' imprisonment, 6 months of home detention, 2 years of supervised release, and \$312,251 in restitution to USDA.

WORKING WITH FSA

FSA is one of RMA's strongest allies in the fight against fraud, waste, and abuse. FSA personnel serve as the eyes and ears in the field and provide investigators with invaluable, on-the-ground analysis and feedback about the farming operations in their areas. RMA works to provide them with the help and information they need to monitor agricultural producers as effectively as possible. RMA does this through:

Spot check referrals;

4-RM referrals; and

Consultation with FSA State committees.

Each of these areas will be presented below.

SPOT CHECK REFERRALS

Each year RMA uses data mining technology, analysis, and past loss experience to develop a list of producers with notable policy irregularities such as unusually high loss ratios, high frequency of losses, and severe losses (for a detailed description, see pages 3-6 on data mining technology). RMA provides this list every April to the appropriate FSA County Offices, whose staffs help review these cases for potential fraud, waste, and abuse by performing inspections, or "spot checks," of the farming operations on the list. The FSA County Offices then refer their findings to RMA. Then RMA forwards these results to the appropriate approved

insurance providers for those operations. At the same time, FSA sends notification by letter to all producers who are on the list.

4-RM REFERRALS

Another collaborative effort between RMA and FSA is the 4-RM referral process. 4-RM referrals originate from the observations of FSA County Office personnel in the field, which are sent to the RMA Compliance field offices for follow-up. To help conduct this referral process as easily and smoothly as possible, RMA and FSA developed a procedural guide for staff to follow: the 4-RM Handbook, FCIC Program Integrity.

RMA CONSULTATION WITH FSA STATE COMMITTEES

RMA and FSA State Committees continued to work together in 2005 to improve program compliance and integrity. In 2005, RMA regional offices referred 128 issues to FSA State Committees for review and consultation. The FSA State Committee referred two issues to the RMA regional offices for their consideration.

RMA's regional offices continued to provide annual information updates to the FSA State Committees about crop insurance issues, provided FSA offices with program fact sheets, and conducted review meetings on the consultation process.

DATA RECONCILIATION

ARPA requires that RMA and FSA develop and implement a coordinated plan for the two agencies to reconcile all relevant information received from producers who have crop insurance. RMA and FSA initiated reconciliation efforts on the 2001 crop year data. However, these efforts were effectively negated by the hundreds of thousands of disparate records identified between the two agencies and lack of available resources necessary to reconcile and resolve each one. Differences in definitions of basic terms, such as "producer" vs. "insured" and "farm" vs. "unit" hampered the data reconciliation effort as well as data sharing.

Since enactment of ARPA, Section 10706 of the Farm Security and Rural Investment Act of 2002 directed the Secretary of Agriculture to develop a Comprehensive Information Management System (CIMS) for implementing programs administered by RMA and FSA. Under Section 10706, all current RMA and FSA information is to be combined, reconciled, redefined, and reformatted in such a manner that the agencies can use the information management system. Under the direction of the Office of the Under Secretary for Farm and Foreign Agricultural Services, the Administrators for RMA and FSA established a working group to develop and implement the CIMS Project. RMA plans to meet its data reconciliation requirements specified in Section 515(c) of the Act, and address the Section 10706 requirements through implementation of the CIMS. RMA expects implementation of and benefits from CIMS to occur in phases over the next several years. CIMS should be completed and in full operation by 2012.

RMA and FSA announced CIMS in May 2005. The CIMS project will improve the efficiencies of data exchange and reconciliation of common and unique producer information between RMA, FSA, and insurance providers. In the future CIMS will reduce the amount of duplicate acreage information that is now required to be reported to both programs, reduce misreporting and program abuse, and satisfy the ARPA requirement for reconciliation of producer-reported information to FSA and RMA.

The scope of the project includes four components of core information:

Producers (entities) and shares;
Farm, field, and unit identifiers;
Crops and acreage; and
Production information required by both agencies.

It is recognized that some differences exist between FSA and RMA programs. To the extent that such program rules differ, allowances will be maintained to account for the differences. In areas where the rules are similar, efficiencies should be possible. CIMS will interface with approved RMA, FSA, USDA, and insurance provider applications collecting and reporting common information. CIMS will allow RMA, FSA, other USDA branches, and insurance providers to use the shared, common information reported by producers.

The CIMS project complied with President George W. Bush's E-Government initiative, the Office of Management and Budget's requirements, and USDA's Office of the Chief Information Officer's requirements.

WORKING WITH THE APPROVED INSURANCE PROVIDERS

Approved insurance providers, agents, loss adjusters, and other insurance personnel who provide and oversee the policies are valuable allies in the first line of defense against fraud, waste, and abuse. Approved insurance providers are directly involved with the policies and producers at the local level, and therefore can give RMA and FSA valuable information about suspicious claims activities. They can also assist by reviewing and investigating claims and managing the claims adjustment process. Referrals from approved insurance providers help maintain a proactive approach to combating potential fraud, since the majority of these kinds of referrals are investigated before the approved insurance providers pay claims to producers. RMA will continue to work closely with the program's approved insurance providers to detect, prevent, and correct fraudulent activity.

SANCTIONS

RMA has the authority to impose administrative sanctions on producers who abuse the Federal crop insurance program. RMA is able to disqualify and impose civil fines on producers, agents, loss adjusters, and insurance companies involved in fraudulent activities. RMA can impose a civil fine for each violation up to the total dollar amount the individual received because of false or inaccurate information provided, or \$10,000, whichever is greater. RMA also has the authority to disqualify these individuals from both the Federal crop insurance program and most other farm programs.

Referrals for sanctions are processed by RMA's Sanctions Office and the Appeals, Litigation, and Liaison staff (A&L). The Sanctions Office and A&L's responsibilities include:

Reviewing all incoming sanction recommendations for adequate evidence and completeness;

Preparing complaints;

Working with OGC to secure legal sufficiency;

Briefing the RMA Administrator on all cases and securing required signatures;
Filing documents with USDA's Administrative Law Judge;

Participating in all aspects of the appeals process when invoked, including providing litigation support and attending hearings;

Ensuring all interested parties are notified when sanctions are imposed;

Working with OGC to develop evidence and documentation standards for sanctionable activities; and

Working with RMA's regional compliance offices to ensure that their sanctions referrals meet these newly developed standards.

A&L also processes referrals and appeals for suspension and debarment under 7 Code of Federal Regulations, Section 3017, and performs similar functions to those listed above for that process.

In 2006, both offices continued their lead role in processing disqualification actions against those involved in fraudulent crop insurance activities. In 2006, 41 sanctions were imposed. These sanctions included 20 disqualifications from the program, 9 debarments, 2 suspensions, and 10 civil fines. Sanctions cases pending legal action will be included in future reports. Sanctions involve a process that can span more than one reporting period.

Results

In 2006, the RMA Compliance Office continued to work towards an ever-increasing level of productivity, innovation, and collaboration in its efforts to fight fraud, waste, and abuse in the FCIC program. This work has produced a number of successful results. Among other achievements described in this report, RMA Compliance:

Conducted 19,307 policy reviews.

Uncovered more than \$35 million in incorrect indemnity payments.

Recovered approximately \$15 million using administrative findings.

Saved more than \$40 million in potential costs; \$35 million from the spot check list and \$5 million from non-spot check list data mining.

Employed innovative technologies to fight fraud, waste, and abuse (pages 3 - 7).

Investigated and uncovered high-dollar fraud cases and assisted in bringing them to justice (pages 8 - 10).

Increased collaborative efforts with FSA, approved insurance providers, OIG, and other partners (pages 10 - 13).

These are only some of the highlights of RMA's accomplishments in 2006. This work has added to the efforts that have been made since 2002 to fulfill RMA's ongoing mission to protect the integrity of the FCIC program for America's farmers and ranchers. Since RMA first issued this report in 2001, the Agency has seen increasingly substantial results, including a total of almost \$232 million in findings and recoveries, and savings of \$593 million in potential costs.

RMA continues its efforts to support the country's farmers and ranchers in the important work they do by striving to boost productivity, increase innovation, strengthen collaborations, and eliminate fraud, waste, and abuse.

Appendix

COMPLIANCE FINDINGS and RECOVERIES

as of 6/13/2008

	2002	2003	2004	2005	2006	TOTAL
Recovered Final Findings	\$9,849,194	\$17,042,246	\$9,266,473	\$9,092,424	\$9,774,408	\$55,024,745
Findings Subtotal	\$9,849,194	\$17,042,246	\$9,266,473	\$9,092,424	\$9,774,408	\$55,024,745
\$ Closed Criminal Cases	\$6,359,526	\$7,427,645	\$3,183,724	\$32,741,610	\$442,036	\$50,154,541
\$ Closed Civil Cases	\$1,093,070	\$14,500	\$152,500	\$0	\$1,431,730	\$2,691,800
400.169 \$ Amount Adjusted*	\$1,047,642	\$1,690,587	\$3,930,029	\$4,092,260	\$357,908	\$11,118,426
\$ BCA Settlement	\$976,356	\$925,720	\$224,401	\$6,157,561	\$2,986,173	\$11,270,211
\$ Sanctions Penalty	\$0	\$4,500	\$30,000	\$16,500	\$26,000	\$77,000
Other Recoveries Subtotal	\$9,476,594	\$10,062,952	\$7,520,654	\$43,007,931	\$5,243,847	\$75,311,978
Findings and Recoveries Total	\$19,325,788	\$27,105,198	\$16,787,127	\$52,100,355	\$15,018,255	\$130,336,723

COMPLIANCE COST AVOIDANCE

CAE Spotcheck List Cost Avoidance	\$111,353,382	\$81,674,280	\$71,353,529	\$138,301,382	\$35,118,527	\$437,801,100
Other Datamining Cost Avoidance	\$14,626,197	\$11,149,236	\$7,337,085	\$22,647,285	\$5,729,513	\$61,489,316
Cost Avoidance Total	\$125,979,579	\$92,823,516	\$78,690,614	\$160,948,667	\$40,848,040	\$499,290,416

2001-2003 data from RCO Annual Report spreadsheets

2004-2006 findings, criminal, civil data, Other Data Cost Avoidance from Magnum Quick Report 6/13/2008

Sanctions data from C. Simpson

2004-2006 400.169 data from DCO chron + s drive files

2004-2006 BCA Settlement data from appeal officer case + DAC records

CAE Spotcheck list Cost Avoidance data from S. Hughes SDAAS

*amount includes indemnity repaid to FCIC only

**Figure 1 Data Table
Spot Check List 2006
Producers Followed Over Time**

	Crop Year 2005	Crop Year 2006
Risk Premium	\$90,953,565	\$92,540,851
Indemnity	\$150,399,548	\$123,641,369

**Figure 2 Data Table
Crop Year 2001 - 2006 Spot Check Lists
Premium and Indemnity**

	2006		2005		2004	
	indemnity	premium	indemnity	premium	indemnity	premium
scl yr	150,399,548	90,953,565	217,312,561	107,401,735	222,634,355	107,163,375
next yr	123,641,369	92,540,851	77,771,616	87,078,947	151,670,041	114,737,624

	2003		2002		2001	
	indemnity	premium	indemnity	premium	indemnity	premium
scl yr	187,846,677	67,048,167	234,265,740	80,249,411	145,440,842	54,746,124
next yr	106,172,397	69,556,318	122,912,358	62,405,417	97,196,674	51,299,181