DEPARTMENT OF JUSTICE DIVISION OF MEDI-CAL FRAUD AND ELDER ABUSE INVESTIGATIONS SECTION DUTY STATEMENT

NAME:

CLASSIFICATION: Special Agent-In-Charge

STATEMENT OF DUTIES: The mission of the Division of Medi-Cal Fraud and Elder Abuse (DMFEA) as the State's Medicaid Fraud Control Unit ("Unit") is to investigate and prosecute, both criminally and civilly, (a) health care providers who defraud the Medi-Cal program and (b) those who abuse or neglect elders and dependent adults in care facilities.

Consistent with and in the advancement of DMFEA's mission, the Special Agent-In-Charge assists in the management of staff and work that relates to DMFEA's law enforcement practices, outreach, legislative and regulatory initiatives, and criminal investigations within or arising from the designated region. The Special Agent In-Charge works under the general direction of the DMFEA Assistant Chief (AC) and the specific direction of the DMFEA Assistant Bureau Chief (ABC), in consultation as needed with the other DMFEA sections (Administration Branch, Civil Section, and Criminal Prosecutions Section). In accordance with Penal Code Section 13651, duties shall be conducted with an emphasis on community interaction and collaborative problem-solving.

SUPERVISION RECEIVED: Under the general direction of the DMFEA Assistant Chief. Receives direction and supervision from the DMFEA Assistant Bureau Chief (sworn).

SUPERVISION EXERCISED: Supervises Special Agent Supervisors, Special Agents, and related support staff.

TYPICAL PHYSICAL DEMANDS: The physical demands as set forth in the "Essential Duties of Peace Officer Classifications" are incorporated herein. See attachment.

TYPICAL WORKING CONDITIONS: Travel may be required locally and within the state for investigations, meetings, and training. The working conditions as set forth in the "Essential Duties of Peace Officer Classifications" are incorporated herein. See attachment.

ESSENTIAL FUNCTIONS:

- 50% Supervises Special Agent Supervisors; manages sworn staff and non-sworn support personnel assigned to the designated region, and manages teams handling DMFEA case investigations in those regions. Conducts ongoing review of case assignments; provides advice and direction on all case investigations in applicable regions; updates the DMFEA AC and ABC, as requested on important case updates and events; assists in determining investigative priorities and allocation of resources and provides input/feedback to the AC and Chief Assistant Attorney General (CAAG) and all DMFEA section chiefs on matters affecting budgetary needs/fiscal management, training, personnel, procurements, facilities, safety and other operational matters.
- 25% Prepares reports for the DMFEA CAAG and AC, to include reports of statistics, case progress, correspondence; provides information/feedback for developing written operating policies and procedures; recommendations for legislative and regulatory efforts, as well as DMFEA management improvements; is responsible for the implementation and enforcement of policy and procedure standards.

- 20% Develops, maintains, advances, and improves continuing and cooperative working relationships with all internal teams of interdisciplinary staff (attorneys, auditors, specialists) as well as with external partners (federal, state and local law enforcement and allied agencies within DMFEA's mission and areas of responsibility), including as these internal and external relationships relate to the single state Medicaid agency (the California Department of Health Care Services), and the Unit's federal oversight agency, the Department of Heath and Human Services, Office of Inspector General, the California Department of Public Health, and all other partners falling within the scope of DMFEA's outreach consistent with the Unit's mission. Serves in capacities of ABC or Acting Special Agent In-Charge for other regions as needed.
- 5% Evaluates the performance of assigned staff and takes appropriate action. Conducts investigations of employee misconduct.

I have read and understand the essential functions and typical physical demands required of this job (please check one of the boxes below regarding a Reasonable Accommodation):

 \Box I am able to complete the essential functions and typical physical demands of the job without a need for a reasonable accommodation.

 \Box I am able to complete the essential functions and typical physical demands of the job, but will require a reasonable accommodation. I will discuss my reasonable accommodation request with my supervisor.

 \Box I am unable to perform one or more of the essential functions and typical physical demands of the job, even with a reasonable accommodation.

 \Box I am not sure that I will be able to perform one or more of the essential functions and typical physical demands of the job, and will discuss the functional limitations I have with my supervisor.

Employee's Signature

Date

Supervisor's Signature

Date