



## Fraud, Waste and Abuse Charge Statement (FWA)

This form is supplied by the Board of Certification/Accreditation (BOC) to individuals, groups or organizations (complainants) who want to submit a fraud, waste and abuse charge statement against a BOC accredited facility or a facility in the process of accreditation. To initiate the complaint process, each complainant must complete this form, detailing description of the factual allegations supporting the charges, and send this information to:

Board of Certification/Accreditation  
10461 Mill Run Circle, Suite 1250  
Owings, Mills, MD 21117  
Attn: Credentialing Director  
Direct Fax: 410.753.8724

The BOC strongly recommends that all complainants review the [BOC Accreditation Standards](#) before and during the preparation of Fraud, Waste and Abuse Charge Statement in order to understand the organization's standards.

**Please note:** A facility who is the subject of an FWA charge or investigation will be, and is identified as, the respondent. The person(s) initiating an FWA complaint against a facility will be, and is identified as, the complainant(s).

**(Please Print in Ink or Type the Following Information)**

Complainant's Name (your name): \_\_\_\_\_

Complainant's Address: \_\_\_\_\_

\_\_\_\_\_

Complainant's Email: \_\_\_\_\_

Complainant's Phone #: (Work) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Respondent Name: \_\_\_\_\_

Respondent Address: \_\_\_\_\_

\_\_\_\_\_

Patient Name: \_\_\_\_\_  
(if known)

### **INFORMATION TO BE SUPPLIED BY THE COMPLAINANT**

1. Statement of Complaint: The following is a summary and statement of the facts, which the complainant believes support the issuance of a formal complaint by the BOC. This factual statement must include a clear explanation of the alleged fraud, waste or abuse. The statement need not include all of the evidence the complainant is prepared to present; however, the complainant must explain the facts in sufficient detail to permit the respondent facility to answer the allegations. If the space below is not sufficient, additional pages may be used and attached.
  
2. Related Actions: The complainant should list any actions taken or contemplated that are directed at the same or related complaints. For example, the complainant should identify any complaints filed with state licensure or regulatory boards, courts or judicial forums, employers, etc.
  
3. Applicable Provisions of the [BOC Accreditation Standards](#): The complainant should list all provisions of the BOC Accreditation Standards that are relevant to this case that the complainant believes should be considered with respect to the case. Please review and refer to the current BOC Accreditation Standards on the BOC website.

4. List of Witnesses and Documents to be Submitted and Considered:

**STATEMENT AND CERTIFICATION OF CHARGES**

By submitting this Fraud, Waste and Abuse Charge statement, I charge the Respondent facility identified with violation(s) of the BOC Accreditation Standards. I understand that the information submitted to the BOC concerning this complaint proceeding will be kept confidential. I also understand that the Respondent facility will receive a copy of this document, as well as other information that is submitted with regard to the FWA case.

I further certify that the factual allegations made in this Fraud, Waste and Abuse Charge Statement are true and accurate to the best of my knowledge and that these charges are made in good faith.

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date: