

U.S. Department of Labor

Office of Inspector General—Office of Audit

REPORT TO THE EMPLOYMENT AND TRAINING ADMINISTRATION



COVID-19: ETA NEEDS TO IMPROVE ITS OVERSIGHT OF STATES' EFFORTS TO IDENTIFY UI FRAUD USING DECEASED PERSONS' SOCIAL SECURITY NUMBERS

**AUDIT SERIES: HIGH-RISK AREAS FOR POTENTIAL
UI FRAUD, AUDIT TWO OF FOUR**

This report was prepared by Key & Associates, P.C (Key) under contract to the U.S. Department of Labor, Office of Inspector General, and, by acceptance, it becomes a report of the Office of Inspector General.

A handwritten signature in blue ink, reading "Laura B. Nieves".

U.S. Department of Labor
Assistant Inspector General for Audit

**DATE ISSUED: AUGUST 15, 2025
REPORT NUMBER: 19-25-005-03-315**



BRIEFLY...

COVID-19: ETA NEEDS TO IMPROVE ITS OVERSIGHT OF STATES' EFFORTS TO IDENTIFY UI FRAUD USING DECEASED PERSONS' SOCIAL SECURITY NUMBERS

Why We Did the Audit

As of September 2022, the OIG had reported a cumulative \$45.6 billion paid in four high-risk areas of unemployment insurance (UI) fraud the OIG had identified; claimants using deceased persons' Social Security numbers (SSN)—\$139.5 million—was the second largest area. The OIG shared its data and methodology for identifying those claimants with the Employment and Training Administration (ETA). ETA is responsible for providing states with UI program direction and oversight; the states are responsible for ensuring UI payments go only to eligible claimants and for making determinations of fraud.

Based on the OIG's concerns regarding UI benefits paid in each of the high-risk areas, the OIG began a series of four audits; this is the second in the series. Specifically, for claimants using deceased persons' SSNs, we contracted with Key & Associates, P.C. (Key) to answer the following question:

To what extent have ETA and state workforce agencies (SWA) addressed potentially fraudulent CARES Act UI claims filed using the SSNs of deceased persons?

Read the Full Report

For more information, go to:

<https://www.oig.dol.gov/public/reports/oa/2025/19-25-005-03-315.pdf>.

What We Found

Key found the 10 SWAs selected for testing confirmed some claimants filed fraudulent UI claims using deceased persons' SSNs. However, ETA took limited action to ensure states properly addressed the potentially fraudulent UI claims filed using deceased persons' SSNs. While ETA transmitted claimant data associated with potentially fraudulent UI claims to the 53 SWAs and Guam, including instructions and requirements on investigations and due process, ETA did not perform the following oversight actions:

- monitor nor require states to report the results of research or investigations of potentially fraudulent UI claims, which would have assisted ETA in identifying high-risk areas for UI fraud;
- ensure the National Association of State Workforce Agencies' Integrity Data Hub (IDH) effectively provided states with useful information to assist in identifying UI fraud; or
- identify systemic weaknesses that resulted in states reporting zero fraudulent overpayments when UI fraud risk was at its height during the pandemic.

These deficiencies occurred because ETA considered its oversight responsibilities to be limited. Specifically, ETA: (1) did not consider monitoring the results of states' research and investigations as part of its responsibilities, (2) measured IDH effectiveness by the number of claims submitted to and flagged by the IDH rather than by the outcomes of states' fraud investigations, and (3) did not detect states' information technology systems or staffing were insufficient to report fraudulent overpayments.

Without knowledge of the states' investigative results, ETA's ability to assess UI program performance, identify high-risk areas, and provide states with additional tools and guidance to prevent fraudulent overpayments was impaired. In addition, without ETA establishing an outcome-based metric for IDH cross-matches, ETA was unable to determine the IDH's effectiveness in assisting states with identifying fraud.

The OIG selected 185 claimants that filed potentially fraudulent UI claims across 10 SWAs for Key to test. Key determined \$586,782 in UI benefits were paid, and the states confirmed \$302,686 (52 percent) was fraudulent.

What We Recommended

Key did not make any new recommendations in this report. To address the issues identified in this report and improve ETA's oversight of states' efforts to identify fraudulent UI claims, Regis & Associates, PC, an OIG contractor, made two recommendations (numbers 1 and 3) to ETA in the first report of this series, with which ETA generally agreed. That report, including ETA's responses to the recommendations, is available at:

<https://www.oig.dol.gov/public/reports/oa/2025/19-25-004-03-315.pdf>.

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INSPECTOR GENERAL'S REPORT

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The U.S. Department of Labor (DOL or Department) Office of Inspector General (OIG) contracted with the independent certified public accounting firm of Key & Associates, P.C. (Key) to conduct a performance audit of the Employment and Training Administration's (ETA) and state workforce agencies' (SWA or state)¹ efforts to address potentially fraudulent unemployment insurance (UI) claims filed using the Social Security numbers (SSN) of deceased persons.

The OIG monitored Key's work to ensure it met professional standards and contractual requirements. Key's independent audit was conducted in accordance with generally accepted government auditing standards.

Key was responsible for the auditors' evaluation and the conclusions expressed in the report while the OIG reviewed Key's report and supporting documentation.

Purpose

Under the Coronavirus Aid, Relief, and Economic Security (CARES) Act and subsequent legislation,² Congress provided expanded UI benefits to workers who were unable to work due to the COVID-19 pandemic. UI is a joint federal-state program with each state administering a separate UI program under its own laws while following uniform guidelines established by federal law.

¹ This report uses "state" or "SWA" to refer to the body that administers the UI program within the state, district, or territory. For the 50 states, as well as the U.S. Virgin Islands, Puerto Rico, and the District of Columbia, that administrative body is a SWA. Therefore, there are 53 SWAs.

² The CARES Act expanded UI benefits through December 31, 2020. On December 27, 2020, the Continued Assistance for Unemployed Workers Act of 2020 extended the CARES Act UI programs through March 14, 2021. On March 11, 2021, the American Rescue Plan Act of 2021 further extended the CARES Act UI programs through September 6, 2021.

According to ETA, which is responsible for providing UI program leadership, direction, and assistance to SWAs, as of January 2023, about \$888 billion was paid in pandemic-related UI benefits. In addition, from January 2021 through July 2022, ETA made \$562.6 million available to support the 53 SWAs and Guam with fraud detection and prevention, including identity verification and overpayment recovery activities in pandemic-related UI programs.

The OIG conducts independent oversight of the UI program through audits to strengthen the integrity and efficiency of the program and through criminal investigations to detect and deter large-scale fraud. Applying the Department's Fiscal Year 2022 estimated improper payment rate of 21.52 percent to pandemic UI expenditures, the OIG estimated at least \$191 billion (22 percent) of the \$888 billion in pandemic UI benefits could have been paid improperly, with a significant portion attributable to fraud.

As of September 2022, the OIG—aided by data analytics—had identified \$45.6 billion in potentially fraudulent UI benefits paid in four specific high-risk areas, involving claims with SSNs:

1. filed in multiple states,
2. of deceased persons,
3. used to file with suspicious email accounts, and
4. of federal prisoners.³

That \$45.6 billion included \$139.5 million paid against claims filed using the SSNs of deceased persons between March 2020 and October 2020.

When the OIG identifies anti-fraud measures that may help the UI program, it shares them with the Department and SWAs as appropriate. As of September 2022, the OIG had shared its claimant data and methodology on potential fraud in the four high-risk areas with ETA for distribution to the 53 SWAs and Guam. The states are responsible for ensuring UI benefits are paid only to eligible claimants and for making determinations of fraud. Based on our concerns regarding UI benefits paid in each of the four high-risk areas, we began a series of four audits; this is the second in the series. Specifically, for UI claims filed using deceased persons' SSNs, we contracted with Key to answer the following question:

To what extent have ETA and SWAs addressed potentially fraudulent CARES Act UI claims filed using the SSNs of deceased persons?

³ Alert Memorandum: Potentially Fraudulent Unemployment Insurance Payments in High-Risk Areas Increased to \$45.6 Billion, Report No. 19-22-005-03-315 (September 21, 2022), available at: <https://www.oig.dol.gov/public/reports/oa/2022/19-22-005-03-315.pdf>

To answer this question, Key reviewed the actions taken by ETA and SWAs—from April 7, 2021, through September 15, 2022—to address the OIG-identified potentially fraudulent UI claims filed using deceased persons' SSNs from March 2020 through October 2020. Using a risk-based approach, the OIG selected 185 claimants for Key to test from the States of Alaska, Indiana, Kentucky, Louisiana, Michigan, Mississippi, Missouri, New Mexico, Vermont, and Wisconsin (10 SWAs).⁴ Key also reviewed the 10 SWAs' policies, processes, and results of relevant actions taken. However, Key did not make determinations of fraud or evaluate whether the states made the correct determinations. In addition, Key surveyed the remaining 43 SWAs and Guam; 28 SWAs (64 percent) responded. Key also reviewed updated guidance and UI payment reporting activities that extended outside of the audit period. See Appendix A for additional details on scope and methodology.

Results

Key found the 10 SWAs confirmed some claimants filed fraudulent UI claims using deceased persons' SSNs. However, ETA took limited action to ensure states properly addressed the potentially fraudulent UI claims filed using deceased persons' SSNs.

ETA is responsible for providing oversight of UI fraud risk management, and states' management should report internal control deficiencies to ETA—consistent with the Government Accountability Office's Standards for Internal Control in the Federal Government. Specifically, the standards state the oversight body is responsible for overseeing the strategic direction of the entity and obligations related to the accountability of the entity. This includes overseeing management's design, implementation, and operation of an internal control system. Further, management should report deficiencies identified in the internal control system to the oversight body.

ETA transmitted the OIG's claimant data and methodology to the 53 SWAs and Guam in April 2021, including instructions and requirements on investigations and due process. However, ETA did not perform the following oversight actions:

⁴ The OIG selected this sample based on the highest per capita benefits paid. The OIG calculated per capita benefits using the number of claimants flagged for using deceased persons' SSNs and the benefit amounts paid against these claims. The OIG then ranked the SWAs by the per capita amount, largest to smallest, and selected the top 10 SWAs. The OIG also controlled for repetition of SWAs within the four high-risk areas. Therefore, the OIG did not select the same SWAs if they appeared in a higher-ranked risk area, resulting in the selection of 10 different SWAs for each of the four high-risk audits. The OIG ranked the high-risk areas from highest to lowest: multistate claimants, deceased persons' SSNs, suspicious email accounts, and federal prisoners' SSNs.

- monitor nor require states to report the results of research or investigations of potentially fraudulent UI claims, which would have assisted ETA in identifying high-risk areas for UI fraud;
- ensure the National Association of State Workforce Agencies' Integrity Data Hub (IDH) effectively provided states with useful information to assist in identifying UI fraud; or
- identify systemic weaknesses that resulted in states reporting zero fraudulent overpayments when UI fraud risk was at its height during the pandemic.

These deficiencies occurred because ETA considered its oversight responsibilities to be limited. Specifically, ETA: (1) did not consider monitoring the results of states' research and investigations as part of its responsibilities, (2) measured IDH effectiveness by the number of claims submitted to and flagged by the IDH rather than by the outcomes of states' fraud investigations, and (3) did not detect states' information technology systems or staffing were insufficient to report fraudulent overpayments.

Without knowledge of the states' investigative results of potentially fraudulent UI claims, ETA's ability to assess UI program performance, identify high-risk areas, and provide states with additional tools and guidance to prevent fraudulent overpayments was impaired. In addition, without ETA establishing an outcome-based metric for IDH cross-matches, ETA was unable to determine the IDH's effectiveness in assisting states with identifying fraud.

We selected 185 claimants that filed potentially fraudulent UI claims across 10 SWAs for Key to test. Key determined \$586,782 in UI benefits were paid, and states confirmed \$302,686 (52 percent) was fraudulent.

We appreciate the cooperation and courtesies ETA extended us during this audit.



Laura B. Nicolosi
Assistant Inspector General for Audit

CONTRACTOR PERFORMANCE AUDIT REPORT



Key & Associates, P.C.

Independent Auditors' Performance Audit Report on Unemployment Insurance
Claims Filed with the Social Security Numbers of Deceased Persons

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We were engaged by the U.S. Department of Labor (DOL or Department) Office of Inspector General (OIG) to conduct a performance audit of the Employment and Training Administration's (ETA) oversight of state workforce agencies' (SWA or state)⁵ efforts to address potentially fraudulent unemployment insurance (UI) claims filed using the Social Security numbers (SSN) of deceased persons.

Specifically, we conducted the audit to answer the following question:

To what extent have ETA and SWAs addressed potentially fraudulent Coronavirus Aid, Relief, and Economic Security (CARES) Act UI claims filed using the SSNs of deceased persons?

To answer this question, we reviewed the actions taken by ETA and SWAs—from April 7, 2021, through September 15, 2022 (the audit period)—to address the OIG-identified potentially fraudulent UI claims filed using deceased persons' SSNs from March 2020 through October 2020. Using a risk-based approach, the OIG selected 185 claimants for us to test from the States of Alaska, Indiana, Kentucky, Louisiana, Michigan, Mississippi, Missouri, New Mexico, Vermont, and Wisconsin (10 SWAs). We also reviewed the 10 SWAs' policies, processes, and results of relevant actions taken. However, we did not make determinations of

⁵ This report uses "state" or "SWA" to refer to the body that administers the UI program within the state, district, or territory. For the 50 states, as well as the U.S. Virgin Islands, Puerto Rico, and the District of Columbia, that administrative body is a SWA. Therefore, there are 53 SWAs.

fraud or evaluate whether the states made the correct determinations. In addition, we surveyed the remaining 43 SWAs and Guam; 28 SWAs (64 percent) responded. We also reviewed updated guidance and UI payment reporting activities that extended outside of the audit period. See Appendix A for additional details on scope and methodology.

RESULTS

We found the 10 SWAs confirmed some claimants filed fraudulent UI claims using deceased persons' SSNs. However, ETA took limited action to ensure states properly addressed the potentially fraudulent UI claims filed using deceased persons' SSNs.

ETA is responsible for providing oversight of UI fraud risk management, and states' management should report internal control deficiencies to ETA—consistent with the Government Accountability Office's (GAO) Standards for Internal Control in the Federal Government. Specifically, the standards state the oversight body is responsible for overseeing the strategic direction of the entity and obligations related to the accountability of the entity. This includes overseeing management's design, implementation, and operation of an internal control system. Further, management should report deficiencies identified in the internal control system to the oversight body.

ETA transmitted the OIG's claimant data and methodology associated with potentially fraudulent UI claims to the 53 SWAs and Guam in April 2021, including instructions and requirements on investigations and due process. However, ETA did not perform the following oversight actions:

- monitor nor require states to report the results of research or investigations of potentially fraudulent UI claims, which would have assisted ETA in identifying high-risk areas for UI fraud;
- ensure the National Association of State Workforce Agencies' (NASWA) Integrity Data Hub (IDH) effectively provided states with useful information to assist in identifying UI fraud; or
- identify systemic weaknesses that resulted in states reporting zero fraudulent overpayments when UI fraud risk was at its height during the pandemic.

These deficiencies occurred because ETA considered its oversight responsibilities to be limited. Specifically, ETA: (1) did not consider monitoring the results of states' research and investigations as part of its responsibilities,

(2) measured IDH effectiveness by the number of claims submitted to and flagged by the IDH rather than by the outcomes of states' fraud investigations, and (3) did not detect states' information technology (IT) systems or staffing were insufficient to report fraudulent overpayments.

Without knowledge of the states' investigative results, ETA's ability to assess UI program performance, identify high-risk areas, and provide states with additional tools and guidance to prevent fraudulent overpayments was impaired. In addition, without ETA establishing an outcome-based metric for IDH cross-matches, ETA was unable to determine the IDH's effectiveness in assisting states with identifying fraud.

ETA Needs to Improve Its Oversight of States' Efforts to Identify UI Fraud Using Deceased Persons' SSNs

ETA is the federal agency responsible for providing states UI program direction and oversight. ETA provided states with claimant data associated with potentially fraudulent UI claims, recommended states use the IDH's cross-match, and required states to report aggregated fraudulent overpayment data. However, after taking these actions, ETA did not sufficiently monitor states' fraud detection and reporting activities to ensure improvements to the integrity of the UI program. This occurred because ETA considered its oversight responsibilities to be limited, resulting in an impairment of its ability to assess performance of the UI program and identify high-risk areas.

ETA Neither Monitored Nor Required States to Report Results of Research or Investigations

In April 2021, ETA transmitted to 53 SWAs and Guam a list of claimants who filed potentially fraudulent UI claims using deceased persons' SSNs, as identified by the OIG. ETA sent the list with investigative instructions and due process requirements. ETA officials confirmed the agency had received electronic notifications that all 53 SWAs and Guam received the email and downloaded the claimant files. However, only 9 of the 10 SWAs selected for detailed review confirmed they received their respective claimant lists from ETA's April 2021 transmission. According to Wisconsin officials, they did not receive the list of claimants. Also, Mississippi (one of the nine SWAs) did not access the files before the secured link expired.

ETA was not aware of Wisconsin's and Mississippi's issues because, after distributing the list, ETA did not monitor nor require the states to report the

results of any research or investigations performed. Such monitoring activity would have assisted ETA in identifying the receipt and access issues as well as identifying high-risk areas for UI fraud. GAO's Standards for Internal Control in the Federal Government prescribes management should report deficiencies identified in the internal control system to the oversight body, which—in the case of the UI system—is ETA.

The 10 SWAs informed us that they did not communicate the results of subsequent research or investigations to ETA even though their investigations had confirmed the occurrence of fraudulent transactions. We submitted detailed testing questionnaires to the 10 SWAs for each of the selected 185 UI claimants to determine the SWAs' actions taken to address the potentially fraudulent CARES Act UI claims filed using deceased persons' SSNs. Each SWA's response indicated whether the claims had been determined by the state to be fraudulent or nonfraudulent.

We found the 10 SWAs paid \$586,782 in UI benefits, and the states confirmed \$302,686 (52 percent) was fraudulent. This included \$130,948 (43 percent) paid against claims filed using deceased persons' SSNs and \$171,738 (57 percent) paid against claims filed for other fraudulent reasons (see Exhibit, Tables 1 and 2).

In survey responses, 25 of 28 responding states⁶ (89 percent) indicated they did not report to ETA any results of research or investigations regarding the claimant list. The remaining three respondents indicated they generally report fraudulent overpayments to ETA but did not report the results of investigations specific to the claimant list.

ETA Did Not Consider Monitoring Results of SWAs' Investigations as Part of Its Oversight Responsibilities

ETA did not monitor the results of the SWAs' research and investigations of potentially fraudulent UI claims because it did not consider such monitoring activities to be a required part of its oversight responsibilities. This is contrary to government standards on management reporting and managing fraud risks as well as recommendations from both the OIG and GAO.

ETA relied on the SWAs' submissions of aggregated overpayment and fraud data on the following two distinct pandemic program reports:

⁶ During a survey, we asked 43 SWAs and Guam if they reported results of investigations to ETA; 28 SWAs responded.

1. Quarterly ETA 227: Overpayment Detection and Recovery reports⁷ for the Federal Pandemic Unemployment Compensation (FPUC) and Pandemic Emergency Unemployment Compensation (PEUC) programs; and
2. Monthly ETA 902P: Pandemic Unemployment Assistance Activities⁸ reports for the Pandemic Unemployment Assistance (PUA) program.

ETA required states to report aggregated data on UI claims, including established overpayments and non-monetary determinations. ETA officials asserted it is not ETA's responsibility to require states to report the results of their individual investigations. Specifically, ETA officials stated the agency provides guidance and funding to states to operate UI programs and they had no reason to collect claimant-level results of the SWAs' investigations, nor did they have the capacity to evaluate or analyze such data. However, ETA is the federal agency responsible for providing UI program direction and oversight. This responsibility includes distributing federal funds for states' implementation of the CARES Act UI programs, ensuring the integrity of the UI system, and managing fraud risks.

ETA agreed with the OIG's finding in a previous COVID-19 report⁹ that there was a significant increase in fraudulent activity in the UI program. In addition, ETA subsequently provided the OIG's list of claimants to SWAs and informed the SWAs it would collaborate with them to combat the sophisticated imposter fraud affecting the UI system. Accordingly, ETA accepted and demonstrated its monitoring responsibilities. Given this prior action, ETA's decision not to monitor the results of the SWAs' research and investigations of potentially fraudulent claims filed using deceased persons' SSNs did not align with its proposed collaborative effort to combat imposter fraud expressed to the SWAs.

Further, ETA's oversight responsibility to ensure the integrity of the UI system includes managing its fraud risk environment. In October 2021,¹⁰ GAO

⁷ For FPUC and PEUC, SWAs used ETA 227 to report quarterly program activities, including the establishment of overpayments, recoveries of overpayments, criminal and civil actions involving overpayments obtained fraudulently, and an aging schedule of outstanding benefit overpayment accounts.

⁸ For PUA, SWAs used ETA 902P to report monthly data on PUA activities, including application and payment, denials and appeals, and overpayments.

⁹ Alert Memorandum: The Employment and Training Administration (ETA) Needs to Ensure State Workforce Agencies (SWA) Implement Effective Unemployment Insurance Program Fraud Controls for High-Risk Areas, Report No. 19-21-002-03-315 (February 22, 2021), available at: <https://www.oig.dol.gov/public/reports/oa/2021/19-21-002-03-315.pdf>

¹⁰ GAO, COVID-19: Additional Actions Needed to Improve Accountability and Program Effectiveness of Federal Response, GAO-22-105051 (October 27, 2021), available at: <https://www.gao.gov/products/gao-22-105051>

recommended DOL designate a dedicated entity and document its responsibilities for managing the process of assessing fraud risks to the UI program consistent with leading practices as provided in its Fraud Risk Framework (see Figure). In addition, GAO recommended DOL should have, among other things, clearly defined and documented responsibilities and authority for managing fraud risk assessments and for facilitating communication among stakeholders regarding fraud-related issues.

Figure: GAO’s Framework for Managing Fraud Risks in Federal Programs



Source: GAO, A Framework for Managing Fraud Risks in Federal Programs, Report No. GAO-15-593SP (July 2015), available at: <https://www.gao.gov/assets/gao-15-593sp.pdf>

GAO has closed this recommendation based on actions taken by the Department. On January 6, 2023, the DOL Secretary designated DOL’s Chief Financial Officer (CFO) as the dedicated entity responsible for managing the process of assessing fraud risks in the UI program. This designation is consistent with leading practices as provided in GAO’s Fraud Risk

Framework. However, the designation came almost 3 years after the onset of the pandemic. The beginning of the pandemic was the most critical time for administering new temporary programs, and states struggled to process the highest level of claims in the history of the UI program.

ETA, with the advisory support of the Office of the Chief Financial Officer (OCFO) Fraud Risk Working Group, also developed a UI Fraud Risk Profile in August 2023. However, this was 8 months after the CFO was designated as the anti-fraud risk entity. In April 2024, ETA published “Building Resilience: A Plan to Transform Unemployment Insurance.” This plan details seven transformation activities, including bolstering state UI programs against fraud. The plan also listed ongoing and completed strategies, as well as legislative reform proposals.

In May 2024, the OIG and OCFO met to discuss OCFO’s role and responsibilities as related to the UI program. OCFO officials stated OCFO did not specialize in UI programs; rather, OCFO advised ETA on UI fraud risk management. According to OCFO officials, the UI Fraud Risk Profile is a living document. Further, they stated ETA identified the risks it contains based on high-risk areas reported in previous GAO and OIG reports, as well as data ETA regional offices collected from the states. Altogether, ETA identified 18 UI fraud risks in the UI Fraud Risk Profile, including:

- applicants fraudulently filing claims and receiving benefits across multiple states,
- deceased persons’ identities used to file for UI benefits,
- suspicious email addresses or devices used to file UI claims, and
- incarcerated individuals or prison inmates applying for UI benefits while misrepresenting their eligibility.¹¹

In the UI Fraud Risk Profile, ETA and OCFO included responses to mitigate each fraud risk. According to OCFO officials, the challenges to mitigating the risks included the 53 SWAs having: (1) statutory authority to use or not use IDH services and (2) varying laws that define fraud.

Nonetheless, ETA developed a UI Integrity Strategic Plan through which it updated, oversaw, and communicated its UI anti-fraud strategies. According to ETA, the strategic plan continuously evolves and includes strategies and anti-fraud controls to combat emerging fraud schemes and address the highest residual risks identified in the UI Fraud Risk Profile. ETA requires states to submit Integrity Action Plans every 6 months to capture ongoing and planned actions to mitigate each fraud risk and reduce improper payments. Further,

¹¹ In some cases, fraud perpetrators have stolen inmates’ personally identifiable information to apply for and receive UI benefits.

according to the plan, ETA tracks and evaluates each fraud risk mitigation strategy and action quarterly to determine their effectiveness in mitigating each UI fraud risk and the level of risk that remains.

ETA officials stated, if ETA determined a risk response effectively decreased the UI fraud risk to an acceptable tolerance level, the agency would update the risk ratings in the UI Fraud Risk Profile. Accordingly, these updates could reprioritize the remaining UI risks. If UI risks are reprioritized, ETA would revise the associated control strategies in the UI Integrity Strategic Plan to target higher priority risks. However, if ETA determined a risk response was not effective enough to lower a risk to an acceptable risk tolerance level, the agency would develop additional control strategies. These additional strategies would be added to the UI Integrity Strategic Plan and tracked on a quarterly basis until the control was fully implemented.

This process would be repeated until ETA determined the risk response effectively decreased the risk to an acceptable tolerance level. As new fraud threats emerge, ETA would: (1) update the UI Fraud Risk Profile and (2) incorporate and track additional risk response activities to mitigate the newly identified risks in the UI Integrity Strategic Plan. However, ETA could not provide documented evidence that it performed quarterly evaluations of strategies and actions to determine their effectiveness in mitigating each fraud risk and the remaining levels of risk.

On June 27, 2024, ETA, through Training and Employment Notice No. 32-23, announced the launch of the WorkforceGPS UI Fraud Risk Management webpage.¹² ETA and OCFO developed the webpage to encourage states to share feedback with their ETA regional office, including states' best practices in fraud risk management that could assist other states in operating their UI programs.

In GAO's Framework for Managing Fraud Risks in Federal Programs, GAO emphasized it is critical that the anti-fraud entity be located within the agency and not the OIG, so the OIG can retain independence to serve its oversight role.¹³ However, since June 2020, the OIG has been the leading federal entity collecting pandemic-related UI claimant data from states nationwide, performing risk assessments, and identifying high-risk areas. As previously noted, the OIG provided ETA and states with claimant data associated with high-risk potentially fraudulent UI claims and its methodology. These efforts should not be deferred to the OIG's independent oversight. As the oversight

¹² Accessible with account creation request at:

[https://ui.workforcegps.org/resources/2024/05/01/18/20/Unemployment Insurance Fraud Risk Management](https://ui.workforcegps.org/resources/2024/05/01/18/20/Unemployment_Insurance_Fraud_Risk_Management)

¹³ GAO, A Framework for Managing Fraud Risks in Federal Programs, GAO-15-593SP (July 2015), available at: <https://www.gao.gov/assets/gao-15-593sp.pdf>

agency for UI programs, ETA is responsible for establishing a routine program integrity function. With the support of the CFO as the designated anti-fraud entity, ETA needs to: (1) perform its own data analytics and risk assessments, (2) identify high-risk areas, and (3) update the UI Fraud Risk Profile.

In a September 2023 OIG report,¹⁴ the OIG identified the importance of data analytics in providing effective UI program oversight and combating fraud. In addition, the OIG recommended ETA create an integrity program that incorporates a data analytics capability and regularly monitor state UI claims data to detect and prevent improper payments, including fraudulent payments, and identify trends and emerging issues that could negatively impact the UI program.

In response to the OIG's report, ETA cited limited funding as the reason for not being able to staff a data analytics team. In addition, ETA stated creating a data analytics capability and monitoring state UI claims data would duplicate DOL's ongoing investment in the UI Integrity Center,¹⁵ including the IDH. As an alternative, ETA stated it would leverage ongoing investments in the UI Integrity Center's IDH and work with the center to improve IDH data analytics capabilities to better identify fraud trends. However, states are not required to participate in the IDH and those that do participate do so to varying degrees, which has limited the IDH's effectiveness. As of September 21, 2023, 51 of the 53 SWAs¹⁶ used IDH services to some degree. The OIG's recommendations remained unimplemented as of August 7, 2025. We are not reissuing these recommendations but emphasize the importance of addressing them to resolve the deficiencies identified within this report.

¹⁴ Alert Memorandum: ETA Needs to Incorporate Data Analytics Capability to Improve Oversight of the Unemployment Insurance Program, Report No. 19-23-012-03-315 (September 25, 2023), available at: <https://www.oig.dol.gov/public/reports/oa/2023/19-23-012-03-315.pdf>

¹⁵ The UI Integrity Center, established by the Department and operated by NASWA, is designed to: (1) assist states in their efforts to more effectively prevent, detect, and recover improper and fraudulent payments and (2) improve program integrity by developing and promoting innovative program strategies.

¹⁶ Guam does not have an IDH agreement.

ETA Encouraged the Use of NASWA's IDH Cross-Match without Ensuring Its Effectiveness in Assisting States with Detecting Fraud

In Unemployment Insurance Program Letter (UIPL) No. 23-20,¹⁷ ETA strongly recommended states employ multiple techniques, including the use of the IDH's identity verification (IDV) cross-match, to validate UI claims and uncover suspicious or fraudulent characteristics. We found 9 of the 10 SWAs (90 percent) responded they used IDH's IDV cross-match to identify UI claims for claimants fraudulently using deceased persons' SSNs. These responses align with the survey responses where 23 of 28 respondents (82 percent) stated they used IDH's IDV cross-match to review claims for the fraudulent use of deceased persons' SSNs.¹⁸

ETA has supported the enhancement of the IDH. On May 2, 2024, through Training and Employment Notice No. 28-23,¹⁹ ETA announced the development of a data sharing partnership between the U.S. Department of the Treasury's Bureau of the Fiscal Service and NASWA's UI Integrity Center to provide state UI agencies with access to Do Not Pay data sources and services. These sources and services would be provided through states' use of IDH.

In addition, the IDH participation agreement requires participating states to access Do Not Pay data sources and services through IDH. According to ETA, as of July 10, 2024, the IDH provided cross-matches to the Death Master File, allowing states to identify potentially fraudulent claims filed in the names of deceased individuals. ETA officials stated ETA and NASWA continue to work closely with the Bureau of the Fiscal Service to incorporate additional Do Not Pay data sources into the IDH for states' use and anticipates the availability of two new Do Not Pay data sources in Fiscal Year 2025. However, ETA did not ensure IDH's IDV cross-match was effective in assisting states with detecting fraud.

According to NASWA data, claims filed using deceased persons' SSNs from March 2020 through October 2020 were flagged on 765 occasions. However, the number of flags alone did not indicate the effectiveness of the IDH's

¹⁷ UIPL No. 23-20, Program Integrity for the Unemployment Insurance (UI) Program and the UI Programs Authorized by the Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020 - Federal Pandemic Unemployment Compensation (FPUC), Pandemic Unemployment Assistance (PUA), and Pandemic Emergency Unemployment Compensation (PEUC) Programs (May 11, 2020)

¹⁸ According to NASWA, as of September 2023, 45 of the 53 SWAs (85 percent) rely on the data generated by the IDH IDV system.

¹⁹ Training and Employment Notice No. 28-23, Announcement of a New Data Sharing Partnership Between the U.S. Department of Treasury's (Treasury) Bureau of the Fiscal Service (Fiscal Service) and the National Association of State Workforce Agencies' (NASWA) Unemployment Insurance (UI) Integrity Center to provide State UI Agencies Access to Do Not Pay Working System (DNP) Data Sources and Services through the UI Integrity Data Hub (IDH) (May 2, 2024)

IDV cross-match tool in assisting states with detecting fraudulent UI claims filed using deceased persons' SSNs.

In a previous audit report,²⁰ the OIG found greater oversight of IDH performance was needed if ETA's and states' reliance on the tool for program integrity, including fraud identification, was to continue. The OIG recommended ETA complete an evaluation of the effectiveness of the IDH system, including the methodology used in cross-matching data.

In response to the OIG's recommendation, ETA contracted with a consulting firm to perform a study²¹ of the IDH to answer the following questions:

1. How do participating states use the IDH to detect and prevent fraud?
2. How effective do states consider the IDH to be in detecting and preventing fraud?
3. What options are available to inform continuous improvement and effectiveness of the IDH?

The consulting firm found states lacked consistency in how and when they used the IDH, which made it difficult to measure the tool. According to the IDH study, data sharing is the most significant value in the IDH. However, when states, particularly larger states, do not contribute data to the IDH, other states do not benefit and the IDH loses its value. The consulting firm also found many states only reported initial UI claims data to the IDH and did not contribute continued claims information.

ETA Measured IDH's Effectiveness by the Number of Claims Submitted and Flagged Rather than by the Outcomes of SWAs' Investigations

The purpose of the IDH is not to identify fraud, but rather to provide states with information to help them accurately identify potentially fraudulent claims, with a minimum number of false positives and false negatives. A false positive would be a legitimate claim incorrectly flagged for review, and a false negative would be a fraudulent claim not flagged as suspicious. However, ETA did not establish a performance metric to effectively assess how well the IDH results achieved this goal because the current metrics focus on inputs and outputs²² rather than the outcomes (fraud or nonfraud) of states' fraud investigations. The SWAs are not required to report investigative outcome data back to the IDH system. Without

²⁰ COVID-19: ETA Can Improve Its Oversight to Ensure Integrity over CARES Act UI Programs, Report No. 19-23-011-03-315 (September 22, 2023), available at: <https://www.oig.dol.gov/public/reports/oa/2023/19-23-011-03-315.pdf>

²¹ Exploratory Study of the Integrity Data Hub (IDH) Final Internal Report (March 2024)

²² Inputs are the number of claims submitted to the IDH, and outputs are the number of claims flagged by the IDH.

ETA establishing an outcome-based metric for IDH cross-matches, ETA is unable to determine how effective the IDH is in assisting states with identifying fraudulent claims.

In a September 2022 OIG report,²³ the OIG recommended ETA work with NASWA to: (1) update the IDH Participant Agreement to require states to submit the results of their UI fraud investigations and (2) ensure IDH cross-matches are effective at preventing the types of fraud detected during the pandemic and regularly update the IDH system using the results of state fraud investigations.

ETA offered to revise its required UI-related reports as an alternate approach to meet the intent of the OIG's recommendations. The revised reports would capture: (1) the tools or interventions, including the IDH, a state used to detect potential fraud issues and (2) the aggregated data for outcomes (e.g., determination, overpayment amounts) of the issues such tools or inventions detect. ETA stated revising its required UI related reports would be more effective. Specifically, the revisions would allow ETA to gather information on IDH outcomes to track the results of investigations and determinations based on the use of the IDH and other information. ETA estimated completing this alternative approach to the recommendations in Fiscal Year 2024. However, as of August 7, 2025, these OIG recommendations remain unimplemented. We are not reissuing these recommendations but emphasize the importance of addressing them to resolve the deficiencies identified within this report.

ETA Did Not Identify Systemic Weaknesses that Resulted in States Reporting Zero Fraudulent Overpayments

Since April 2020, UIPL Nos. 15-20,²⁴ 16-20,²⁵ and 17-20²⁶ have required SWAs to report FPUC, PUA, and PEUC overpayments, including fraud, on ETA 227 (for FPUC and PEUC) and 902P (for PUA) reports. We acknowledge that, for the first 3 months the programs were in existence, there may have been legitimate

²³ COVID-19: ETA and States Did Not Protect Pandemic-Related UI Funds from Improper Payments Including Fraud or from Payment Delays, Report No. 19-22-006-03-315 (September 30, 2022), available at:

<https://www.oig.dol.gov/public/reports/oa/2022/19-22-006-03-315.pdf>

²⁴ UIPL No. 15-20, Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020—Federal Pandemic Unemployment Compensation (FPUC) Program Operating, Financial, and Reporting Instructions (April 4, 2020)

²⁵ UIPL No. 16-20, Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020—Pandemic Unemployment Assistance (PUA) Program Operating, Financial, and Reporting Instructions (April 5, 2020)

²⁶ UIPL No. 17-20, Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020—Pandemic Emergency Unemployment Compensation (PEUC) Program Operating, Financial, and Reporting Instructions (April 10, 2020)

reasons the states lacked activity to report. However, the applicable UIPLs did not waive the reporting requirements for that period. Therefore, we analyzed the UI reporting activity for the 10 SWAs from April 2020 through September 2022, including the first 3 months for which states were required to report.

As of January 2025, we found that, from April 2020 through September 2022, the 10 SWAs reviewed periodically reported zero fraudulent overpayments related to: (1) the FPUC and PEUC programs on ETA 227 reports and (2) the PUA program on ETA 902P reports. However, it is unlikely there were no fraudulent overpayments disbursed for multiple quarters, considering the: (1) high UI fraud risks associated with the quick implementation of the new, high-dollar value pandemic programs; (2) evolving guidance; and (3) rapid increase in UI claims. As part of ETA's oversight role, it should have identified systemic weaknesses that resulted in states reporting zero fraudulent overpayments when UI fraud risk was at its height during the pandemic.

For FPUC, the following four SWAs reported zero fraudulent overpayments on the quarterly ETA 227 reports:

- Alaska reported zero FPUC fraudulent overpayments for the six quarters ending June 30, 2020, through September 30, 2021;
- Kentucky reported zero FPUC fraudulent overpayments for the three quarters ending September 30, 2020, through March 31, 2021;
- Michigan reported zero FPUC fraudulent overpayments for the quarter ending June 30, 2020; and
- Mississippi reported zero FPUC fraudulent overpayments for the quarter ending June 30, 2020.

For PEUC, the following seven SWAs reported zero fraudulent overpayments on the quarterly ETA 227 reports:

- Alaska reported zero fraudulent PEUC overpayments for the quarter ending June 30, 2020;
- Indiana reported zero fraudulent PEUC overpayments for the quarter ending June 30, 2020;
- Kentucky reported zero fraudulent PEUC overpayments for the two quarters ending September 30, 2020, and December 31, 2020;

- Louisiana reported zero fraudulent PEUC overpayments for the three quarters ending June 30, 2020; December 31, 2020; and March 31, 2021;
- Michigan reported zero fraudulent PEUC overpayments for the quarter ending June 30, 2020;
- Missouri reported zero fraudulent PEUC overpayments for the quarter ending June 30, 2020; and
- Wisconsin reported zero fraudulent PEUC overpayments for the quarter ending June 30, 2020.

For PUA, all 10 SWAs reported zero fraudulent overpayments on monthly ETA 902P reports as follows:²⁷

- Alaska reported zero fraudulent PUA overpayments for the 24 months ending April 2020 through December 2021, June 2022, July 2022, and September 2022;
- Indiana reported zero fraudulent PUA overpayments for the 3 months ending April 2020, May 2020, and July 2020;
- Kentucky reported zero fraudulent PUA overpayments for the 7 months ending April 2020 through June 2020, and August 2020 through November 2020;
- Louisiana reported zero fraudulent PUA overpayments for the 6 months ending April 2020 through August 2020, and January 2022;
- Michigan reported zero fraudulent PUA overpayments for the 3 months ending April 2020 through June 2020;
- Mississippi reported zero fraudulent PUA overpayments for the month ending April 2020;
- Missouri reported zero fraudulent PUA overpayments for the 2 months ending April 2020 and May 2020;

²⁷ PUA fraudulent overpayments excluded fraudulent payments made as a result of identity theft. States are required to report overpayments made as a result of identity theft separately on the ETA 902P report.

- New Mexico reported zero fraudulent PUA overpayments for the 2 months ending April 2020 and May 2020;
- Vermont reported zero fraudulent PUA overpayments for the 30 months ending April 2020 through September 2022; and
- Wisconsin reported zero fraudulent PUA overpayments for the 6 months ending April 2020 through August 2020 and October 2020.

Previous OIG reports identified states' pervasive non-reporting of overpayments, including fraud, for CARES Act UI programs due to antiquated IT systems. In May 2021,²⁸ the OIG recommended ETA assist states with claims, overpayments, and fraud reports to create clear and accurate information. In August 2022,²⁹ the OIG similarly recommended ETA work with states to ensure submission of missing reports and information before the commencement of ETA's Fiscal Year 2022 financial statement audit.

In response to the August 2022 report, ETA agreed with the OIG that complete and accurate reporting is important to the administration and oversight of the temporary UI programs created under the CARES Act and related subsequent legislation. To address the issue, ETA: (1) provided states training on reporting accurate data and submitting ETA 227 and ETA 902P reports, (2) required corrective action plans for states with challenges in reporting as part of their State Quality Service Plans,³⁰ and (3) conducted state-specific technical assistance.

Also, ETA made available up to \$525 million for the SWAs' administrative costs related to fraud prevention and overpayment recovery activities under CARES Act UI programs. As of Fiscal Year 2024, ETA had awarded \$226.9 million in fraud prevention, detection, and integrity grants to 51 states and territories.

As of February 2025, more than 2 years since the OIG's August 2022 recommendation, all 10 SWAs are still establishing and reporting fraudulent

²⁸ COVID-19: States Struggled to Implement CARES Act Unemployment Insurance Programs, Report No. 19-21-004-03-315 (May 28, 2021), available at:

<https://www.oig.dol.gov/public/reports/oa/2021/19-21-004-03-315.pdf>

²⁹ Alert Memorandum: The Employment and Training Administration Needs to Ensure State Workforce Agencies Report Activities Related to CARES Act Unemployment Insurance Programs, Report No. 19-22-004-03-315 (August 2, 2022), available at:

<https://www.oig.dol.gov/public/reports/oa/2022/19-22-004-03-315.pdf>

³⁰ The annual State Quality Service Plan is the principal vehicle the state UI programs use to plan, record, and manage improvement efforts. The State Quality Service Plan serves as the programmatic plan portion of the grant document through which states receive federal UI administrative funding.

overpayments for the pandemic UI programs. The following list contains specifics on the status of the 10 SWAs with reporting efforts ongoing:

- Alaska officials stated the SWA is still identifying fraudulent cases in FPUC, PEUC, and PUA from time to time;
- Indiana officials stated the SWA is still identifying fraudulent overpayments for FPUC, PEUC, and PUA. According to the officials, Indiana does not have a specific stop date for identifying fraudulent overpayments;
- Kentucky officials stated the SWA continues to establish overpayments on FPUC, PEUC, and PUA when necessary, as this is an ongoing process as Kentucky continues to receive information from victims or family members. According to officials, Kentucky does not have a set end date for this process. Furthermore, Kentucky officials stated the SWA plans to continue processing overpayments when an issue is detected unless otherwise directed by ETA;
- Louisiana officials stated the SWA continues to identify fraudulent overpayments and has no specific completion date for reporting fraudulent overpayments. According to officials, the SWA is awaiting guidance from ETA on a deadline for reporting;
- Michigan officials stated there is no specific date for when the state will stop the process for identifying fraudulent overpayments for the three CARES Act UI programs. In addition, the officials stated the SWA continues to issue payments on federal claims from the pandemic and has 3 years from the payment date to adjudicate a fraud determination;
- Mississippi officials stated the SWA continues its efforts to identify fraudulent overpayments associated with identity theft claims and criminal convictions by law enforcement agencies. In addition, the agency officials stated Mississippi does not have a specific end date for identifying these fraudulent overpayments as it is an ongoing effort to ensure the integrity of the unemployment assistance process;
- Missouri officials stated the SWA occasionally establishes fraudulent overpayments due to identify theft for the CARES Act UI programs. However, the officials stated they believe the SWA has identified most of the fraudulent overpayments since they have cleared all UI claims backlogs from the pandemic. According to

officials, Missouri does not have a specific stop date for identifying fraudulent overpayments for the CARES Act UI programs;

- New Mexico officials stated the SWA has continued to search for fraudulent overpayments for the pandemic UI programs. The agency officials stated they will continue to research and refer fraudulent overpayments to the OIG;
- Vermont officials stated their efforts to identify fraudulent overpayments were ongoing, and they estimated completing this work by the end of June 2025 to have the data necessary to file ETA-required reports; and
- Wisconsin officials stated there is no statutory limit for how long after CARES Act UI program benefits are paid that they may investigate and find fraud if appropriate. Based on Wisconsin's response, we concluded the SWA is still identifying fraudulent overpayments.

We commend ETA for continuing to work with the states to identify and report fraudulent overpayments in the CARES Act UI programs. However, these efforts to establish and report fraudulent overpayments have been ongoing for more than 2 years and, based on the SWAs' anticipated completion dates or absence of a completion date, could take longer.

Antiquated IT Systems or Staffing Challenges Caused States to Report Zero Fraudulent Overpayments

Due to IT system programming and staffing challenges, 9 of the 10 SWAs experienced difficulties that led them to report zero fraudulent overpayments for the FPUC, PEUC, or PUA programs, as follows:³¹

Alaska

Alaska officials stated the SWA did not have the necessary resources in place to investigate and determine PUA fraud cases outside of the cases identified as identity fraud until late 2021. Further, they stated PUA fraud investigations were

³¹ According to Missouri officials, the state did not have any reporting challenges during the periods in which it reported zero fraudulent overpayments; the SWA officials stated they did not identify any fraudulent overpayments. However, it is unlikely there were no fraudulent overpayments disbursed for the entire quarter ending June 30, 2020, considering high UI fraud risk associated with: (1) quick implementation of new pandemic programs with evolving guidance and (2) initial claims and benefits disbursed during the pandemic being at the highest during the quarter ending June 30, 2020. From April 2020 through September 2021, Missouri disbursed 413,044 initial payments totaling \$1.4 million. Missouri disbursed 257,567 of those initial payments (62 percent) totaling \$661,308 (46 percent) during the quarter ending June 30, 2020.

performed retroactively starting in October 2021, with the second quarter of 2020 being the first quarter where data was being gathered and analyzed to identify potential fraud. According to Alaska officials, the ETA 902P instructions did not permit Alaska to report an overpayment as fraud until it was investigated and determined to be a willful misrepresentation. Alaska officials stated the first fraud determinations were not made until the first quarter of 2022.

Indiana

Indiana officials stated IT staff worked as quickly as possible to properly integrate all CARES Act program applications and payment processes into the state's existing UI system based on ever-changing federal guidance. In addition, Indiana officials stated they also increased staff levels at the inception of the pandemic to accommodate the increased work volume. Therefore, Indiana officials stated claimants did not begin filing UI claims until May 1, 2020, and Indiana was not able to establish fraudulent overpayments until May 8, 2020.

Kentucky

Kentucky officials stated the SWA encountered IT system limitations and programming restrictions involving pseudo SSNs. Also, Kentucky SWA officials stated reporting was hindered by software programming updates needed to process overpayment determinations.

Louisiana

Louisiana officials stated strained IT systems and staffing resources were stretched to capacity. According to agency officials, during that period, not only were they given mere weeks to implement brand new programs with evolving guidance, but they were also dealing with unprecedented claims volume. Louisiana officials stated they often compare the experience to trying to build and repair a plane in mid-flight.

Michigan

Michigan officials stated the SWA faced an unprecedented volume of claims activity without the commensurate level of resources to properly process the claims. In addition, agency officials stated an ETA system error prevented the state from initially being able to file the reports for FPUC for periods from September 2021 forward because the federal system did not accept large numeric amounts. Specifically, for FPUC activity on PUA claim types, Michigan officials stated the values created fatal errors in their system that could not be overridden. According to Michigan officials, they informed ETA of the system error in late 2021 and the error was not resolved until September 5, 2023. The agency officials stated, once the error was resolved, the SWA was able to file ETA-required reports.

Mississippi

Mississippi officials stated the SWA's IT system was not programmed to report FPUC fraudulent overpayments until July 2020. For PUA fraudulent overpayments, April 2020 marked the beginning of the PUA program implementation. We did not identify Mississippi's reporting of zero PUA fraudulent overpayments in April 2020 as an exception because fraudulent overpayments are reported in the month detected rather than in the month the payments are made. Therefore, any PUA benefits paid in April 2020 would have been established and reported as fraudulent overpayments in later months.

New Mexico

New Mexico officials stated IT system limitations prevented its fraudulent overpayment reporting functions. According to New Mexico SWA officials, the reporting functionality was not implemented until late June or early July 2020.

Vermont

Vermont officials stated IT system limitations prevented reporting functions. According to Vermont SWA officials, the reporting functionality is being developed and they anticipate completion by the end of June 2025.

Wisconsin

Wisconsin reported zero PUA fraudulent overpayments because, according to SWA officials, the reporting change instructions in UIPL No. 16-20, Change 6, required SWAs to segregate identity fraud overpayments from other fraudulent overpayments on the ETA 902P reports. Wisconsin SWA officials stated the reporting change required restatement of PUA fraudulent overpayments in the SWA's IT system, which was completed on June 28, 2024. Wisconsin officials stated the SWA reported zero PEUC fraudulent overpayments because the SWA did not implement PEUC until late in the quarter ending June 30, 2020.

State Finality Laws May Restrict SWAs' Ability to Establish and Report Overpayments

The 10 SWAs reviewed were taking ongoing corrective actions to comply with fraudulent overpayment reporting requirements. However, many states have unemployment compensation laws, or finality laws, that limit the length of time during which they may reconsider a prior determination on a regular UI claim, thus establishing and reporting overpayments. In December 2023, ETA issued

UIPL No. 05-24,³² which authorized SWAs to apply state finality laws to CARES Act-funded UI benefits.

We are concerned that, by applying state finality laws to the pandemic-funded UI claims, states will not have an incentive to identify overpayments and fraud. The states already have backlogs of UI claims to review for establishment and reporting of fraudulent overpayments. If the period for reconsideration of those claims in the state's finality law has elapsed, the SWA may no longer review the claim to determine if the disbursement was proper or an overpayment, including a fraudulent overpayment, was made.

CONCLUSION

The OIG has estimated at least \$191 billion (22 percent) of \$888 billion in pandemic UI benefits could have been paid improperly, with a significant portion attributable to fraud. We acknowledge ETA demonstrated a responsibility toward improving UI program integrity by: (1) transmitting the OIG's list of potentially fraudulent claimants³³ to states, along with instructions and specific requirements for conducting investigations and due process and (2) developing a UI Fraud Risk Profile based on risks reported by the OIG and recommendations made by GAO.

While these actions served to guard against fraud in the UI program, SWAs could benefit from more direction and assistance from ETA to identify and address suspected fraudulent activity. This is even more critical when federal funds are at stake—such as with the key UI programs authorized by the CARES Act that provided an unprecedented level of funding and thus created an increased risk of UI program fraud and abuse. ETA needs to take a leading role in collecting UI claimant data from states, performing risk assessments, and identifying high-risk areas. This would allow the agency to be better positioned to effectively assist states with developing response activities to address ever-evolving fraud risks that threaten the integrity of the UI program.

³² UIPL No. 05-24, Application of State Finality Laws Regarding Temporary Unemployment Compensation (UC) Programs under the Coronavirus Aid, Relief, and Economic Security (CARES) Act (December 29, 2023)

³³ Potentially fraudulent claimants refers to the SSNs associated with potentially fraudulent UI claims.

RECOMMENDATIONS

We did not make any new recommendations in this report. To address the issues identified in this report and improve ETA's oversight of states' efforts to identify fraudulent UI claims, another OIG contractor (Regis & Associates, PC) made Recommendations 1 and 3 to ETA in the series' first report, titled COVID-19: ETA Needs to Improve Its Oversight of States' Efforts to Identify Multistate UI Fraud.³⁴

Analysis of ETA's Comments

In response to the draft of this report, ETA expressed concerns regarding our report's finding. We carefully reviewed ETA's response in full. Our report was accurate as stated; thus, while we made minor clarifying edits to the final report, the agency's response did not result in any material changes to our reported results or conclusions. Synopses of ETA's key comments on our finding along with our corresponding responses follow:

- ETA stated the draft report inaccurately conveyed that, because ETA did not require the SWAs to report the outcome of every investigation regarding each individual claimant contained in the OIG's claimant data, ETA did not generally assess performance regarding UI eligibility determinations. ETA stated it conducted extensive monitoring of states' administration and operation of UI programs as part of its oversight responsibilities. ETA also stated it has established program performance measures to assess the timeliness and quality of SWAs' adjudications of UI claims. Specifically, ETA stated it analyzed states' aggregate data on the timeliness and quality of UI eligibility determinations and oversaw quality reviews of adjudication determinations.

ETA disagreed with the draft report's assertion that ETA's decision not to monitor the results of SWAs' research and investigations of the referred potentially fraudulent claims was inconsistent with its collaborative position expressed to the OIG. ETA asserted it never discussed with the OIG nor committed to following up with each SWA on their investigations of every claim included in the OIG's claimant data, as this was not ETA's intent.

Further, ETA stated it had limited statutory authority to require states to use certain fraud prevention tools such as IDH, but would continue to

³⁴ COVID-19: ETA Needs to Improve Its Oversight Of States' Efforts to Identify Multistate UI Fraud, Report No. 19-25-004-03-315 (August 4, 2025), available at: <https://www.oig.dol.gov/public/reports/oa/2025/19-25-004-03-315.pdf>

explore additional opportunities, including, but not limited to, seeking Congressional action. ETA requested OIG's ongoing support in this endeavor and welcomed more discussions with the OIG regarding specific strategies and actions to strengthen the UI system and further bolster fraud prevention in the program.

- We disagree that the draft report concluded ETA did not assess performance regarding UI eligibility determinations. In the draft report, we stated that, without knowledge of the states' investigative results, ETA's ability to assess UI program performance is impaired. Further, in ETA's transmission of the OIG's claimant data to the states, it informed the SWAs that it was committed to working with states to combat the sophisticated imposter fraud impacting the UI system. The transmission of claimant data with investigative instructions alone was insufficient. ETA's monitoring of the SWAs' investigative results was necessary to confirm the extent to which fraud existed in the high-risk areas identified by the OIG.

The agency's response to the draft report is included in its entirety in Appendix B. We appreciate the cooperation and courtesies ETA extended to us during this audit.



Beatrice Key
Key & Associates, P.C.
Silver Spring, MD
August 15, 2025

EXHIBIT: TESTING RESULTS, FRAUDULENT AND NONFRAUDULENT PAYMENTS FOR THE 10 SWAS

**Table 1: Fraudulent and Nonfraudulent Payment Breakdown of Claimants
Using Deceased Persons' SSNs for the 10 SWAs**

State	Total Claimants Sampled	Total Benefit Payments	Number of Nonfraudulent Claimants ³⁵	Nonfraudulent Amounts Paid	Number of Fraudulent Claimants ³⁶	Fraudulent Amounts Paid
Alaska	10	\$43,339	3	\$43,339	7	\$0
Indiana	13	\$30,697	1	\$4,643	12	\$26,054
Kentucky	10	\$8,856	0	\$0	10	\$8,856
Louisiana	53	\$142,953	5	\$75,209	48	\$67,744
Michigan	49	\$143,324	1	\$21,174	48	\$122,150
Mississippi	10	\$50,410	1	\$2,824	9	\$47,586
Missouri	10	\$38,962	6	\$38,962	4	\$0
New Mexico	10	\$14,763	0	\$0	10	\$14,763
Vermont	10	\$56,357	6	\$40,824	4	\$15,533
Wisconsin	10	\$57,121	5	\$57,121	5	\$0
Totals	185	\$586,782	28	\$284,096	157	\$302,686

Source: Key analysis based on SWAs' responses to questionnaires

³⁵ Nonfraudulent claimants refers to the sampled SSNs that the SWAs determined were not associated with fraudulent UI claims.

³⁶ Fraudulent claimants refers to the sampled SSNs that the SWAs determined were associated with fraudulent UI claims.

Table 2: Fraudulent Payment Breakdown of Deceased Claimants and Other Fraudulent Reasons³⁷ for the 10 SWAs

State	Number of Fraudulent Claimants ³⁸	Fraudulent Amounts Paid	Number of Deceased Claimants	Total Paid to Deceased Claimants	Number of Claimants with Other Reasons	Total Paid to Claimants with Other Reasons
Alaska	7	\$0	0	\$0	7	\$0
Indiana	12	\$26,054	4	\$26,054	8	\$0
Kentucky	10	\$8,856	0	\$0	10	\$8,856
Louisiana	48	\$67,744	8	\$28,944	40	\$38,800
Michigan	48	\$122,150	10	\$75,950	38	\$46,200
Mississippi	9	\$47,586	0	\$0	9	\$47,586
Missouri	4	\$0	2	\$0	2	\$0
New Mexico	10	\$14,763	7	\$0	3	\$14,763
Vermont	4	\$15,533	0	\$0	4	\$15,533
Wisconsin	5	\$0	4	\$0	1	\$0
Totals	157	\$302,686	35	\$130,948	122	\$171,738

Source: Key analysis based on SWAs' responses to questionnaires

³⁷ Other fraudulent reasons include identity fraud and bank account fraud.³⁸ Fraudulent claimants refers to the sampled SSN that the SWAs determined were associated with fraudulent UI claims.

APPENDIX A: SCOPE AND METHODOLOGY

Scope

The audit covered the actions taken by ETA and SWAs from April 7, 2021, through September 15, 2022, to address OIG-identified, potentially fraudulent CARES Act UI claims filed from March 2020 through October 2020 using deceased persons' SSNs. To ensure currency and relevance, we also reviewed updated ETA guidance and UI payment reporting activities that extended outside of the audit period.

Methodology

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We obtained and reviewed the CARES Act and SWAs' policies and procedures related to the UI claims process, establishment and recovery of overpayments, and identification of fraudulent or nonfraudulent payments. We submitted process review and internal control questionnaires to the 10 SWAs to gain an understanding of the SWAs' internal control tools used to investigate potentially fraudulent claimants. We also conducted walkthroughs to gain a better understanding of SWAs' internal controls considered significant to the audit objective.

Additionally, we obtained and reviewed ETA's UIPLs and guidance provided to the states on investigations of the potentially fraudulent claims filed using deceased persons' SSNs that the OIG identified. Furthermore, we submitted detailed testing questionnaires to the 10 SWAs for each of the selected 185 UI claimants. We used the questionnaires to determine the SWAs' actions to address the OIG-identified, potentially fraudulent CARES Act UI claims filed using deceased persons' SSNs. Based on each SWA's response, we categorized the claims as having been determined by the state to be either fraudulent or nonfraudulent. We also separated fraudulent claims attributable to the claimants who filed using deceased persons' SSNs from fraudulent claims for other reasons.

Selection of SWAs

We conducted an in-depth examination of 10 OIG-selected SWAs—Alaska, Indiana, Kentucky, Louisiana, Michigan, Mississippi, Missouri, New Mexico, Vermont, and Wisconsin. The OIG selected this sample based on the highest per capita benefits paid. The OIG calculated per capita benefits using the number of claimants flagged for filing claims using deceased persons' SSNs and the benefit amounts paid against these claims. The OIG then ranked the SWAs by the per capita amount, largest to smallest, and selected the top 10 SWAs. The OIG also controlled for repetition of SWAs within other high-risk areas. Therefore, the OIG did not select the same SWAs if they appeared in a higher-ranked risk area, resulting in the selection of 10 different SWAs for each of the four high-risk audits. The OIG ranked the high-risk areas from highest to lowest: multistate claimants, deceased persons' SSNs, suspicious email accounts, and federal prisoners' SSNs. In addition, we surveyed the remaining 43 SWAs and Guam³⁹ to obtain information on processes related to investigating and reporting results of the fraudulent UI claims filed using deceased persons' SSNs.

Data Reliability

We conducted tests to determine the reliability of UI claimant data provided by the SWA related to UI claims filed using deceased persons' SSNs. To assess the reliability of the data, we performed procedures to test for completeness, accuracy, consistency, and validity. This included corroborating the claimant data against the SWAs' UI systems records, including evidence of payment and other evidence provided by the SWAs. The supporting evidence was used to confirm whether the claims were paid, the determination made on whether a claim was fraudulent or nonfraudulent, and the status of any ongoing fraud investigation, et cetera.

We also provided the SWAs with questionnaires to provide responses related to each of the selected claimants. We then reviewed the responses to ensure they were consistent with the supporting documentation. When necessary, we held meetings and requested additional documentation to substantiate the validity of the claimant data and responses provided.

Internal Controls

We obtained an understanding of internal controls considered significant to the audit objective when testing compliance with significant laws, regulations, and other requirements. We confirmed our understanding of these controls through reviews of policies and procedures, interviews, and analyses of documentation. Our consideration of internal controls for SWAs to address the risks associated

³⁹ We sent out surveys to 43 SWAs and Guam. We excluded the 10 SWAs subject to in-depth examination. Of the 43 SWAs and Guam surveyed, 28 SWAs (64 percent) responded.

with fraudulent claims filed using deceased persons' SSNs would not necessarily disclose all matters that might be reportable conditions.

Sampling

We used sampling in this audit to evaluate ETA's and SWAs' efforts to address potentially fraudulent UI claims filed using deceased persons' SSNs. We extracted a random stratified sample of claimants from the selected SWAs to determine whether corrective actions were taken. We determined the sample size using statistical sampling that factored a desired precision of 5 percent, a confidence level of 95 percent, and an expected error rate of 10 percent to select sample claimants from the population. Per statistical sample size standards, we used 10 as the sample size for states with a calculated sample size less than 10.

Criteria

- Coronavirus Aid, Relief, and Economic Security Act, Public Law 116-136 (March 27, 2020)
- Continued Assistance for Unemployed Workers Act of 2020, Subchapter VI, Section 261, Mixed Earner Unemployment Compensation (December 27, 2020)
- American Rescue Plan Act of 2021, including Title IX, Subtitle A, Crisis Support for Unemployed Workers, Public Law 117-2 (March 11, 2021)
- GAO-14-704G, Standards for Internal Control in the Federal Government (September 2014)
- GAO-15-593SP, A Framework for Managing Fraud Risks in Federal Programs, (July 2015)
- GAO-22-105051, COVID-19: Additional Actions Needed to Improve Accountability and Program Effectiveness of Federal Response (October 27, 2021)
- UIPL No. 15-20, Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020—Federal Pandemic Unemployment Compensation (FPUC) Program Operating, Financial, and Reporting Instructions (April 4, 2020)
- UIPL No. 16-20, Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020—Pandemic Unemployment Assistance (PUA) Program Operating, Financial, and Reporting Instructions (April 5, 2020)
- UIPL No. 17-20, Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020—Pandemic Emergency Unemployment Compensation (PEUC) Program Operating, Financial, and Reporting Instructions (April 10, 2020)

- UIPL No. 23-20, Program Integrity for the Unemployment Insurance (UI) Program and the UI Programs Authorized by the Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020 - Federal Pandemic Unemployment Compensation (FPUC), Pandemic Unemployment Assistance (PUA), and Pandemic Emergency Unemployment Compensation (PEUC) Programs (May 11, 2020))
- UIPL No. 05-24, Application of State Finality Laws Regarding Temporary Unemployment Compensation (UC) Programs under the Coronavirus Aid, Relief, and Economic Security (CARES) Act (December 29, 2023)
- Training and Employment Notice No. 28-23, Announcement of a New Data Sharing Partnership Between the U.S. Department of Treasury's (Treasury) Bureau of the Fiscal Service (Fiscal Service) and the National Association of State Workforce Agencies' (NASWA) Unemployment Insurance (UI) Integrity Center to provide State UI Agencies Access to Do Not Pay Working System (DNP) Data Sources and Services through the UI Integrity Data Hub (IDH) (May 2, 2024)
- Training and Employment Notice No. 32-23, Unemployment Insurance (UI) Fraud Risk Management Resources (June 27, 2024)

Prior Relevant Coverage

During the last 4 years, the OIG has issued 9 reports of significant relevance to the subject of this report, as follows:

1. Alert Memorandum: The Employment and Training Administration Needs to Ensure State Workforce Agencies Implement Effective Unemployment Insurance Program Fraud Controls for High-Risk Areas, Report No. 19-21-002-03-315 (February 22, 2021), available at: <https://www.oig.dol.gov/public/reports/oa/2021/19-21-002-03-315.pdf>;
2. COVID-19: States Struggled to Implement CARES Act Unemployment Insurance Programs, Report No. 19-21-004-03-315 (May 28, 2021), available at: <https://www.oig.dol.gov/public/reports/oa/2021/19-21-004-03-315.pdf>;
3. Alert Memorandum: The Employment and Training Administration Needs to Issue Guidance to Ensure State Workforce Agencies Provide Requested Unemployment Insurance Data to the Office of Inspector General, Report No. 19-21-005-03-315 (June 16, 2021), available at: <https://www.oig.dol.gov/public/reports/oa/2021/19-21-005-03-315.pdf>;
4. Alert Memorandum: The Employment and Training Administration Needs to Ensure States Workforce Agencies Report Activities Related to CARES Act Unemployment Insurance Programs,

- Report No. 19-22-004-03-315 (August 2, 2022), available at:
<https://www.oig.dol.gov/public/reports/oa/2022/19-22-004-03-315.pdf>;
5. Alert Memorandum: Potentially Fraudulent Unemployment Insurance Payments in High-Risk Areas Increased to \$45.6 Billion, Report No. 19-22-005-03-315 (September 21, 2022), available at <https://www.oig.dol.gov/public/reports/oa/2022/19-22-005-03-315.pdf>;
 6. COVID-19: ETA and States Did Not Protect Pandemic-Related UI Funds from Improper Payments Including Fraud or from Payment Delays, Report No. 19-22-006-03-315 (September 30, 2022), available at: <https://www.oig.dol.gov/public/reports/oa/2022/19-22-006-03-315.pdf>;
 7. COVID-19 – ETA Can Improve its Oversight to Ensure Integrity over CARES Act UI Programs, Report No. 19-23-011-03-315 (September 22, 2023), available at: <https://www.oig.dol.gov/public/reports/oa/2023/19-23-011-03-315.pdf>;
 8. Alert Memorandum: ETA Needs to Incorporate Data Analytics Capability to Improve Oversight of the Unemployment Insurance Program, Report No. 19-23-012-03-315 (September 25, 2023), available at: <https://www.oig.dol.gov/public/reports/oa/2023/19-23-012-03-315.pdf>; and
 9. COVID-19: ETA Needs to Improve Its Oversight Of States' Efforts to Identify Multistate UI Fraud, Report No. 19-25-004-03-315 (August 4, 2025), available at: <https://www.oig.dol.gov/public/reports/oa/2025/19-25-004-03-315.pdf>.


APPENDIX B: AGENCY'S RESPONSE TO THE REPORT

The agency's response to the draft report follows.



July 23, 2025

MEMORANDUM FOR: LAURA B. NICOLosi
Assistant Inspector General for Audit

FROM: LORI FRAZIER BEARDEN 
Acting Assistant Secretary for Employment and Training

SUBJECT: Response to Draft Report – *COVID-19: ETA Needs to Improve Its Oversight of States' Efforts to Identify UI Fraud Using Deceased Persons' Social Security Numbers*, Report No. 19-25-XXX-03-315

The U.S. Department of Labor's (Department) Employment and Training Administration (ETA) appreciates the opportunity to respond to the above-referenced draft report.

This draft report examined the extent to which ETA and State Workforce Agencies (SWA) addressed potentially fraudulent Coronavirus Aid, Relief, and Economic Security Act claims filed using the Social Security Numbers (SSN) of deceased persons. The draft report does not make any new recommendations.

ETA acknowledges that continued work is needed to reduce fraud, waste, and abuse in the unemployment insurance (UI) program. To this end, ETA has invested in the UI Integrity Center's Integrity Data Hub (IDH) and dedicated resources to make significant progress, incorporating additional data sources and working with the UI Integrity Center and states to re-evaluate risk scoring investigation prioritization. Most recently, the Department provided funding to support IDH access and use of the U.S. Department of the Treasury's Do Not Pay data sources, enhancing the IDH's operations and strengthening UI program integrity controls (*see* Training and Employment Notices [TEN] No. 28-23¹ and 26-24²).

ETA would like to clarify a few areas in the draft report:

- The draft report acknowledges on page 6 that ETA provided the Office of Inspector General (OIG) files containing potentially fraudulent claims using deceased persons' SSNs to SWAs. ETA agreed to share the OIG-analyzed claims data with the states as potential fraud tips for the SWAs to conduct additional appropriate investigations and actions regarding these claims. As noted by the OIG, ETA did not require states to report the results of their

¹ TEN No. 28-23, *Announcement of a New Data Sharing Partnership Between the U.S. Department of the Treasury's (Treasury) Bureau of the Fiscal Service (Fiscal Service) and the National Association of State Workforce Agencies' (NASWA) Unemployment Insurance (UI) Integrity Center to provide State UI Agencies Access to Do Not Pay Working System (DNP) Data Sources and Services through the UI Integrity Data Hub (IDH)*, issued May 2, 2024, <https://www.dol.gov/agencies/eta/advisories/ten-28-23>.

² TEN No. 26-24, *Announcing the Addition of New Do Not Pay (DNP) Data Sources and Services Accessible to State Unemployment Insurance (UI) Agencies through the UI Integrity Data Hub (IDH) and Upcoming Webinar*, issued May 20, 2025, <https://www.dol.gov/agencies/eta/advisories/ten-26-24>.

investigations and actions regarding each individual claim contained in the OIG files. However, the draft report inaccurately conveys that because ETA didn't require states to report the outcome of every investigation, ETA does not, in general, assess performance regarding UI eligibility determinations. ETA has established UI performance measures in place to assess the timeliness and quality of adjudications made by SWAs. ETA also conducts extensive monitoring of states' administration and operation of UI programs as part of its regular oversight responsibilities. In addition to monitoring, ETA analyzes aggregate data from states on the timeliness and quality of UI eligibility determinations and oversees quality reviews of adjudication determinations.

The draft report also asserts on page 10 that ETA's decision to not monitor the results of SWAs' investigations and actions of the referred potentially fraudulent claims was inconsistent with its collaborative position expressed to the OIG. However, ETA did not discuss, nor commit to the OIG that it would follow up with each state regarding its investigations/actions on every potentially fraudulent claim in the OIG files. This was not the intent when ETA agreed to share the OIG-analyzed claims data with states. When the OIG's contractor initially engaged with ETA on this audit in September 2022, it provided that "The scope of the audit will focus in-depth on actions taken by ETA and 10 selected SWAs to address potentially fraudulent CARES Act UI claims." This was further reiterated in a questionnaire sent to states in December 2022, asking what actions the SWA had taken to address such claims. ETA had expected that this audit would have explored whether the states had previously identified these claims as potentially fraudulent and had addressed them, or if such flags from the OIG resulted in identification of new actual overpayments.

- On page 7, the draft report notes that ETA transmitted information to "53 SWAs and Guam" and then refers to these collectively as "54 UI agencies." ETA notes that Guam does not operate a UI program and is not considered a "UI agency." Its inclusion in the list of files transmitted from the OIG is likely in relation to their participation in the now-expired pandemic-related unemployment compensation programs.
- On page 12, the draft report paraphrases and attributes comments to the Department's Office of the Chief Financial Officer (OCFO) on challenges to mitigating risks. ETA discussed these comments with OCFO. OCFO agrees that "varying state laws that define fraud" is a recognized structural challenge. However, the statement "SWAs' inconsistent use of the IDH" is unclear – the statement would be more accurate if it conveyed, "the 53 different state governments' statutory authority to use, or not use, the many services offered through the Integrity Center and IDH presents numerous challenges." Additionally, OCFO does not recognize the statement in the draft report that OCFO identified "irregular reporting of UI claims data for cross-matching" as a challenge. Whether due to misunderstanding or over paraphrasing, absent clarification, OCFO has informed ETA that it cannot confirm that this was stated.

Combating fraud is a high priority for this Administration. As noted on page 16 in the draft report, ETA has completed an initial study to identify additional opportunities for improving the IDH. ETA has limited statutory authority to require states' use of certain fraud prevention tools, such as the IDH, and will continue efforts to explore additional opportunities, including, but not limited to, seeking Congressional action.

ETA requests the OIG's ongoing support to help move things in a positive direction and welcomes further discussion with the OIG regarding specific strategies and actions to strengthen the UI system and to further bolster fraud prevention in the program. ETA will also take action to address the recommendations included in the first report in this series, *COVID-19: ETA Needs to Improve Its Oversight of States' Efforts to Identify Multistate UI Fraud*.

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