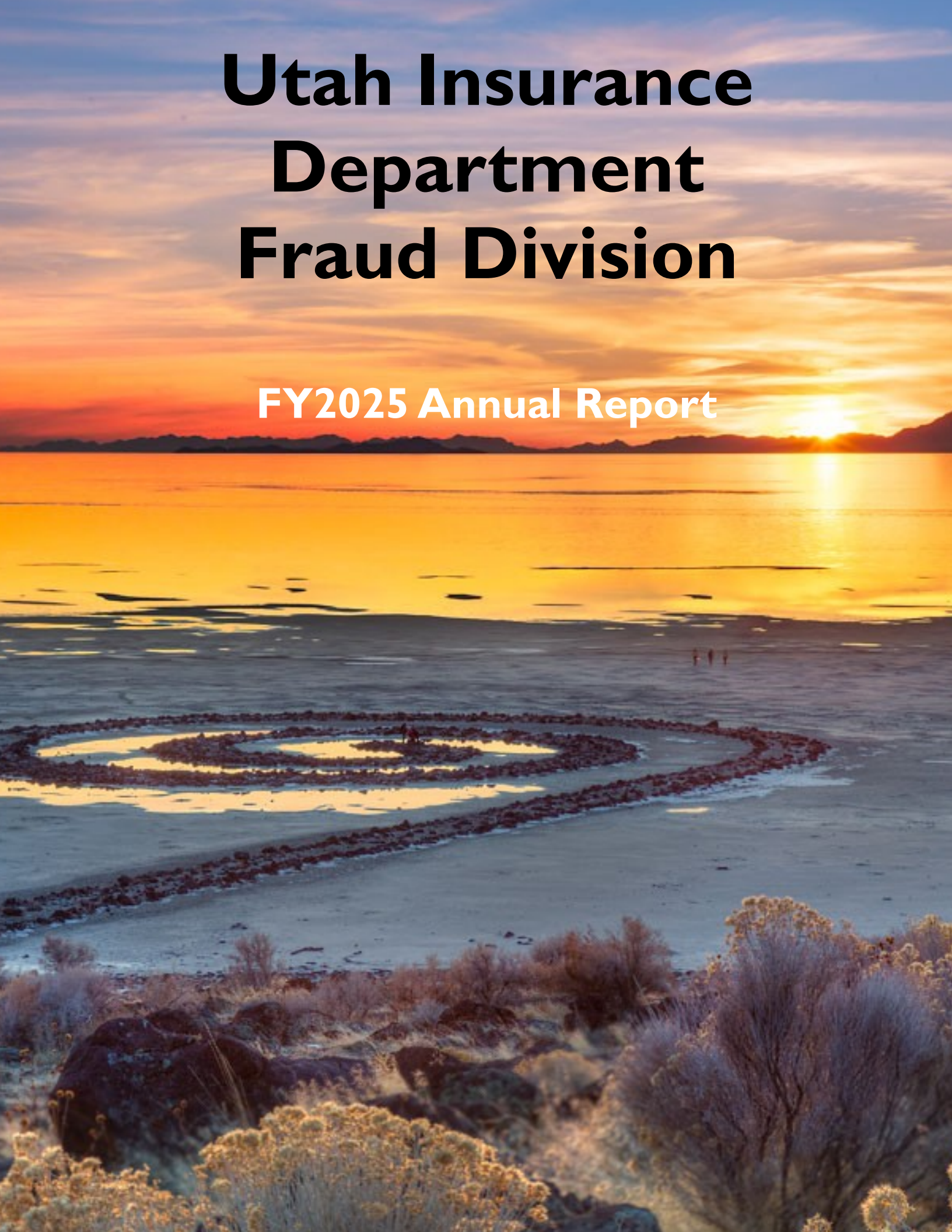


Utah Insurance Department Fraud Division

FY2025 Annual Report





MISSION STATEMENT

The Insurance Fraud Division acts as the primary law enforcement agency in the State of Utah for investigating suspected fraudulent insurance claims. The core mission of the Insurance Fraud Division is to protect the public from economic loss and distress. We do this by actively investigating, prosecuting and seeking restitution from those who commit insurance fraud. We further seek to deter insurance fraud through active public awareness education.

Insurance Commissioner:
Jonathan T. Pike

Fraud Division Director:
Armand A. Glick

Fraud Director's Message

The enclosed annual report provides an informative look at the efforts, accomplishments, and challenges of the Utah Insurance Department Fraud Division (IFD) for Fiscal Year 2025 (FY2025).

I am very proud of the efforts of the IFD and feel we have one of the most effective and successful insurance fraud investigative units in the nation. I am also proud of the continued collaboration and working relationship between the fraud division, insurance company special investigative units, local and federal law enforcement, the National Insurance Crime Bureau, and the Coalition Against Insurance Fraud. Collaboration with these partners is crucial for our overall success.

The IFD is not funded through taxpayer funds; instead, funding primarily comes through assessment to insurers who operate in the State of Utah. The fraud assessment is based on total premium sold in the prior year by each company. There are nearly 1,600 companies licensed to sell insurance in the State. The IFD's annual budget is approximately \$3,500,000.

In addition to the fraud assessment, the IFD is authorized by state statute to recover the costs of our investigations from the defendants we prosecute.

Unfortunately, insurance fraud continues to be a crime that is accepted by many as a way to make financial gain. Many feel that insurance companies are just big businesses and that lying on a claim is okay since they have been paying for their insurance for years without ever filing a claim. Others simply look to insurance as an easy target for their criminal activities.

Insurance fraud is a major crime that imposes significant financial and personal costs on individuals, businesses, government and society as a whole. It is estimated that each household pays \$400—\$700 per year in increased (non-health) insurance premiums due to insurance fraud. It is a crime that affects us all. (FBI—Insurance Fraud 03/07/2010)

It is the goal of the IFD to aggressively investigate and prosecute offenders in an effort to reduce the cost of insurance fraud in the State of Utah to our citizens. We also strive to increase public awareness of insurance fraud and how it detrimentally affects our economy.

More than \$45 billion in fraudulent property/casualty claims are made annually in the United States. Estimates for health care fraud are around \$105B billion. (Coalition Against Insurance Fraud—2022)

The continued support for the IFD will allow Utah to remain a national leader in the field of insurance fraud investigations.

Sincerely,
Armand A. Glick
Director, Insurance Fraud Division
Utah Insurance Department

Insurance Department - Overview

The Utah Insurance Department (UID) is the state regulatory authority for the insurance industry and is responsible for enforcing all insurance-related laws of the State of Utah.

The mission of the UID is to foster a healthy insurance market by promoting fair and reasonable practices that ensure available, affordable and reliable insurance products and services.

The mission of the UID is accomplished through educating, serving and protecting consumers, governmental agencies, and insurance industry participants at a reasonable cost. We cooperate with and serve state and other governmental agencies in fulfilling these responsibilities.

The UID's fraud division was created in 1996 with the mission of investigating criminal insurance fraud. The IFD investigators are Utah POST certified Law Enforcement Officers.

The IFD works closely with insurance companies investigators, local law enforcement, federal law enforcement, private non-profit organizations such as the National Insurance Crime Bureau (NICB), and state and federal prosecutors to bring both consumer and industry offenders to justice.

Incoming cases, tips, and complaints of possible fraud are received from a variety of sources. Most cases are received through ISO Claim Search and the National Insurance Crime Bureau (NICB), Special Investigative Units (SIU) within the insurance industry, other law enforcement agencies, and citizens.

When a tip or complaint is received, it is always reviewed by the IFD management team to determine whether it merits further investigation. Cases are then assigned to an investigator who pursues all possible leads, conducts interviews, and gathers evidence.

When the investigation is complete, the investigator presents the case to the Utah Attorney General's Office which is contracted to provide dedicated attorneys to prosecute insurance fraud. These attorneys are housed in the same offices with the fraud investigators. This coordinated approach results in greater success in case prosecution and resolution.

What is Insurance Fraud?

Insurance fraud happens when people deceive an insurance company in an effort to collect money they aren't entitled. Insurance fraud is the second most costly white-collar crime in America, behind tax evasion. Insurance industry studies indicate that 10 % or more of property and casualty claims are fraudulent.

In a new study completed this past year, the Coalition Against Insurance Fraud estimates that insurance fraud costs Americans more than \$308.6 billion annually. The Coalition also believes that up to 30% of a policy holder's insurance premium is due to charges added to cover industry losses from insurance fraud.

Coalition Final Estimate of the Cost of Insurance Fraud in the United States:

Property & Casualty	\$45B
Workers' Compensation	\$34B
Premium Avoidance	\$35.1B
Healthcare	\$36.3B
Medicare and Medicaid Fraud	\$68.7B
Life	\$74.7B
Disability	\$7.4B
Auto Theft	\$7.4B

Insurance fraud is typically committed by consumers, insurers, or service providers. A few general examples are as follows:

Consumer Fraud

Adding items to a legitimate theft claim that were not stolen; obtaining insurance after an accident and claiming the accident occurred while insured; abandoning a vehicle and then reporting it stolen; staging an auto accident using a previously damaged vehicle and claiming the damage is all new; exaggerating injuries to receive treatment or compensation; lying about the number of drivers in your home on an application for insurance; creating false receipts to obtain replacement value on the claim; or doctor shopping for narcotics that are not medically necessary.

Insurance Agent Fraud

Agents selling false insurance policies; keeping the policy holder's premium payments and not forwarding them to pay for the policy; or agents fraudulently using personal information belonging to someone else to obtain a better premium quote for the applicant.

Provider Fraud

Health care providers, contractors, and others artificially inflating their billings to insurance; dentists billing for high noble metals while using a lower grade material for a crown; doctors prescribing a treatment that is not medically necessary; or roofers damaging or removing more shingles in order to create enough damage for insurance to cover replacing the entire roof.

Insurance Fraud FAQs (Coalition Against Insurance Fraud)

What isn't fraud?

- Good-faith disagreement between an insurance company and consumer about a claim
- Decisions by an insurer to decline your application or not renew your coverage.

Why is fraud so big?

- Insurance companies are in the business of paying claims. In many instances insurance companies unwittingly encourage fraud by paying suspicious claims too easily. It is cheaper to pay than risk fighting in court or a having a lawsuit for bad faith.
- Insurance fraud is a low-risk, high-reward game. Jail sentences are often light. Professional organizations overseeing doctors and lawyers are reluctant to discipline peers convicted of insurance fraud.
- Consumers tolerate fraud. Too many consumers believe insurance fraud is justified. Two of five Americans want little or no punishment for insurance cheats; they blame the insurance industry for its fraud problems because they believe insurers are unfair.

What are the newest trends?

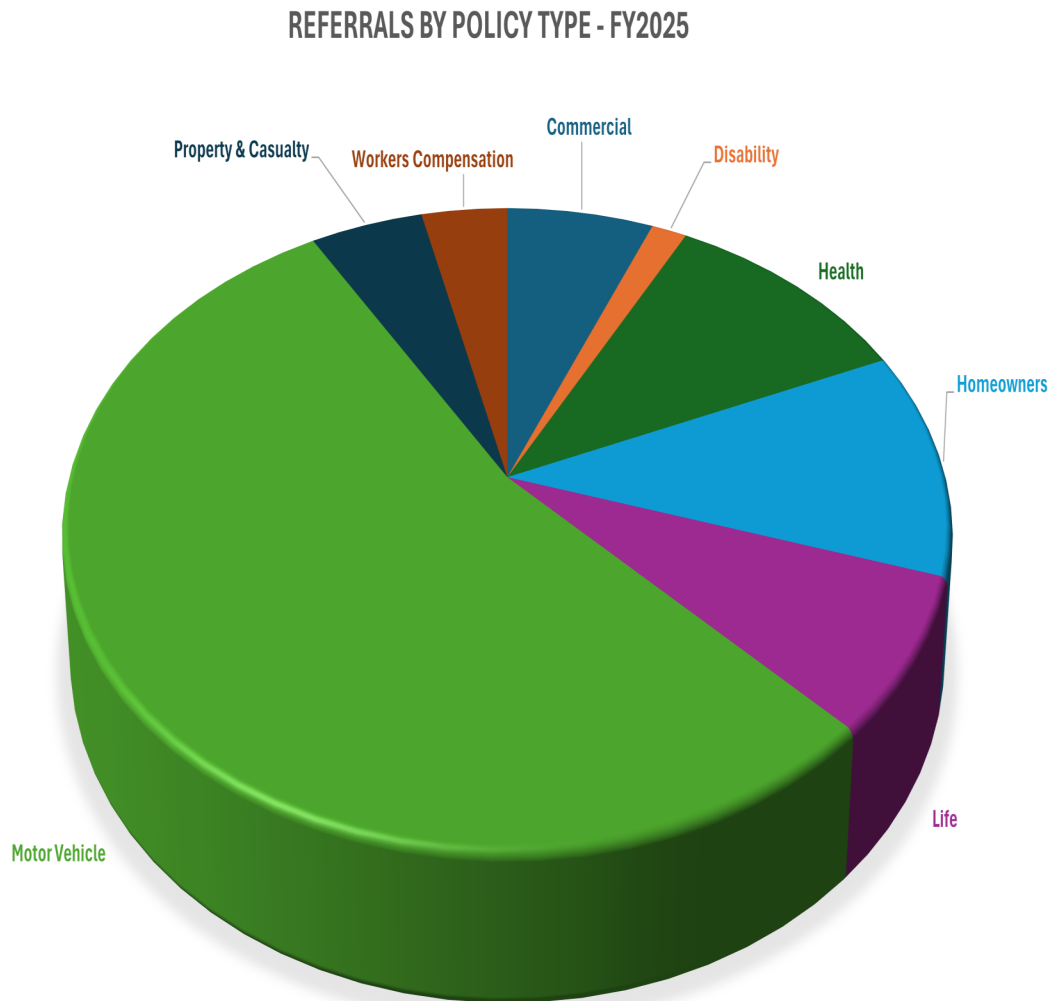
- **Large fraud rings.** Increasingly, organized criminal enterprises are entering insurance fraud. Staged accidents and healthcare fraud rings are especially active and spreading.
- **Funding companies** that fund the costs of medical providers and lawyers in an effort to maximize the claim value of accident injury claims. Funding companies may be profit driven and may not have the best interest of the injured victim in mind. Their goal is to drive the cost of insurance claims upward for the benefit of the funding company, the providers, and lawyers, while the accident victims may be pressured to receive the medical care they may not need.
- **Vulnerable Immigrant populations.** America's large and growing immigrant groups are frequent fraud targets. Con artist prey on immigrants' trust, lack of English skills, and lack of understanding of how insurance works. Fraud rings consisting of these immigrants are also on the rise.
- **Internet schemes.** As consumers increasingly use the internet, swindlers have more opportunities to take money from victims and rout stolen money across international borders; making it nearly impossible to recover.

How can I protect myself.

- Never sign blank insurance forms. Demand detailed bills for repairs and medical services and check closely for accuracy. Be suspicious if the price of insurance seems too low to be true. Be careful of strangers who offer quick cash or urge you to see a specific medical clinic, doctor, or attorney following an accident. Contact the Utah Insurance Department to verify an insurance agent is licensed. Keep your insurance ID protected.

Referrals By Insurance Policy Type

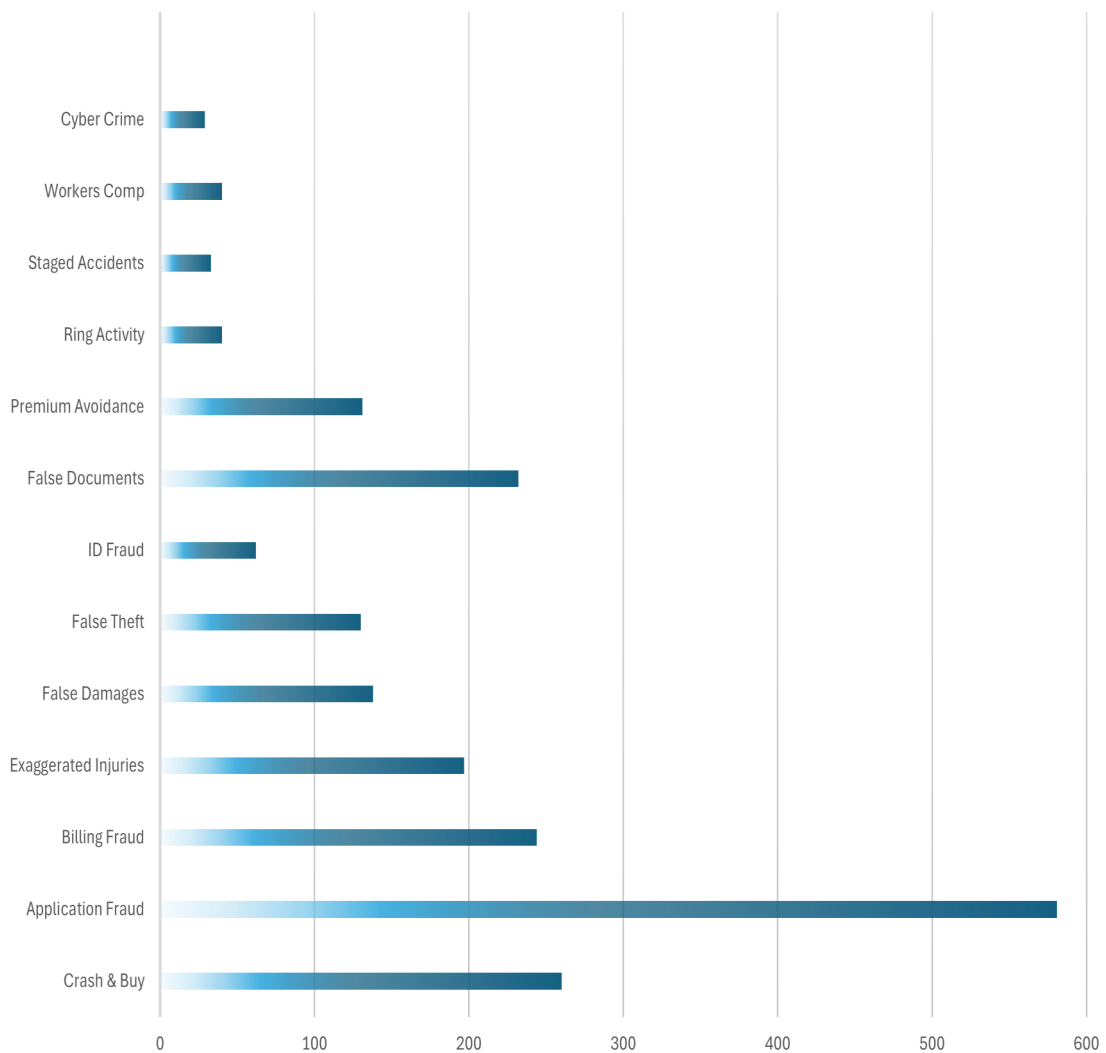
In FY2025, the IFD received 1,693 referrals. This was an increase of over 283 referrals from FY2024. As shown in the pie chart below, the vast majority of referrals come from auto, homeowners, health, and workers compensation insurance companies.



Referrals By Fraud Type

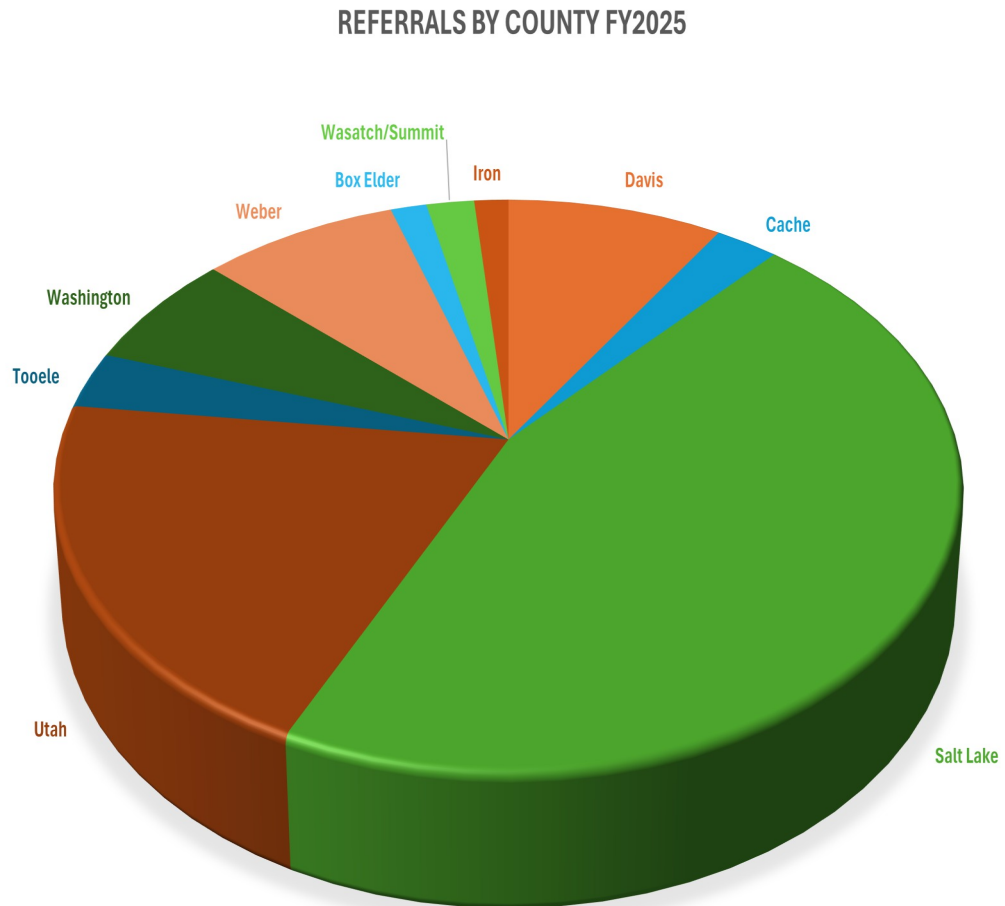
The following chart shows the types of insurance fraud cases reported to the IFD. The most common aspects involved in insurance fraud complaints involve questioned or falsified documents that are submitted in support of a claim. Obtaining insurance after a loss and then filing a false claim that the loss occurred after the insurance was obtained in the next most common. These are followed by trying to claim prior damages in a new loss, inflating claims, fake injuries, medical billing schemes and other false claims. While insurance agent fraud is less common, it is considered more serious and is always a higher priority to investigate.

FRAUD SCHEMES FY2025



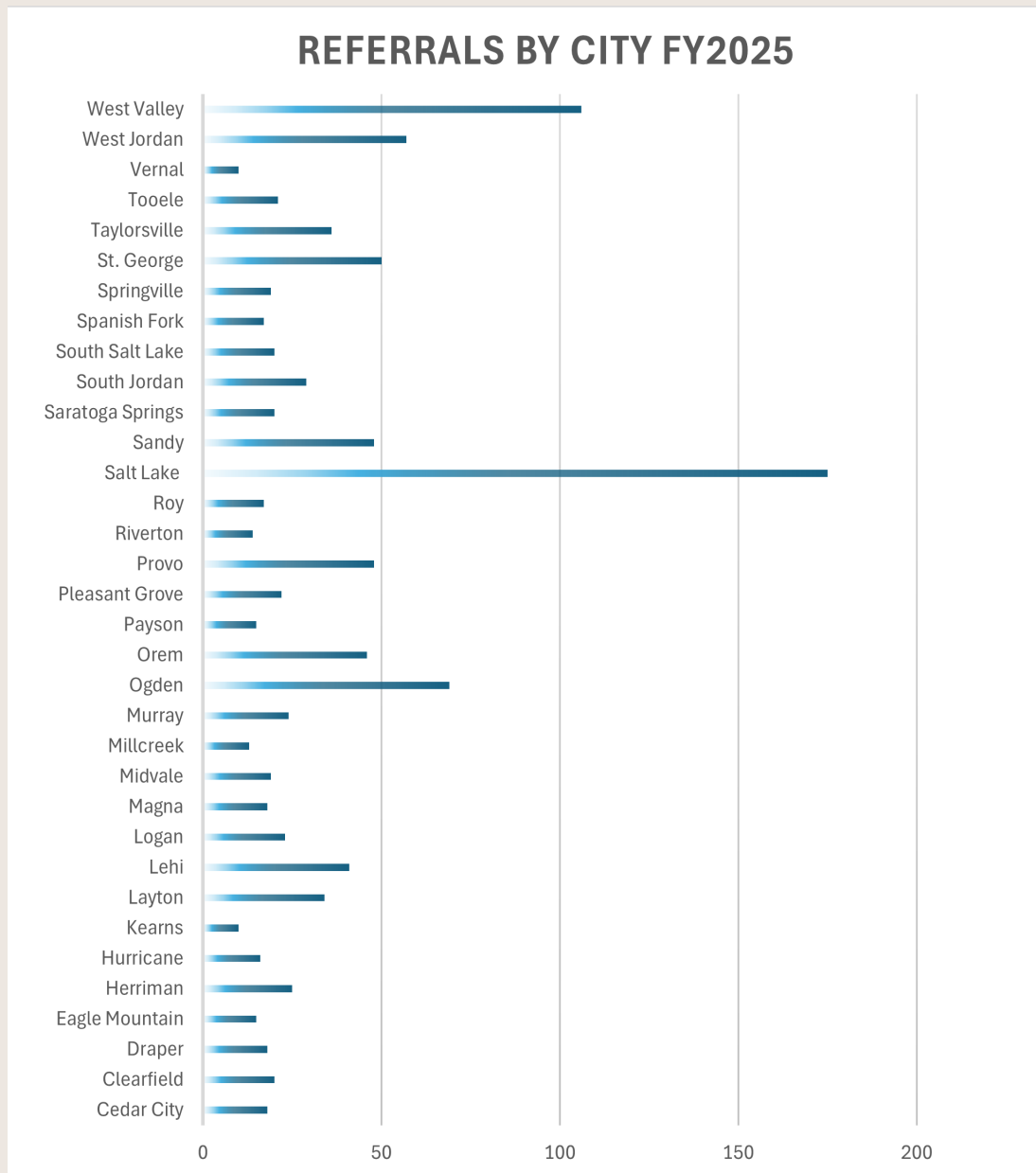
Fraud Referrals by County

The following pie chart represents the occurrence rates of suspected insurance fraud by county. Only those counties with at least 20 reports are shown.



Fraud Referrals by City

The following chart represents the occurrence of referrals for suspected insurance fraud by city. The report is run by City Name rather than Zip Code. Because of this Salt Lake City is represented significantly higher. Although this is true to a great extent, it should also be recognized that many reports by default list SLC as the occurrence location when in actuality, the fraud occurred in the Salt Lake County metropolitan area.



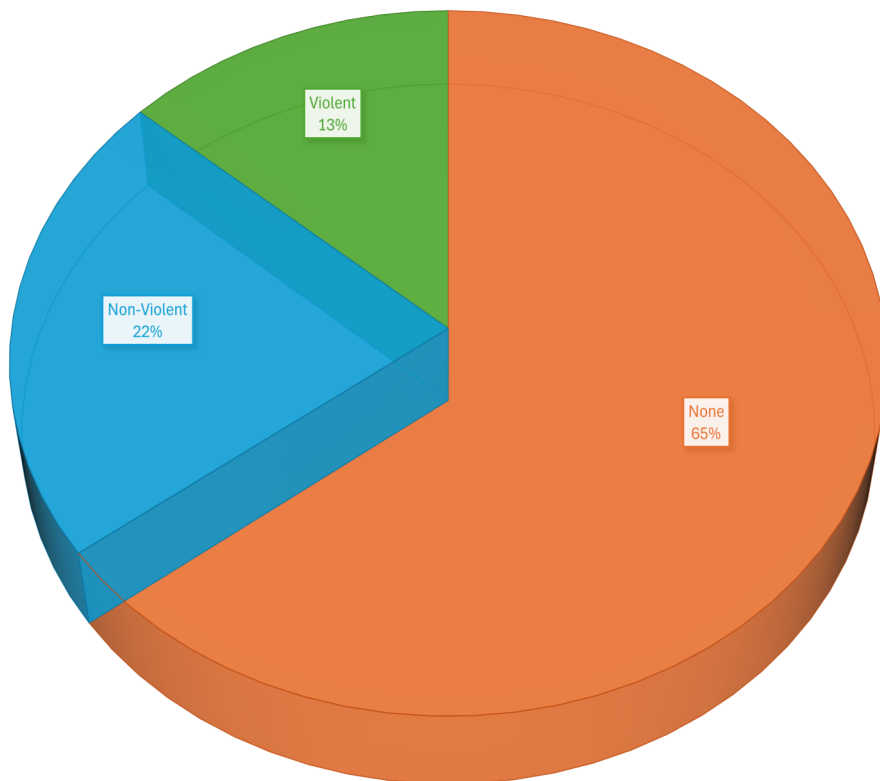
Suspects with Prior Criminal History

In the past, those who commit insurance fraud in Utah were less likely to have a criminal history. While many would never think of committing a crime, they rationalize that lying during an insurance claim is not a crime and justify their actions because they have paid premiums for many years. They felt they were owed more for their claim and because they believed insurance fraud did not hurt anyone, lying is okay.

Today, while a large percentage of those who commit insurance fraud still do not have prior criminal history, the percentage of those who do have criminal history continues to increase each year.

The chart below represents the number of subjects charged with insurance fraud who had prior criminal history. In FY2025: 65% had no criminal history, 22% had non-violent criminal history, while 13% had violent criminal history, meaning they have committed a violent crime against a person.

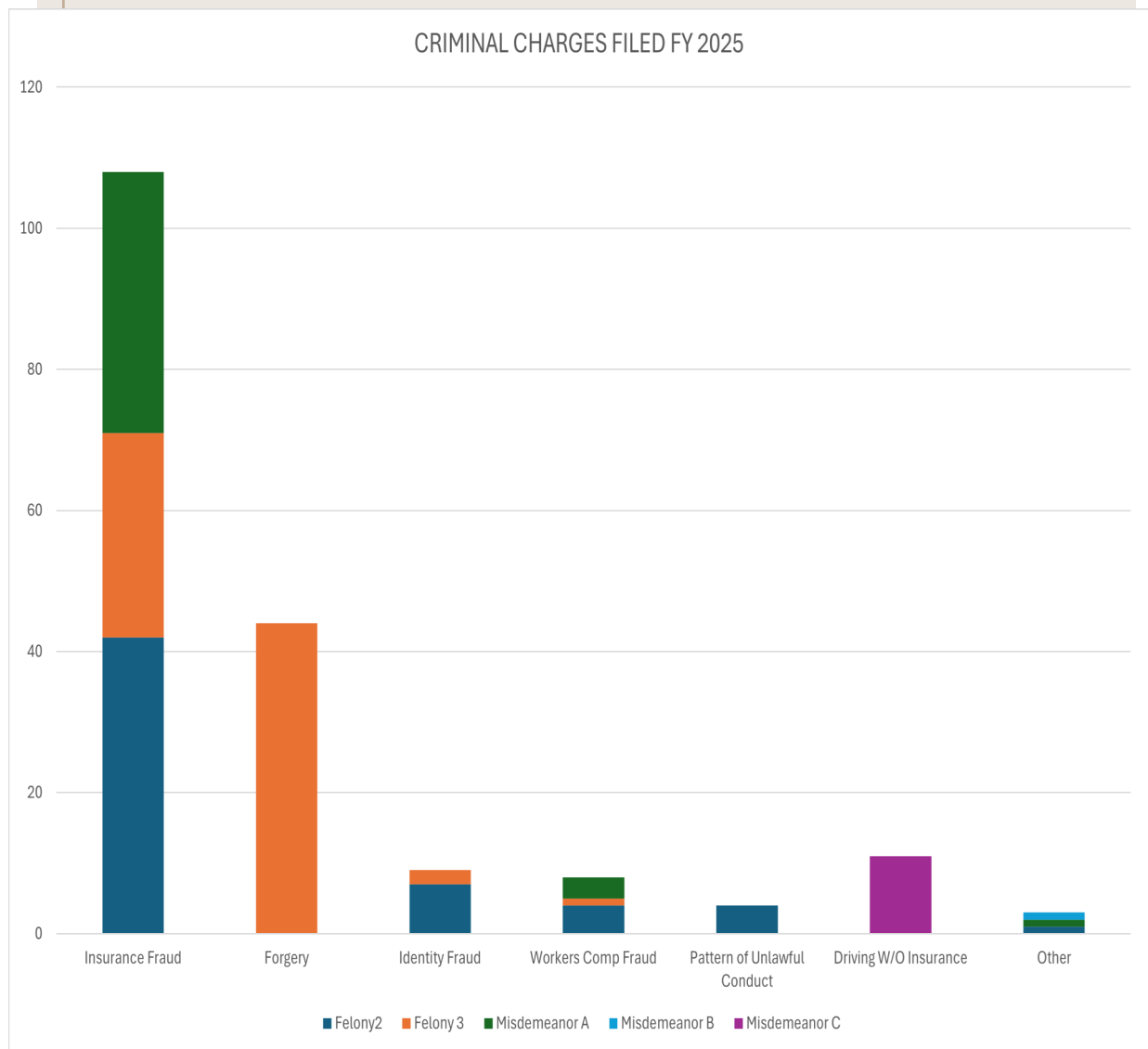
SUBJECT CRIMINAL HISTORY FY2025



Charges Filed Overview

In FY2025, the IFD filed criminal charges against 109 defendants. A total of 187 charges were filed. In most instances defendants were charged with multiple crimes based on the criminal actions they committed.

The most common charges filed in FY2025 are shown in the chart below along with the severity of these charges.



Restitution Collected

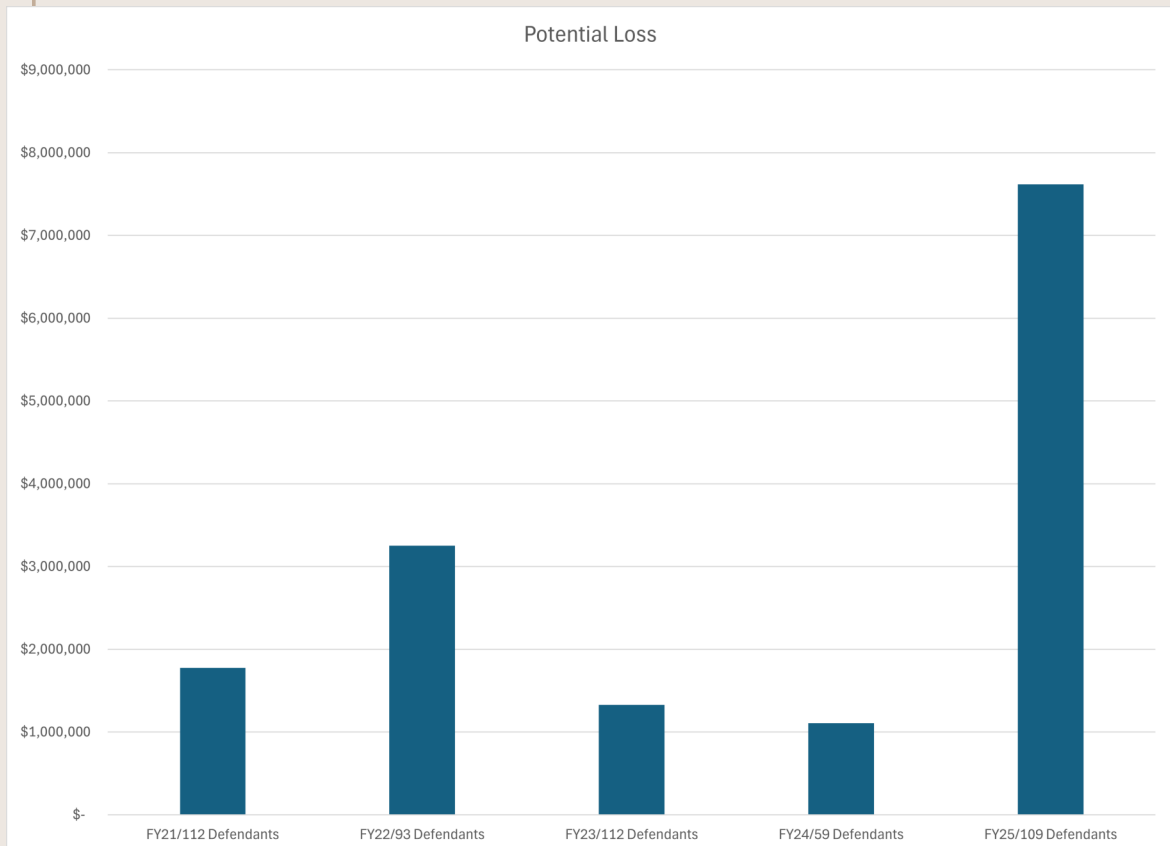
The IFD collects and tracks restitution paid in the cases prosecuted by the division. In 2021 the legislature passed a new law that gave this responsibility to the courts and the office of state debt collection.

With the above information in mind, the IFD continues to collect restitution for past cases where defendants are actively paying their ordered amounts. All new cases are being collected by the courts.

In FY2025 the portion of restitution collected directly by the IFD and distributed to victims of insurance fraud was \$23,116. The amount collected by the courts is no longer tracked by the IFD.

Many cases investigated by the IFD do not involve an actual loss to the insurance company. These fraudulent claims are discovered prior to insurance paying the claim. As of the date of this report, cases sentenced in FY2025 resulted in defendants being ordered to pay back \$254,539 in restitution, \$64,685 in fines, and \$59,095 in investigation expenses.

The potential loss value of the cases where criminal charges were filed was more than \$7,620,559.



New Insurance Fraud Laws - Prohibition on Kickbacks

The past few years, we have seen a significant increase in medical providers and contractors paying people to find and refer potential patients or customers to them for treatment and or repairs.

The Scheme—Medical Providers

- A medical provider pays a runner (a person who recruits patients) a large sum of money for each patient the runner gets to come in for treatments.
- Typically the patient is an auto accident victim and the medical provider will seek to treat the patient to the fullest extent that the auto insurance will cover, regardless of the medical needs of the patient.
- Runners use business cards left in markets, store, or businesses, and may even obtain referrals from unscrupulous insurance agents who also receive a benefit or kickback for providing the information.

The Scheme—Contractors

- A disaster repair contractor enlists individual plumbers to refer potential clients to them for services.
- When a consumer has a water leak, they contact a plumbing company who sends out a plumber to make the repair.
- While the plumber is paid to make the repair by the plumbing company he works for, he has a deal in place that he will be paid more to not make the repair and instead refer the client to the disaster repair contractor who pays the plumber a kickback and enables the disaster repair contractor to inflate the damages and bill insurance much more than the repair should have been.

The Law

UCA 76-10-3201 prohibits kickbacks (violation is a 3rd degree felony).

- A kickback or bribe means a rebate, compensation, or any other form of remuneration that is direct or indirect, overt or covert, in cash or in kind.
- An actor may not solicit or receive a kickback or bribe in return for the referral of a person for the furnishing of any good or service that relates to any insurance claim for damages.
- An actor may not offer or pay a kickback or bribe to induce the referral of a person for the furnishing of any good or service that relates to any insurance claim.

How to protect yourself

- Be suspicious of anyone who, unsolicited, contacts you wanting to refer you to a particular medical provider, lawyer, or contractor.
- When seeking services, use traditional means to research and determine which service provider is best for you.
- Utah is a buyer beware state:
It is up to you to make sure the person you select to provide a service is licensed, insured, and that any contract you sign protects you and does not require you to pass on your claim rights to someone else.



Roofing Scams? "Hail" yes!

Don't get blown away by fraud.

Check references, licensing and get competitive estimates

Always make sure you know who you are dealing with and charges are fair.



Be cautious about promises of quick service and stocked materials for savings, especially after major storms

Scammers know what to say in desperate times, avoid promises sounding too good to be true.

Offering to waive deductibles may be illegal

Know your state laws, don't let a desperate situation turn into a permanent nightmare for you or your family.



Avoid demands for high advance payments for work

Reasonable advance payments are normal, demands for high up-front deposits warn of fraud.

Some contractors will actually cause or try to increase damage

Most are honest, but shady contractors may try to take advantage of the situation.



Read contracts carefully and avoid signing away your rights to your insurance coverage to third parties. You may find yourself in a lawsuit you never authorized.

Take the time to look over and understand the contract before signing it, it will be to your advantage to do so.

PUBLIC ADJUSTERS AND YOUR CLAIM

Know & Check Before You Sign!

WHAT IS A PUBLIC ADJUSTER?

PA's are professional claims adjusters who represent the policyholder in their insurance claim. PA's are paid a percentage of your claim recovery or an hourly rate.



HOW TO FIND A REPUTABLE PUBLIC ADJUSTER



Each state has a directory. You can also check the website of the National Association of Public Insurance Adjusters...
(www.napia.com)

HOW DO I PROTECT MYSELF?

PA's help adjust your claim only. They should not also do the repairs or be your contractor. In some states doing so is illegal.



CHECK AND VERIFY

First, decide if you need a PA to assist or if you want to work directly with your insurer. If you do hire a PA, ask for references. Also check your State Department of Insurance and Better Business Bureau.

**We all pay for insurance fraud.
Check and verify before you sign any contract.**

WORKERS COMP FRAUD COSTS MORE THAN \$32 BILLION EVERY YEAR

DON'T GET STUCK LOOKING FOR A QUICK BUCK

An estimated \$9 Billion of fraud every year stems from claims filed by workers misrepresenting injuries or receiving benefits from the wrong employer.

Scammers get caught through surveillance, social media monitoring, or medical provider records. Don't try it.



PENNY-PENCHING PAYROLL

Employers are the worst fraudsters. An estimated \$23 Billion in premium fraud is caused by employers underhanded tactics, including: misclassifying workers and underreporting payroll.

Most states require workers comp insurance for employees. When cheaters duck these responsibilities honest employers pay higher premiums and employees are denied the treatment and help they deserve.

Fraud investigators and state auditors are watching. Injured employees left without coverage often come forward. If you're an employer, pay what you owe -- it isn't worth the risk.

BE THE SOLUTION, NOT THE PROBLEM

EMPLOYEES:

Report suspected fraud to your state department of insurance.

- Payments offered in cash "under the table" are fraud.
- If you're injured and your company doesn't want you to file a claim, be suspicious.
- Be honest about your injuries. Fraud is not worth jail and fines. If others are committing fraud, report them.

EMPLOYERS:

If you suspect a bogus claim, notify your insurance carrier.

- Look for delays between the alleged injury and the claim filing.
- Verify medical treatment is actually related to the claimed injury.
- Be suspicious of statements that conflict with the findings of the findings of medical providers and witnesses.

Summary of Criminal Cases Filed

IFD-2023-00223-C

Filing Date: 07/01/2024

Charges Filed:

USAA: \$5,000

Insurance Fraud, Misdemeanor A
Driving Without Insurance, Misdemeanor B

Application Fraud/Auto Accident Past Posting:

On December 1, 2023 the defendant was involved in a single car slide off crash that damaged his 2020 Kia Sportage while driving without insurance. The defendant purchased insurance after the accident and then filed a claim that the accident happened the day after he purchased insurance.

Case Status:

The defendant pled guilty to insurance fraud, a Class A Misdemeanor. He was sentenced to pay a \$720 fine and 12 months probation.

IFD-2024-00068-C

Filing Date: 07/01/2024

Charges Filed:

Root: \$1,000

Insurance Fraud, Misdemeanor A
Driving Without Insurance, Misdemeanor B

Application Fraud/Auto Accident Past Posting:

On February 28, 2024 the defendant was involved in an auto accident while driving his 2016 Subaru Cross Trek without insurance. The defendant purchased insurance on his phone while at the scene of the crash and then claimed the accident happened after he was insured.

Case Status:

The defendant pled guilty to insurance fraud, a class A Misdemeanor and was sentenced to pay \$1,000 in victim restitution, \$272 in investigation costs, a \$250 fine. Attend a thinking errors class and serve 24 months probation.

Summary of Criminal Cases Filed

IFD-2024-00088-C

Filing Date: 07/03/2024

Charges Filed:

Insurance Fraud, Felony 3
Driving Without Insurance, Misdemeanor C

Progressive: \$2,777

Application Fraud/Auto Accident Past Posting:

On February 2, 2024 the defendant was involved in an accident while driving his 2014 Buick Enclave without insurance. The defendant purchased insurance on his phone while at the scene of the accident and then claimed the accident happened after he had purchased the insurance.

Case Status:

The suspect pled guilty to insurance fraud a Class A Misdemeanor. He was sentenced to pay \$500 in restitution, \$250 in investigation expenses, a \$100 fine, and serve 24 months probation.

IFD-2023-00221-C

Filing Date: 07/08/2024

Charges Filed:

Insurance Fraud, Felony 2

Progressive: \$8,552

Application Fraud/Auto Accident Past Posting:

On November 2, 2023 the defendant purchased an insurance policy for her 2008 Wildwood travel trailer. The defendant then filed a claim the next day alleging her husband damaged the trailer by hitting a tree while trying to park it. Evidence obtained showed the damage occurred prior to the defendant purchasing her insurance policy.

Case Status:

The defendant pled guilty to Insurance Fraud a 2nd degree felony. She was ordered to pay a \$500 fine, \$476 in investigation costs, attend a thinking errors class and serve 18 months on probation.

Summary of Criminal Cases Filed

IFD-2023-00217-C

Filing Date: 07/08/2024

Charges Filed:

Progressive: \$26,174

Defendant #1 Insurance Fraud, Felony 2

Defendant #2 Insurance Fraud, Felony 2

Application Fraud/Auto Accident Past Posting:

On December 4, 2023 the owner of a 2007 Acura MDX was involved in a single vehicle accident when he left the road and struck a pole. The owner has been paying his sister for his insurance however his sister had not obtained insurance. The sister purchased insurance, had her husband pretend to be the owner, and filed a claim for the damages while claiming the accident happened after the insurance had been purchased. The investigation showed that the owner of the Acura was not aware he did not have insurance and that his sister and brother in law purchased insurance after his accident and filed the claim on his behalf while lying to insurance.

Case Status:

The defendant who owned the car was convicted of 3rd degree felony insurance fraud and ordered to pay \$1,113 in investigation costs, a \$1,000 fine, and server 24 months on probation. His sister pled guilty to 3rd degree felony insurance fraud and received the same sentence.

IFD-2024-00018-C

Filing Date: 07/08/2024

Charges Filed:

GEICO: \$2,233

Insurance Fraud, Felony 3

Application Fraud/Auto Accident Past Posting/Paper Accident:

On November 28, 2023 the defendant was involved in an accident while driving his 2019 Dodge 1500 truck without insurance. He filed a hit and run report but the police determined he was the one at fault and had fled the scene of the accident. Later that day the defendant's wife purchased an insurance policy on the truck. On January 4, 2024 the defendant then filed a new insurance claim alleging that his truck had been hit by a hit and run driver. The investigation found the new damages reported to his insurance were the same damages from the November accident when he did not have insurance.

Case Status:

The defendant pled guilty to a Class A Misdemeanor for Insurance Fraud and was ordered to pay \$500 in fines, \$50 victim restitution, \$476 in investigation costs, and 13 month's probation.

Summary of Criminal Cases Filed

IFD-2024-00022-C

Filing Date: 07/16/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

Sentry:

\$Undetermined

Staged Accident/Workers Compensation Fraud:

On January 2, 2024 the defendant claimed to have fallen while working at a Maverick store. Video evidence showed the defendant never fell but showed the defendant make a phone call and then lower himself to the floor. The defendant had a pre-existing injury and did not have health insurance and faked the accident in order to get treatment.

Case Status:

The defendant pled guilty to a Class A Misdemeanor for Workers Compensation Insurance Fraud and was ordered to pay \$500 in fines, \$817 in investigation costs, attend a MRT class and mental health assessment and serve 18 months on probation.

IFD-2024-00076-C

Filing Date: 07/16/2024

Charges Filed:

Insurance Fraud, Felony 3
Theft by Deception, Misdemeanor A

Allstate:

\$2,932

False Injury Claim:

On January 12, 2024 the defendant was delivering groceries to a client. While at the house the defendant told the client she had been bitten by the client's dog. The defendant later contacted the client and demanded payment for lost wages. As a result the client filed a claim with his insurance and sent her money via Venmo to compensate her for her lost wages. The defendant provided photos of her injuries which were given to the insurer but she then refused to provide medical records. The photo of her injuries were found to have been obtained via the internet. The injuries never occurred.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud and a Class A Misdemeanor for Theft by Deception. She was ordered to pay \$500 in victim restitution, \$408 in investigation costs, \$1,000 fine, attend a thinking errors class and serve 24 months on probation.

Summary of Criminal Cases Filed

IFD-2024-00077-C

Filing Date: 07/16/2024

Charges Filed:

Workers Comp Insurance Fraud, Felony 2
Forgery, Felony 3

Reliance Standard: \$9,457

Malingering/Forged Doctors Note:

On September 11, 2023 the defendant claimed that she was unable to return to work following a medical condition which resulted in her receiving short term disability benefits. As part of this claim the defendant provided a doctors note saying she could not return to work for another month. The note was determined to have been forged and was not issued by the doctor.

Case Status:

The defendant pled guilty to a 2nd degree felony for Workers Compensation Insurance Fraud and 3rd degree Felony Forgery. She was ordered to pay \$1,800 fine, \$408 investigation costs, attend a thinking errors class, and serve 24 months on probation.

IFD-2024-00041-C

Filing Date: 07/18/2024

Charges Filed:

Insurance Fraud, Felony 2

Progressive: \$11,045

Application Fraud/ Auto Accident Past Posting:

On January 15, 2024 the defendant was involved in an auto accident while driving his 2006 Buick Terraza without insurance. The defendant later reinstated his insurance and claimed the accident happened after he was insured. The other driver was also not insured at the time of the accident.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud. He was sentenced to pay \$11,045 in restitution, \$750 investigation costs, \$350 fine, attend a thinking errors class and serve 36 months on probation.

Summary of Criminal Cases Filed

IFD-2024-00107-C

Filing Date: 07/18/2024

Charges Filed:

Insurance Fraud, Felony 3

Progressive:

\$6,198

Application Fraud/Auto Accident Past Posting:

On March 20, 2024 the defendant obtained a policy for his 2014 Victoria motorcycle. On April 17, 2024 the defendant's wife backed into his motorcycle with their 2016 Ford truck. The defendant then added comprehensive, collision, and accessory coverage to the motorcycle and filed a claim on April 22nd that the accident happened after the added coverage was obtained.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud and was ordered to pay a \$250 fine, \$314 in investigation costs, attend a MRT class, be supervised by AP&P for 12 months and serve 36 months on probation.

IFD-2024-00087-C

Filing Date: 07/22/2024

Charges Filed:

Insurance Fraud, Misdemeanor A
Driving Without Insurance, Misdemeanor C

GEICO:

\$4,808

Application Fraud/Auto Accident Past Posting/ Misrepresentation:

On March 16, 2024 the defendant was involved in an auto accident while driving her 2014 Chevy Equinox without insurance. The defendant purchased insurance on her phone at the scene and then provided this to the investigating police officer and later claimed the accident happened after she had obtained insurance.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud and was ordered to pay \$916 in investigation costs, attend a thinking errors class and server 24 months on probation.

Summary of Criminal Cases Filed

IFD-2021-00326-C

Filing Date: 07/23/2024

Charges Filed:

Insurance Fraud, Felony 2

State Auto

\$77,164

Staged Accidents/Runner Capper/Chiropractor/Law Firm Fraud:

This defendant was charged as part of an ongoing prosecution of 22 suspects who engaged in staged or paper accidents where they were recruited by a runner to engage in insurance fraud. In December of 2020 the defendant was involved in staging an accident where five people claimed injuries. All sought treatment for fake injuries at the involved chiropractor's office which paid the runner to recruit the victims.

Case Status:

Defendant 1 pled guilty to 3rd Degree Felony Wrongful Appropriation and was ordered to pay a \$500 fine. Defendant 2 pled guilty to the same offense. Defendant 3 pled guilty to 2nd Degree Felony Insurance Fraud and was ordered to pay \$34,548 in victim restitution and \$500 in investigation costs. All three were given 36 months probation. Several more defendants await pleadings.

IFD-2024-00089-C

Filing Date: 08/05/2024

Charges Filed:

Insurance Fraud, Felony 3

USAA:

\$2,332

Policy Misrepresentation:

On March 4, 2024 the defendant obtained a homeowners policy for her home. A few days later she filed a claim for water damages where water was seeping through a wall into her home. The investigation found that the water damages occurred prior to her obtaining her insurance policy.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud and was ordered to pay \$623 in investigation costs, attend a thinking errors class, serve 30 hours community service and 24 months of probation.

Summary of Criminal Cases Filed

IFD-2024-00046-C

Filing Date: 08/14/2024

Charges Filed:

Insurance Fraud, Felony 2

Safeco:

\$35,340

False Property Theft:

On March 5, 2024 the defendant filed a claim that his home was burglarized and a large number of items were stolen. As part of the claim the defendant provided photos he claimed he had taken of the property. The investigation showed that these photos were taken from the internet and others were taken after the theft had been reported. The defendant later admitted to investigators that he had faked the entire claim because he needed money to support his family.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud and was ordered to pay \$647 in investigation costs, a \$2,000 fine, and 36 months probation.

IFD-2024-00120-C

Filing Date: 09/14/2024

Charges Filed:

Insurance Fraud, Felony 3
Forgery, 2 counts, Felony 3

Allstate:

\$2,114

Forged Documents/Inflated Damages:

On October 26, 2023 the defendant's 2016 Toyota Camry was run into while he was getting gas. The suspect left the gas station without providing his information and the defendant followed him in his car until police told him to stop and return to the location of the accident. The defendant later filed an insurance claim and in an effort to inflate the claim value he presented a forged towing receipt and forged vehicle damage estimate as part of the claim.

Case Status:

The defendant pled guilty to two counts of Class A Misdemeanor Unauthorized Possession of Property. He was ordered to pay a \$1,000 fine, \$573 in investigation costs, attend a moral recognition class, and serve 24 months probation.

Summary of Criminal Cases Filed

IFD-2024-00043-C

Filing Date: 08/15/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

Liberty Mutual: \$8,000

Premium Avoidance:

On November 02, 2023 the defendant obtained an insurance policy for her 2015 Nissan Pathfinder and her boyfriends 2016 Toyota Corolla . The defendant claimed both vehicles were hers and did not list her boyfriend on the policy. The defendant's boyfriend was later involved in an accident on February 5, 2024. During the claim it was discovered that the defendant failed to list her boyfriend on the policy in order to avoid paying an additional \$8,000 for insurance to cover the boyfriend as a driver.

Case Status:

The defendant pled guilty to a Class A Misdemeanor count of Insurance Fraud. He was ordered to pay \$500 fine, \$483 in investigation costs, attend a thinking errors class, and serve 24 months on probation.

IFD-2024-00029-C

filing Date: 08/16/2024

Charges Filed:

Insurance Fraud, Felony 2
Forgery, 2 counts, Felony 3

Minnesota Life: \$13,832

Fake Death/ Life Insurance Claim:

On December 02, 2022 the defendant's significant other purchased a 2009 Mercedes Benz and obtained an optional life insurance policy and disability policy as part of the financing package. On August 8, 2023 the defendant filed a claim that her significant other was involved in an auto accident while in Mexico and later passed away. As part of the claim the defendant presented the insurer with fake medical documents to support her disability claim and a fake death certificate to support the death of the insured. The investigation found the documents to be forged and also several interactions with police including a domestic violence incident which occurred between the defendant and the alleged deceased after his alleged death.

Case Status:

An arrest warrant has been issued for this defendant for failure to appear. Her arrest is pending.

Summary of Criminal Cases Filed

IFD-2024-00100-C

Filing Date: 08/10/2024

Charges Filed:

Insurance Fraud, Felony 3

Progressive: \$3,839

Application Fraud/Auto Accident Past Posting:

On February 10, 2024 the defendant backed into a parked car while driving his 2005 Dodge Durango without insurance. The defendant purchased insurance and later filed a claim in March alleging the accident occurred on February 23, 2024 after his insurance was in effect. The owner of the other vehicle was out of town during this time frame but the investigation developed evidence that the accident happened prior to the insurance policy being purchased.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud. He was ordered to pay \$300 fine, \$110 in investigation costs, attend a thinking errors class and serve 12 months probation.

IFD-2024-00130-C

Filing Date: 08/27/2024

Charges Filed:

Workers Compensation Insurance Fraud, Felony 3
Forgery, Felony 3

WCF : \$4,173

Premium Avoidance/Forged Workers Compensation Policy:

This investigation involves a forged certificate of workers compensation insurance. The suspect, who is a flooring subcontractor, presented a forged certificate of insurance to the general contractor in order to be hired for flooring jobs. The forged certificate was discovered during a routine audit and the investigation resulted in the defendant admitting to forging the document.

Case Status:

An arrest warrant has been issued for the defendant who failed to appear in court.

Summary of Criminal Cases Filed

IFD-2024-00083-C

Filing Date: 08/27/2024

Charges Filed:

Insurance Fraud, Felony 3

Progressive: \$3,500

Identify Theft/Obtaining Insurance Using Fake Identity:

On March 28, 2024 the defendant was involved in an auto accident while driving his 2006 Chevy Blazer. The defendant presented an insurance card to the investigating officer which listed the insurance for the vehicle under another person's name. The investigation discovered that the individual who the insurance was obtained under did not give permission or know that the policy existed. The insurance was obtained through identity theft. The defendant denied he obtained the policy but claimed he obtained the policy and card via another individual who has not been located or identified.

Case Status:

The defendant pled guilty to 3rd Degree Felony Identity Fraud. He was ordered to pay \$762 in investigation costs and serve 365 days in jail.

IFD-2024-00135-C

Filing Date: 09/03/2024

Charges Filed:

Insurance Fraud, Misdemeanor A
Forgery, 2 counts, Felony 3

Independence American: \$762

Pet Insurance Past Posting/ Forgery:

On January 28, 2024 the defendant took her dog to a veterinarian after her dog swallowed a plastic toy. The next day she incepted an insurance policy to cover her dog. She then submitted altered medical records showing the veterinary visits occurred after the insurance was obtained.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. She was ordered to pay \$500 fine, \$397 in investigation costs, attend a thinking errors class, and serve 18 months on probation.

Summary of Criminal Cases Filed

IFD-2024-00121-C

Filing Date: 09/04/2024

Charges Filed:

Insurance Fraud, Felony 3

GEICO:

\$3,000

Application Fraud/Auto Accident Past Posting:

On May 28, 2024 the defendant was involved in an auto accident while driving her 2017 Nissan Rogue without insurance. She was hit from behind by another driver who was also driving without insurance. The suspect reinstated her own insurance policy and then filed a claim alleging the accident occurred after she had reinstated her insurance.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. She was ordered to pay \$750 fine, \$280 investigation costs, attend a thinking errors class, and server 24 months probation.

IFD-2024-00127-C

Filing Date: 09/05/2024

Charges Filed:

Insurance Fraud, Felony 2

Progressive:

\$30,717

Application Fraud/Auto Accident Past Posting:

On May 25, 2024 the defendant was driving his 2019 Polaris Razor when he rolled it. The defendant purchased insurance on the Razor the next day and two additional ATV's and then filed a claim that the accident occurred after he had purchased the insurance.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud. He was ordered to pay \$1,500 court fine, \$360 in investigation costs, attend a MRT class, and serve 36 months on probation.

Summary of Criminal Cases Filed

IFD-2024-00104-C

Filing Date: 09/09/2024

Charges Filed:

Insurance Fraud, Felony 2

State Farm: \$4,455

Central Insurance: \$5,179

Application Fraud/Auto Accident Past Posting:

On September 21 2023, the defendant was involved in an auto accident while driving her 2006 Honda Pilot with out insurance. She ran into the back of two vehicles. The defendant purchased insurance and then claimed that the accident happened after she was insured.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud. She was ordered to pay \$500 fine, \$385 in investigation costs, attend a level one course and serve 36 months on probation.

IFD-2024-00042-C

Filing Date: 09/10/2024

Charges Filed:

Insurance Fraud, Felony 2

Liberty Mutual: \$6,000

False Roof Damage Claim:

On February 5, 2024 the defendant filed an insurance claim that his roof had been damaged in a windstorm occurring in July of 2023. The investigation discovered that the defendant filed a claim with a prior insurance company for the same damages with a date of loss of July 2021, three years prior.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud. He was ordered to pay \$1,200 fine, \$324 in investigation costs, and 12 months on probation.

Summary of Criminal Cases Filed

IFD-2024-00124-C

Filing Date: 09/10/2024

Charges Filed:

Insurance Fraud, Felony 2

GEICO:

\$6,370

Safeco:

\$14,443

Application Fraud/Auto Accident Past Posting:

On April 15, 2024 the defendant was involved in an auto accident while driving his 2015 BMW without insurance. The defendant called his mother who quickly purchased an insurance policy to cover the BMW and sent him a copy of the policy to his phone. The defendant presented the insurance to the investigating officer and the victim in the accident who filed the claim believing the defendant had insurance.

Case Status:

Case was dismissed Without Prejudice

IFD-2024-00064-C

Filing Date: 09/10/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

Driving Without Insurance, Misdemeanor C

Progressive:

\$8,482

Application Fraud/Auto Accident Past Posting:

On December 2, 2023 the defendant was involved in an auto accident while driving his 2018 Hyundai Sonata without insurance. The defendant purchased insurance after the accident and later filed a claim a few weeks later saying the accident happened on December 3, 2023 and that police were not called. The investigation found the police were called and the accident happened prior to the insurance policy being purchased.

Case Status:

Defendant failed to appear and an arrest warrant was issued.

Summary of Criminal Cases Filed

IFD-2024-00112-C

Filing Date: 09/12/2024

Charges Filed:

Progressive: \$38,538

Defendant 1: Insurance Fraud, Misdemeanor A

Defendant 2: Insurance Fraud, Misdemeanor A

Application Fraud/Auto Accident Past Posting Claim:

On April 27, 2024 defendant 1 was driving his 2008 Chevy Silverado when he ran into another vehicle while driving without insurance. Defendant 1 called his ex-girlfriend and had her add his truck to her insurance policy and defendant 1 provided this information to the investigating police officer. During the claims process defendant 2 claimed she was not aware of defendant 1's accident and that she just added his vehicle to her policy at the time of the accident by coincidence.

Case Status:

Defendant 1 pled guilty to a Class A Misdemeanor Insurance Fraud. He was ordered to pay \$606 in investigation costs and attend a thinking errors class. Defendant 2 pled guilty to a Class A Misdemeanor Insurance Fraud and received the same sentence. Both were given 18 months probation.

IFD-2024-00067-C

Filing Date: 09/12/2024

Charges Filed:

Progressive: \$5,126

Insurance Fraud, Misdemeanor A

Insurance Agent Fraud/Lowering Deductible After Accident:

On February 27, 2024 the defendants wife was in an accident when she slid on ice while driving their 2018 Land Rover. After the accident the defendant, an insurance agent, lowered his deductible and backdated it from \$2,000 to \$1,000 and then filed a claim saying he had lowered the deductible prior to the accident. The defendant claimed lowering his deductible and backdating it at the same time as the accident was a coincidence and that his boss at the insurance company told him they were going to cancel his policy if he did not change his deductible.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. He was ordered to pay \$750 fine, \$317 in investigation costs, attend a theft course and 18 months probation.

Summary of Criminal Cases Filed

IFD-2024-00139-C

Filing Date: 09/20/2024

Charges Filed:

Insurance Fraud, Felony 2

Progressive: \$7,968

Application Fraud/Auto Accident Past Posting:

On June 8, 2024 the defendant was involved in an accident while riding his 2016 Harley Davidson motorcycle. On the same day the defendant added collision coverage and increased his uninsured motorist limits on his policy and then claimed he did so thirty minutes prior to his ride. The investigation discovered he called police to report the accident five minutes after he had made the changes to his policy.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. He was ordered to pay \$1,000 fine, \$337 in investigation costs, attend a thinking errors class, and serve 24 months probation.

IFD-2024-00146-C

Filing Date: 09/20/2024

Charges Filed:

Insurance Fraud, Felony 2

Driving Without Insurance, Misdemeanor C

State Farm: \$9,739

Application Fraud/ Auto Accident Past Posting:

On January 16, 2024 the defendant was involved in an auto accident while driving her 2016 Toyota Camry without insurance. The defendant purchased insurance and then claimed the accident happened after she had purchased the insurance.

Case Status:

The defendant pled guilty to a 3rd Degree Felony Insurance Fraud. She was sentenced to pay \$1,000 restitution, \$488 in investigation costs, \$1,400 fine, attend a thinking errors class, and serve 24 months probation.

Summary of Criminal Cases Filed

IFD-2023-00214-C

Filing Date: 09/20/2024

Charges Filed:

United Financial: \$1,500,000

Defendant #1

Insurance Fraud, Felony 2

Defendant #2

Insurance Fraud, Felony 2

Application Fraud/Auto Accident Past Posting:

Between September of 2021 and November of 2023 the defendant's company insurance policy lapsed several times for non-payment. A few days prior to the accident in question, one of the defendants requested a quote for insurance but never bound the policy. On November 3, 2023 a 2017 Kenworth truck towing a trailer with an excavator was involved in an accident where the excavator hit the bottom of a bridge causing extensive damages. The defendants contacted their insurance agent to bind the policy without disclosing the current accident. They then filed a claim against the policy for the accident claiming the accident happened on November 10th.

Case Status:

Court Case Pending

IFD-2024-00061-C

Filing Date: 09/23/2024

Charges Filed:

United Financial: \$28,500

Insurance Fraud, Felony 2

Insurance Agent Fraud/Backdating Policy/Auto Accident Past Posting:

On August 21, 2023 the insurance agents client damaged his 2023 BMW when he went off the pavement while driving in Emigration Canyon. The client has several high end vehicles insured with the agent and activates his insurance only when he drives the vehicles. The agent neglected to change the policy prior to this event. On August 24, the defendant called the insurer and requested that his clients policy be activated and backdated the activation to August 21, 2023. The agent later filed a claim on behalf of the client alleging the damages occurred on January 30, 2024. The agent instructed his client to tell the insurer that the damages occurred on the January 30, 2024 date.

Case Status:

Court Case Pending

Summary of Criminal Cases Filed

IFD-2024-00129-C

Filing Date: 9/23/2024

Charges Filed:

Insurance Fraud, Misdemeanor A
Forgery (3 counts), Felony 3

Pretorian Insurance: \$6,704

Identity Theft/Forgery/Theft Claim:

On April 13, 2024 the defendant's apartment was alleged to have been broken into and property belonging to him and his roommate was stolen. On April 14, 2024 the defendant filed a claim while pretending to be his policy holder roommate who had left the country. The defendant provided altered receipts for property he purchased after the theft falsely representing the property as being stolen in the theft.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud and a Class A Misdemeanor charge of Forgery. He was ordered to pay a \$1,500 fine, \$828 in investigation costs, and 12 months probation.

IFD-2024-00105-C

Filing Date: 10/02/2024

Charges Filed:

Insurance Fraud, Felony 2
False Report to Police, Misdemeanor B

Essentia Insurance: \$25,000

Staged Auto Theft/False Claim:

On July 3, 2024 the defendant filed a claim that his 1990 Chevy Suburban had been stolen from his place of business. He also filed a similar police report. The vehicle was recovered missing the engine and several parts a week later in Salt Lake City. The investigation discovered business video which showed the Suburban being dropped off on the street by a Ford F150 towing a U-Haul trailer. The owner of the F150 towing the U-Haul is the defendant's mother. The defendant was also found to have rented a U-Haul trailer on June 28, 2024. Cell phone records placed the defendant in the area his vehicle was abandoned.

Case Status:

The defendant was convicted of 3rd Degree Felony Insurance Fraud. He was ordered to pay a \$1,500 fine and \$1,644 in investigation costs.

Summary of Criminal Cases Filed

IFD-2024-00110-C

Filing Date: 10/09/2024

Charges Filed:

Insurance Fraud, Felony 3

Progressive:

\$4,219

Application Fraud/Auto Accident Past Posting:

On February 9, 2024 the defendant purchased an insurance policy for her 2024 Hyundai Elantra. On February 12, 2024 the defendant called her agent and told him she had hit a cat that caused damage to her car. She told the agent the accident happened before she purchased the policy. The defendant then filed a claim on February 26, 2024 alleging the accident occurred on February 15, 2024.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. She was ordered to pay a \$500 fine, \$451 in investigation costs, attend a thinking errors class and serve 18 months probation.

IFD-2024-00112-C

Filing Date: 10/09/2024

Charges Filed:

Defendant One: Insurance Fraud, Misdemeanor A

Defendant Two: Insurance Fraud, Misdemeanor A

Progressive:

\$38,538

Application Fraud/Auto Accident Past Posting:

On April 27, 2024 defendant one was involved in an auto accident while driving without insurance. Defendant #1 contacted defendant #2 to have her add his vehicle to her auto insurance policy. Both conspired to misrepresent the time of the accident in an attempt to obtain coverage for the accident.

Case Status:

Both defendants pled guilty to a Class A Misdemeanor count of Insurance Fraud. They were each ordered to pay a \$750 fine and \$606 in investigation costs and 18 months probation.

Summary of Criminal Cases Filed

IFD-2024-00149-C

Filing Date: 10/24/2024

Charges Filed:

Insurance Fraud, Misdemeanor A
Forgery, Felony 3

Next Insurance: \$2,455

Inflated Claim/Forgery:

On August 18, 2023 the defendant's business was broken into and a door was damaged. The defendant created a false repair invoice inflating the repair costs she paid and submitted it to the insurance company for reimbursement.

Case Status:

Witnesses were afraid to testify due to immigrant status. Case was dismissed with prejudice.

IFD-2024-00126-C

Filing Date: 10/29/2024

Charges Filed:

Insurance Fraud, Felony 2
Driving Without Insurance, Misdemeanor C

Progressive: \$8,704

Application Fraud/ Auto Damage Past Posting:

On March 21, 2024 the defendant was driving his 2017 Ford truck without insurance when he slid on ice and caused the truck's side airbags to deploy. The defendant purchased insurance and then filed a claim that the accident occurred after the policy had been purchased.

Case Status:

The defendant was convicted of 2nd Degree Felony Insurance Fraud. He was ordered to pay a \$1,000 fine, \$270 in investigation costs and serve 24 months probation.

Summary of Criminal Cases Filed

IFD-2024-00158-C

Filing Date: 10/29/2024

Charges Filed:

Insurance Fraud, Felony 3

Progressive: \$4,073

Application Fraud/Auto Damage Past Posting

On June 7, 2024 the defendant purchased an insurance policy for his 1999 Land Rover Defender. The defendant later filed a claim that his vehicle had been damaged in a hail storm a few days later. The investigation discovered that the defendants vehicle had been in storage after being shipped from overseas and had been damaged in a hail storm while in storage the week prior to the defendant picking his vehicle up.

Case Status:

The defendant pled guilty to a 3rd Degree Felony of Insurance Fraud. He was ordered to pay a \$1,000 fine, \$440 in investigation costs, complete a theft course, and serve 36 months probation.

IFD-2024-00122-C

Filing Date: 10/29/2024

Charges Filed:

Insurance Fraud, Misdemeanor A
Driving Without Insurance, Misdemeanor C

Progressive: \$14,252

Application Fraud/Auto Accident Past Posting:

On June 5, 2024 the defendant was driving her 2020 Hyundai Tucson without insurance when she ran into another vehicle. The defendant reinstated her insurance after the accident and then misrepresented that the accident occurred after she was insured.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. She was ordered to pay a \$700 court fine, \$238 in investigation costs, attend a thinking errors class and serve 24 months on probation.

Summary of Criminal Cases Filed

IFD-2024-00161-C

Filing Date: 10/29/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive: \$5,523

Premium Avoidance/Insuring Vehicle for Another Person:

On June 1, 2024 the defendant obtained insurance for a friend's 2015 BMW X3 which was not owed by the defendant and did not list the owner as a driver of the vehicle. The defendant obtained the policy for the friend to save the friend on insurance cost and had the friend reimburse him the cost of the insurance each month. The owner of the vehicle was involved in an auto accident. The insurance covered the 3rd party damages but did not cover the damages to the BMW due to the policy misrepresentation.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. He was ordered to pay \$592 in investigation costs, \$250 fine, attend a thinking errors class and serve 18 months on probation.

IFD-2024-00153-C

Filing Date: 11/06/2024

Charges Filed:

Insurance Fraud, Felony 2 (2 defendants)

Progressive: \$8,400

Application Fraud/Auto Accident Past Posting:

On July 5, 2024 the defendant slid his 2023 Can Am UTV into a 20' ravine while driving it without insurance. He contacted his wife who purchased insurance after the accident. Both then conspired to file a claim that the accident had happened after the insurance was purchased.

Case Status:

Both defendants pled guilty to 3rd Degree Felony Insurance Fraud. Defendant 1 was ordered to pay \$1,000 fine and \$754 in investigation costs, and 24 months probation. Defendant 2 was given 3 months probation.

Summary of Criminal Cases Filed

IFD-2024-00061-C

Filing Date: 11/06/2024

Charges Filed:

Insurance Fraud, Felony 2
Driving Without Insurance, Misdemeanor C

Progressive: \$6,849

Application Fraud/Auto Accident Past Posting:

On March 1, 2024 the defendant was involved in a multiple vehicle accident while driving without insurance. The defendant purchased insurance the next day and then filed a claim that he had been in an accident after he was insured. The defendant claimed he had requested his own tow truck to take his vehicle to his residence. It was discovered that the defendant had filed the same claim with another insurance company for a date of loss that was prior to him purchasing the policy with Progressive.

Case Status:

Pending Court Action

IFD-2024-00160-C

Filing Date: 11/07/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

Liberty Insurance: \$1,062

Claiming Prior Damages on a Auto Claim:

On June 25, 2024 the defendant filed a claim alleging his vehicle was damaged in a hit and run while parked in a parking lot. It was discovered that some of the damages existed on the vehicle months before the reported hit and run.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. He was ordered to pay a \$500 fine, \$521 in investigation costs, attend a level on theft course and serve 24 months probation.

Summary of Criminal Cases Filed

IFD-2024-00196-C

Filing Date: 11/19/2024

Charges Filed:
Forgery, Felony 3

Auto Owners: \$0

Forged Certificate of Insurance:

On September 20, 2024 the defendant presented a forged certificate of insurance in order to be able to perform work as a subcontractor for a landscaping company. The defendant had fabricated a certificate of insurance he obtained off the internet representing he was insured.

Case Status:

The defendant pled guilty to 3rd Degree Felony Forgery. He was ordered to pay a \$1,500 fine, \$204 in investigation costs, attend a thinking errors class, and serve 18 months probation.

IFD-2024-00154-C

Filing Date: 11/20/2024

Charges Filed:
Insurance Fraud, Felony 3
Identity Fraud, Felony 3

Progressive: \$4,089

Application Fraud/Identity Fraud:

On May 16, 2024 the defendant purchased insurance for his 2015 Tesla under his ex-wife's name without her permission. The defendant was then involved in an auto accident on June 20, 2024. The defendant contacted his ex-wife to convince her to tell Progressive that she insured the car and allowed the defendant to drive it occasionally.

Case Status:

The defendant pled guilty to 3rd Degree Felony Insurance Fraud. He was ordered to pay a \$1,000 fine, \$1,000 victim restitution, \$378 in investigation costs, and serve 24 months probation.

Summary of Criminal Cases Filed

IFD-2024-00188-C

Filing Date: 11/22/2024

Charges Filed:

Insurance Fraud, Felony 2

GEICO: \$8,376

Application Fraud/Auto Accident Past Posting:

On August 26, 2024 the defendant was involved in an auto accident while driving her vehicle without insurance. The defendant reinstated her policy after the accident and then claimed the accident happened after her insurance had been reinstated.

Case Status:

The defendant pled guilty to 2nd Degree Felony Insurance Fraud. She was ordered to pay \$1,000 restitution, \$800 court fine, \$306 in investigation costs, attend a thinking errors class, and serve 24 months on probation.

IFD-2024-00208-C

Filing Date: 11/22/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

USAA: \$950

Claim Misrepresentation/Lowering Deductible After a Loss:

On September 14, 2024 the defendant hit a shopping cart with her car causing it to hit another vehicle. The defendant conspired with the owner of the other vehicle to misrepresent the date of the accident so she could lower her insurance deductible before filing the claim.

Case Status:

The defendant pled guilty to a Class A Misdemeanor Insurance Fraud. She was ordered to pay a \$500 fine, \$582 in investigation costs, and serve 18 months probation.

Summary of Criminal Cases Filed

IFD-2024-00108-C

Filing Date: 11/26/2024

Charges Filed:

Insurance Fraud, Felony 3

Nationwide: \$4,862

Jump-In Accident/False Injury Claims:

On December 23, 2023 the defendant's daughter was involved in an auto accident where the suspect vehicle fled the scene. On December 28, 2024 the defendant filed a claim alleging she was in the vehicle at the time of the accident and that she had sustained injuries. The defendant received over \$4,000 in chiropractic treatment and also claimed to be unable to perform household duties and was paid additional money to pay for these services. The investigation resulted in the defendant admitting she was never in the vehicle.

Case Status:

Pending Court Action

IFD-2024-00128-C

Filing Date: 11/26/2024

Charges Filed:

Insurance Fraud, Felony 3

Progressive: \$3,985

Application Fraud/Auto Accident Past Posting:

On April 25, 2024 the defendant was involved in an auto accident while driving without insurance. The defendant obtained an insurance policy on his phone after the accident and then filed a claim the accident occurred after he was insured.

Case Status:

Pending Court Action

Summary of Criminal Cases Filed

IFD-2024-00145-C

Filing Date: 11/26/2024

Charges Filed:

Workers Comp Insurance Fraud, Misdemeanor A

Advantage: \$10,288

False Workers Compensation Claim:

On October 5, 2023 the defendant filed a claim with his employer that he had injured himself while working. It was discovered that the defendant had gone to the doctor in April and June of 2023 and was diagnosed with a hernia and surgery was recommended. The defendant elected to postpone surgery to a later date. The defendant's injury did not occur at work and he admitted that he thought he would try to file the claim with his employer and see if it might be covered.

Case Status:

Pending Court Action

IFD-2024-00125-C

Filing Date: 12/03/2024

Charges Filed:

Insurance Fraud, Felony 3

Sun Life: \$55,051

Collecting Disability Insurance While Collecting Unemployment Benefits:

Between 11/23/2019 and July 1, 2021 the defendant claimed disability benefits while failing to disclose that he was also collecting unemployment benefits. The defendant submitted false information for both unemployment and disability in order to collect both benefits at the same time.

Case Status:

Pending Court Action

Summary of Criminal Cases Filed

IFD-2024-00193-C

Filing Date: 12/04/2024

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive: \$1,267

Application Fraud/Auto Accident Past Posting:

On August 19, 2024 the defendant filed an insurance claim that he damaged his 2016 Yamaha ATV while off-roading. The investigation discovered that the defendant had taken his ATV in for the same repairs ten days prior to purchasing his insurance policy and then attempted to claim the damages occurred after he had purchased insurance.

Case Status:

Pending Court Action

IFD-2024-00184-C

Filing Date: 12/05/2024

Charges Filed:

Insurance Fraud, Felony 2

Bear River: \$5,454

Misrepresentation/Claiming an Auto Accident on Personal Insurance While Driving for Lyft:

On June 7, 2024 the defendant was involved in an auto accident while driving for Lyft. The defendant was at fault and provided his personal insurance policy for the other driver to use in filing a claim. The defendant later lied to Bear River about the accident and claimed he was driving his daughter and three of her friends. The defendant was found to be driving for Lyft at the time and had six passengers.

Case Status:

Pending Court Action

Summary of Criminal Cases Filed

IFD-2024-00217-C

Filing Date: 12/05/2024

Charges Filed:

Insurance Fraud, Misdemeanor A
Driving Without Insurance, Misdemeanor C

Progressive:: \$1,768

Application Fraud/Auto Accident Past Posting:

On August 27, 2024 the defendant was involved in an auto accident while driving without insurance. The defendant purchased insurance after the accident and then claimed she had purchased the insurance before the accident had occurred.

Case Status:

Court Case Pending

IFD2024-00222-C

Filing Date: 12/06/2024

Charges Filed:

Insurance Fraud (F2)

Bear River: \$5,991

Material Misrepresentation:

On May 17, 2024 the defendant was involved in a police pursuit and had the tires on his rental car spiked by the police. The rental car company filed a claim with the defendant's insurance company. When asked about the accident by his insurance company he claimed an unknown person had spiked his tires.

Case Status:

Court Case Pending

Summary of Criminal Cases Filed

IFD-2024-00031-C

Filing Date: 01/08/2025

Charges Filed:

Insurance Fraud, Felony 2

Select Health: \$96,451

Agent Fraud/Application Fraud/False Documents:

The defendant had provided health insurance for his ex-wife since their divorce. However, he allowed the insurance policy to lapse. During this lapse the defendant's ex-wife required a medical procedure but had no insurance coverage. The defendant first tried to claim his company had failed to send in documents to insure his ex-wife and that she was an employee of the company. When documents were requested his company refused to provide these since she was not an employee. The defendant then approached a friend who owned another company and convinced them to submit her on their policy as if she was an employee. The defendant, who is an insurance agent, convinced them it was okay to do so. As a result, medical claims were submitted to Select Health requesting reimbursement of over \$96,000.

Case Status:

Court Case Pending

IFD-2024-00078-C

Filing Date: 01/08/2025

Charges Filed:

Insurance Fraud, Felony 2
Forgery, Felony 3

Allstate \$17,830

Fake Attorney/Insurance Fraud:

In November of 2022 an auto accident occurred. The defendant owned the company one of the accident victims worked at, representing he was an attorney, and volunteered to represent the accident victim. The defendant engaged in communications with the insurer during which he submitted forged and false wage lost claims indicating the victim could not work while he was actually still working for the defendant. The defendant received and kept the payments from the insurer for his own use.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00113-C	Filing Date:	01/08/2025
Charges Filed: Insurance Fraud, 2 Counts- Felony 3 Forgery, 2 Counts–Felony 3	Travelers: Farmers:	\$3,743 \$3,704
Double Dipping Claims: In April of 2024 the defendant was involved in a single vehicle auto accident while driving for Uber. The defendant filed an insurance claim with Allstate Insurance (Uber’s insurer) and was paid for the damages to his vehicle. The defendant then filed a claim with her personal auto insurance carrier for the same damages. During her claim with Travelers and Farmers she provided false repair invoices for her vehicle in order to inflate the damages claimed.		
Case Status: Court Case Pending		
IFD-2024-00231-C	Filing Date:	01/08/2025
Charges Filed: Insurance Fraud, Misdemeanor A	WCF:	\$8,667
Collecting Temporary Total Disability Payments While Working: In January of 2023 the defendant reported he was injured while working for his son’s company and that he was unable to work. While collecting disability payments the defendant returned to work for a different contractor.		
Case Status: Court Action Pending		

Summary of Criminal Cases Filed

IFD-2024-00238-C

Filing Date: 01/08/2025

Charges Filed:

Insurance Fraud, Felony 2

Liberty Mutual: \$5,812

False Theft Claim/Forged Documents:

In July of 2024 the defendant filed a police report that her home had been burglarized and items were stolen. She then filed an insurance claim. During the claim the defendant provided photos of the alleged stolen items she claimed she had taken. The photos were discovered to have been downloaded from the internet. The investigation discovered that the burglary never occurred and no items had been stolen.

Case Status:

Court Case Pending

IFD-2024-00143-C

Filing Date: 01/09/2025

Charges Filed:

Insurance Fraud, Felony 2

Bear River: \$6,396

Application Fraud/Premium Avoidance:

In February of 2023, the defendant added his son's vehicle to his policy claiming he had purchased the vehicle from his son. A year later the defendant's son was involved in an auto accident in California where the son lives. The investigation found that the defendant never purchased the car from his son and that his son had a prior DUI which made it difficult to obtain insurance. Bear River would not have insured the son or his vehicle had they been aware of these circumstances.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00206-C

Filing Date: 01/14/2025

Charges Filed:

Insurance Fraud, Felony 2

Progressive:

\$11,548

Application Fraud/ Auto Accident Past Posting:

On September 10, 2024 the defendant's husband was involved in an accident while driving his motorcycle without insurance. The defendant's husband called her after the accident and she quickly obtained insurance on the motorcycle. The defendant later filed the insurance claim for her husband and misrepresented that insurance was purchased prior to the accident.

Case Status:

Court Case Pending

IFD-2024-00219-C

Filing Date: 01/17/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive:

\$Unk

Application Fraud/Auto Accident Past Posting:

In September of 2024 the defendant purchased insurance on his Toyota 4 Runner. The next day the defendant filed an insurance claim that he had hit a parked vehicle. The investigation discovered that the defendant ran into his neighbors car prior to purchasing insurance and then attempted to claim the accident occurred after insurance was purchased.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00235-C

Filing Date: 01/28/2025

Charges Filed:

Insurance Fraud, Felony 2

Auto Owners: \$30,365

Claiming Prior Damages:

In June of 2024 the defendant purchased a 2017 Keystone Hideout camper trailer which had pre-existing hail damage. On August 28, 2024 the defendant filed a claim that his trailer was damaged during a hail storm while he was camping. The defendant denied that the trailer had prior hail damage when purchased.

Case Status:

Court Case Pending

IFD-2024-00247-C

Filing Date: 01/28/2025

Charges Filed:

Insurance Fraud, Felony 3
3 counts Forgery, Felony 3

Progressive: \$4,753

False Damages/Forged Receipts:

On May 27, 2024 the defendant was a passenger in a vehicle during an auto accident. The defendant later submitted a claim that her cell phone and air pods were damaged. She later submitted an additional claim that she had left a luxury purse and 13 pairs of high value Nike shoes in the car which were missing after the vehicle had been towed. The receipts the defendant provided were found to be forged and or downloaded from the internet.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2025-00018-C

Filing Date: 01/28/2025

Charges Filed:

Insurance Fraud, Felony 2

Progressive:

\$6,704

Application Fraud/Auto Accident Past Posting:

In November of 2024 the defendant purchased an insurance policy and claimed that the vehicle had not been in any prior accidents. A few weeks later the defendant filed a claim that she had run into a deer. The investigation discovered that the defendant had been in the accident a few weeks prior to her purchasing the insurance policy.

Case Status:

Court Case Pending

IFD-2025-00016-C

Filing Date: 01/28/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

GEICO:

\$14,000

Application Fraud/Auto Accident Past Posting:

On December 28, 2024 the defendant was driving his 2019 Mercedes without insurance during a snowstorm. The defendant lost control and hit a concrete barrier. The defendant purchased an insurance policy and then filed the claim that the accident happened later that same day after he had purchased the insurance policy.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00134-C

Filing Date: 01/28/2025

Charges Filed:

2 defendant charged
Insurance Fraud, Misdemeanor A

Farm Bureau: \$1,175

Auto Accident Jump In/False Injury Claim:

On February 22, 2024 defendant #1 was involved in an auto accident where he was hit from behind. Later in the accident claim, defendant #2 claimed she was in the vehicle and was the driver at the time of the accident and that both she and defendant #1 were injured and sought chiropractic treatment. The investigation discovered that defendant #2 was never in the vehicle at the time of the accident.

Case Status:

Court Case Pending

IFD-2023-00072-C

Filing Date: 01/30/2025

Charges Filed:

Insurance Fraud, Felony 2
Pattern of Unlawful Activity, Felony 2
Forgery, 6 counts, Felony 3
Identity Fraud, 2 counts, Felony 3

Royal Neighbors Ins.: \$71,357
American Amicable Ins.: \$36,449

Agent Fraud/Writing Life Policies with out Applicants Permission:

Between September 2020 through June 2021, the Insurance Agent Defendant submitted 34 life insurance applications for applicants who did not wish to purchase life insurance. The defendant used false addresses and banking information on the applications and received commissions for policies that later cancelled for non-payment of premiums. When the agent later surrendered his license, he stole the identity of another agent and submitted more applications using the stolen agents identity and the identities of additional applicants who did not wish to purchase insurance.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00221-C

Filing Date: 02/07/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

GEICO:

\$Unk

Application Fraud/Changing Coverage After an Accident:

On September 25, 2024 the defendant was involved in an auto vs bicycle accident in which the victim suffered severe injuries. After the accident the defendant altered her insurance policy to include collision and rental coverage to her policy. The defendant then filed a claim for damages to her own vehicle and misrepresented the date of the accident in an effort to get her insurance to cover damages she was not entitled to.

Case Status:

Court Case Pending

IFD-2024-00237-C

Filing Date: 02/07/2025

Charges Filed:

Insurance Fraud, Felony 2

Viking:

\$35,411

Application Fraud/Auto Accident Past Posting:

On June 25, 2024 the defendant was involved in an auto accident while driving her 2005 Yukon without insurance. The defendant called her boyfriend who then purchased the insurance policy and signed the affidavit that the vehicle had not been in an accident.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00189-C

Filing Date: 02/11/2025

Charges Filed:

Insurance Fraud, Felony 2

GEICO:

\$6,598

Application Fraud/Auto Accident Past Posting:

On August 24, 2024 the defendant purchased an insurance policy. Two days later she filed a claim that she had hit a light pole at a restaurant on August 26th. The investigation discovered the defendant had her vehicle towed on August 22, 2024 and that the accident happened two days prior to her purchasing the insurance policy.

Case Status:

Court Case Pending

IFD-2025-00002-C

Filing Date: 02/24/2025

Charges Filed:

Forgery, Felony 3

WCF:

\$Unk.

Forged Certificates of insurance:

In December of 2024 the defendant presented a forged certificate of workers compensation insurance coverage to a general contractor in order to be hired as a sub-contractor for work. The defendant has previously submitted two additional forged certificates of insurance for work.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00268-C

Filing Date: 02/24/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Homesite:

\$1,342

Application Fraud/False Theft Claim:

In June of 2024 the defendant obtained a homeowners insurance policy. The defendant later filed a vehicle burglary claim and alleged that he had a cell phone, subwoofer, and amplifier stolen. It was discovered that the defendant reported these same items stolen in March of 2024 prior to having coverage for these items and that he later obtained insurance and tried to claim a second theft.

Case Status:

Court Case Pending

IFD-2024-00260-C

Filing Date: 02/26/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

GEICO:

\$1,500

Application Fraud/Auto Accident Past Posting:

On November 1, 2024, the defendant was involved in an auto accident while driving without insurance. The defendant purchased insurance after the accident and then filed a new claim that his vehicle was struck by a hit and run driver a few weeks later in a parking lot. The damages from the first accident where the same damages as documented in the false hit and run accident.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00174-C

Filing Date: 03/06/2025

Charges Filed:

Insurance Fraud, Felony 2

Identify Fraud, Felony 2

American Family: \$5,329

Agent Fraud/Premium Avoidance/Issuing Policy Using Stolen Name:

In June of 2024 an insured's commercial vehicle policy was cancelled for non-payment and the defendant agent advised she could not longer renew the policy due to the number of non-payment cancellations. The defendant told the insured she would need to obtain the policy using another person's name. The insured provided the defendant with the name and information for a relative and the agent used this information to issue a policy without this persons consent. The agent also issued a personal lines policy rather than the commercial policy that was required for the insured and used a false garaging address to additionally lower the premium.

Case Status:

Court Case Pending

IFD-2024-00230-C

Filing Date: 03/06/2025

Charges Filed:

Insurance Fraud, Felony 2

Communications Fraud, Felony 2

Forgery, 2 counts, Felony 3

Hartford: \$21,295

Inflated Claim/Forged Documents:

In July of 2024 the defendant filed a claim that a freezer malfunction occurred at his business resulting in inventory spoilage. The insurer paid the claimed amount for food spoilage. In August of 2024 the defendant filed a second claim that the freezer which was not covered in the first claim, was damaged by water in the second claim. The damages were discovered to be the same damages in the first claim. The resulting investigation discovered that the defendant had altered paid amounts in submitted invoices to the insurance company.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00175-C

Filing Date: 004/01/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

American Family \$Unknown

Application Fraud/Auto Accident Past Posting:

On July 13, 2024 the defendant was driving her 2016 dodge Journey without insurance when she was involved in an auto accident. The defendant contacted her insurance company to reinstate her policy and then claimed the accident occurred after she had reinstated her insurance policy.

Case Status:

Court Case Pending

IFD-2025-00046-C

Filing Date: 04/01/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Everspan Financial: \$635

Application Fraud/Pet Insurance Post Loss:

On December 26, 2024 the defendant took their Jack Russell Terrier dog to a pet hospital for treatment. The defendant purchased pet insurance on the same day and then filed a claim that the treatment date was on December 27th. The defendant also altered the pet hospital receipts, changing the dates of service.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00062-C	Filing Date: 04/03/2025
Charges Filed: Pattern of Unlawful Activity, Felony 2 4 counts Insurance Fraud, Misdemeanor A Forgery, Felony 3	Progressive: \$1,167 Travelers: \$614 United Financial: \$295 Sublimity: \$969
Filing False Glass Claims by Auto Glass Vendor: Between January of 2024 and June of 2024 the defendant, who owns an auto glass company, filed multiple false claims for auto glass replacements and rock chip repairs he never made. This is the third time this defendant has been charged with similar crimes.	
Case Status: Court Case Pending	
IFD-2024-00220-C	Filing Date: 04/04/2025
Charges Filed: Insurance Fraud, Felony 2	Travelers \$5,000,000
Malingering: The defendant was involved in an auto accident in June of 2021. As a result the defendant claimed numerous injuries and has amassed over \$300,000 in medical treatments. Three years post accident the defendant still maintains she is unable to run, engage in sports, and most outdoor activities. Her attorney has demanded a settlement between \$3,000,000 and \$5,000,000. While maintaining her inability to perform her past activities it was discovered that she has been playing competitive pickle ball.	
Case Status: Court Action Pending	

Summary of Criminal Cases Filed

IFD-2024-00228-C

Filing Date: 04/07/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive: \$9,354

Premium Avoidance/Unlisted Drivers:

In July of 2024 the defendant purchased an auto insurance policy where he listed himself as the only household member and driver. He later added a second vehicle to the policy which was involved in an auto accident in August of 2024. The investigation discovered that the defendant filed a claim that he was the driver when he was not in the vehicle at the time of the accident and the vehicle was being driven by the owner of the second vehicle. The defendant placed her car on his policy because it was too expensive for her to obtain her own insurance policy.

Case Status:

Court Case Pending

IFD-2024-00144-C

Filing Date: 04/7/2025

Charges Filed:

Workers Comp Insurance Fraud, Felony 2
Forgery, Felony 3

Hartford: \$19,623

Working While Collecting Total Temporary Disability Payments:

The defendant was injured while working in September of 2023 and began collecting temporary total disability alleging he was unable to return to work. It was discovered that the defendant returned to work ten days after he began receiving benefits and continued receiving disability payments until November of 2024.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2025-00039-C

Filing Date: 04/07/2025

Charges Filed:

Insurance Fraud, Felony 3

Root Insurance: \$3,374

Premium Avoidance/Auto Accident Past Posting:

In December of 2024 the defendant was involved in an auto accident while driving her 2023 Subaru Forester without insurance. The defendant renewed her insurance policy after the accident and then filed a claim the next day claimed the accident occurred after she had reinstated her insurance policy.

Case Status:

Court Case Pending

IFD-2024-00005-C

Filing Date: 04/08/2025

Charges Filed:

Insurance Fraud, Felony 2

Progressive: \$6,394

Paper Accident/Prior Damages:

In October of 2025 the defendant filed a claim that she had spun out in her 2001 Dodge Ram truck. The defendant had purchased the policy on the truck in 2024. The investigation discovered that the IFD had received a prior referral regarding this truck being involved in an accident while the defendant's son was driving in 2023 prior to the policy being purchased. The damages from the 2023 accident are the same as she was reporting in this claim.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00248-C

Filing Date: 04/09/2025

Charges Filed:

Insurance Fraud, Misdemeanor A
Driving Without Insurance, Misdemeanor C

GEICO: \$Unknown

Premium Avoidance/Unlisted Commercial Drivers:

On October 25, 2024 the defendant was involved in an auto accident while driving his 2016 Nissan Altima without insurance. The defendant purchased insurance and then claimed the accident happened after he had purchased the insurance policy.

Case Status:

Court Case Pending

IFD-2025-00020-C

Filing Date: 04/21/2025

Charges Filed:

Insurance Fraud, Felony 3

Progressive: \$2,545

Application Fraud/Auto Accident Past Posting:

In November of 2024 the defendant's insurance policy lapsed for non-payment. The defendant was involved in an auto accident a few weeks later when she ran a red light. The defendant called her insurance and renewed her policy after the accident while claiming that she had not been involved in any accidents during the policy lapse.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2025-00047-C

Filing Date: 04/21/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Root:

\$3,500

Application Fraud/Auto Accident Past Posting:

In December of 2024 the defendant purchased a policy for her 2020 Hyundai Sonata. A week later she filed a claim that her vehicle had been hit by a hit and run driver. The investigation discovered that the damages claimed in this loss were present prior to her purchasing the insurance policy.

Case Status:

Court Case Pending

IFD-2025-00069-C

Filing Date: 04/30/2025

Charges Filed:

Insurance Fraud, Felony 2

Progressive:

\$5,617

Auto Accident Past Posting:

On February 13, 2024 the defendant lost control of his Lexus due to weather and hit a barrier while driving without insurance. The defendant later purchased insurance and then filed a claim that the accident had occurred on February 20th, after he had purchased his insurance.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00240-C

Filing Date: 04/30/2025

Charges Filed:

Insurance Fraud, Felony 3

Progressive: \$5,232

Auto Accident Past Posting:

On October 16, 2024, the defendant was involved in an auto accident while driving his 2023 Honda Accord with liability only insurance. After the accident the defendant changed his insurance policy to be full coverage and then filed a claim that the accident happened after he changed the policy coverage.

Case Status:

Court Case Pending

IFD-2025-00033-C

Filing Date: 05/7/2025

Charges Filed:

Insurance Fraud, Felony 2

Progressive: \$10,140

Duplicate Damage/Double Dipping:

In December of 2024, the defendant purchased an auto policy from Progressive Insurance. A few weeks later he filed a claim that his 2019 Dodge Ram truck had been damaged while staying at a timeshare in Snowbird. The investigation discovered that the defendant had filed a claim two years prior for the same damages with Auto Owners Insurance.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2025-00013-C

Filing Date: 05/07/2025

Charges Filed:

Insurance Fraud, Felony 2
Forgery, Felony 3

Progressive: \$1,979

Application Fraud/Trailer Damage Past Posting:

In September of 2024 the defendant purchased a 2022 Highland camp trailer. In October of that same year, the defendant filed a claim with Progressive that the trailer had been damaged during a wind gust while camping at Lava Hot Springs. The investigation discovered that the defendant altered a camping receipt he presented as proof of when he was camping. The actual date he was in Lava Hot Springs camping was in September of 2024 prior to his purchasing insurance.

Case Status:

Court Case Pending

IFD-2025-00068-C

Filing Date: 05/07/2025

Charges Filed:

Insurance Fraud, Misdemeanor A
Forgery, Felony 3

WCF: \$Unk

Forged Certificates of Workers Compensation Insurance:

In March of 2025, it was discovered that the defendant had provided two altered certificates of insurance as a subcontractor to the general contractor her company was working for. Both certificates of insurance were altered from a prior policy and the defendant did not have workers compensation coverage.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2024-00266-C

Filing Date: 05/19/2025

Charges Filed:

Insurance Fraud, Felony 3

Progressive:

\$2,357

Premium Avoidance/Auto Accident Past Posting:

In February of 2024 the defendant crashed his 2002 Honda motorcycle while driving in St. George without insurance. The defendant purchased an insurance policy with Progressive a few days later and then filed a claim that the accident happened in May of 2024. The defendant claimed he had repaired the prior accident damages himself but photos from the prior accident showed damages in the current claim were the same.

Case Status:

Court Case Pending

IFD-2024-00244-C

Filing Date: 06/02/2025

Charges Filed:

Insurance Fraud, Felony 3

Viking:

\$7,414

Fictitious Auto Accident Claim:

In July of 2024 the suspect's son was involved in an auto accident. He was not listed on the policy as a driver and the damages for his vehicle was denied. In August of 2024 the suspect (mother) filed a false claim with Viking Insurance that she had hit a deer. The damages reported from the deer claim were the same damages from the earlier accident claim which had been denied.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2025-00041-C

Filing Date: 06/02/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive:

\$9,695

Auto Accident Past Posting:

On October 8, 2024 the defendant was involved in an auto accident while driving without insurance. The defendant purchased insurance and then claimed the accident had occurred after the insurance was purchased.

Case Status:

Court Case Pending

IFD-2025-00031-C

Filing Date: 06/05/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive:

\$4,200

Auto Accident Past Posting:

In December of 2024 the defendant's auto insurance policy cancelled for non-payment. She was later involved in an auto accident in January of 2025. She contacted her insurance agent and discovered her policy had cancelled. She reinstated her policy and after waiting a few days filed a new claim that the accident happened after she had reinstated her policy.

Case Status:

Court Action Pending

Summary of Criminal Cases Filed

IFD-2025-00060-C

Filing Date: 06/05/2025

Charges Filed:

Insurance Fraud, Misdemeanor A

Progressive: \$2,500

Auto Accident Coverage Past Posting:

In December of 2024 the defendant was involved in an auto accident while driving with liability only coverage. The defendant added full coverage to his policy and the filed a claim that the accident happened after he had changed his policy.

Case Status:

Court Case Pending

IFD-2025-00065-C

Filing Date: 06/11/2025

Charges Filed:

Insurance Fraud, Felony 3

Insurance Fraud, Felony 3

Nationwide: \$4,917

Accident Double Dipping/Paper Accidents:

In November of 2022 the defendant was involved in an auto accident where his vehicle was damaged. He was paid for these damages from the at fault driver's insurance but never repaired his vehicle. The defendant filed to additional claims with his own insurance claiming the same damages in June of 2023 and again in January of 2025. The defendant claimed to have repaired the damages on his own, but evidence indicates repairs were never made.

Case Status:

Court Action Pending

The seal of the Utah Insurance Department is a circular emblem. It features a central shield with a sunburst at the top, a star on the left, and a sheaf of wheat on the right. The word "INDUSTRY" is inscribed on the shield. The shield is surrounded by a rope border. The outer ring of the seal contains the text "INSURANCE DEPARTMENT" at the top and "FRAUD DIVISION" at the bottom, separated by a decorative border of yellow triangles.

Utah Insurance Department

4315 South 2700 West, Suite 2300
Taylorsville, Utah 84129

801-957-9200 (Office)
<http://www.insurance.utah.gov>

Fraud Division

1385 South State Street, Suite 110
Salt Lake City, Utah 84115

801-468-0233 (Office) * 801-468-0003 (Fax)
<http://www.ifd.utah.gov>