

NOV 27 2019



**ETHICS DISCLOSURE STATEMENT  
CONFLICTS OF INTEREST – DECISIONS AND VOTING**  
State Form 55860 (R / 10-15)  
OFFICE OF THE INSPECTOR GENERAL  
IC 4-2-6-9

FILED

In accordance with IC 4-2-6-9, you must file your disclosure with the State Ethics Commission no later than seven (7) days after the conduct that gives rise to the conflict. You must also include a copy of the notification provided to your agency appointing authority and ethics officer when filing this disclosure. This disclosure will be posted on the Inspector General's website.

Name (last) Schelle	Name (first) Clint	Name (middle) Daunton
Name of office or agency Family and Social Services Administration		Job title Program Integrity Analyst
Address of office (number and street) 402 W Washington St		City Indianapolis
		ZIP code 46204
Office telephone number ( 317 ) 234-8018	Office e-mail address (required) clint.schelle@fssa.in.gov	
Describe the conflict of interest: I currently work as a Medicaid Program Integrity Analyst for FSSA and I am seeking employment with Caresource. Caresource is one of the four Managed Care Entities (MCEs) that contracts with FSSA to coordinate care for members enrolled in Indiana Medicaid programs. In my job at FSSA, I review fraud reports submitted by our MCE partners partners and verify that Program Integrity has all of the information to be heard by the Credible Allegation of Fraud (CAF) Committee. Note: I sit in on the CAF committee meetings (as I help coordinate them) but I don't vote on any of the cases. Also, I review the MCEs proposed Powerpoint slides for their CAF Committee presentations and make suggestions as to how they can be improved. I also communicate with our MCE partners to ask them if they have any information about providers that PI is investigating. Finally, I participate in meetings with our MCE partners on a monthly basis where we coordinate operations and discuss ongoing investigations/audits. Concerning the position: I contacted our liaison at Caresource to inquire about the position on 10/28/19 and later applied for the position on 10/29/19. Before applying, I notified our contact at Caresource that I would be doing so. Caresource has yet to contact me about scheduling a job interview. Note: I received permission from my supervisor before contacting Caresource about the position and applying for it.		

Describe the screen established by your ethics officer: *(Attach additional pages as needed.)*

Clint's supervisor will ensure that he is not assigned any case or file involving Caresource and that all previously assigned matters involving Caresource will be assigned to other staff.

**AFFIRMATION**

Your signature below affirms that your disclosures on this form are true, complete, and correct to the best of your knowledge and belief. In addition to this form, you have attached a copy of your written disclosure to your agency appointing authority and ethics officer.

Signature of state officer, employee or special state appointee

*Clint Schelle*

Date signed (month, day, year)

11/8/19

Printed full name of state officer, employee or special state appointee

Clint Danton Schelle

**FOR ETHICS OFFICER USE ONLY**

Your signature below affirms that you have reviewed this disclosure form and that it is true, complete, and correct to the best of your knowledge and belief. You also attest that your agency has implemented the screen described above.

Signature of ethics officer

*Latosha N. Higgins*

Date signed (month, day, year)

November 27, 2019

Printed full name of ethics officer

Latosha N. Higgins

**From:** [Sullivan, Jennifer](#)  
**To:** [Schelle, Clint D](#)  
**Cc:** [Higgins, Latosha](#); [Hilliker, Amelia A](#)  
**Subject:** Re: Caresource Job Opportunity  
**Date:** Wednesday, November 20, 2019 7:26:40 AM  
**Attachments:** [Outlook-xyyqfem.png](#)

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Thank you Clint and good luck.

If you do end up heading over to Caresource, please make sure to avail yourself of an exit interview so that we can learn from your experience.

Sincerely,  
Jen

Jennifer Sullivan (Walthall), MD MPH  
Secretary, Indiana Family and Social Services Administration  
302 W Washington Street, W461  
Indianapolis, IN 46204  
[Jennifer.Sullivan@fssa.IN.gov](mailto:Jennifer.Sullivan@fssa.IN.gov)  
317-233-4690 (office)  
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[@FSSAIndiana](#)



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**From:** Schelle, Clint D <[Clint.Schelle@fssa.IN.gov](mailto:Clint.Schelle@fssa.IN.gov)>  
**Sent:** Tuesday, November 19, 2019 3:12 PM  
**To:** Sullivan, Jennifer <[Jennifer.Sullivan@fssa.IN.gov](mailto:Jennifer.Sullivan@fssa.IN.gov)>  
**Cc:** Higgins, Latosha <[Latosha.Higgins@fssa.IN.gov](mailto:Latosha.Higgins@fssa.IN.gov)>; Hilliker, Amelia A <[Amelia.Hilliker@fssa.IN.gov](mailto:Amelia.Hilliker@fssa.IN.gov)>  
**Subject:** Caresource Job Opportunity

Hello Dr. Sullivan,

I am writing you to advise that I have applied for a position with Caresource and I would like to file the attached ethics disclosure.

Please let me know if you have any questions.

Thanks!

Clint Schelle ▪ Program Integrity Analyst  
Office of Medicaid Policy and Planning ▪ Indiana Family Social Services Administration  
402 W. Washington St., Room W374 ▪ MS-07 ▪ Indianapolis, IN 46204  
O: (317) 234-8018 ▪ [Clint.Schelle@fssa.in.gov](mailto:Clint.Schelle@fssa.in.gov) ▪ <http://www.in.gov/fssa>