

26	AMENDS:
27	63J-4-202, as last amended by Laws of Utah 2011, Chapter 151
28	63J-4a-201, as enacted by Laws of Utah 2011, Chapter 151
29	63J-4a-202, as enacted by Laws of Utah 2011, Chapter 151
30	63J-4a-502, as enacted by Laws of Utah 2011, Chapter 151
31	
32	Be it enacted by the Legislature of the state of Utah:
33	Section 1. Section <b>63J-4-202</b> is amended to read:
34	63J-4-202. Appointment of director and state planning coordinator.
35	(1) (a) The governor shall appoint, to serve at the governor's pleasure:
36	(i) a director of the Governor's Office of Planning and Budget; and
37	(ii) a state planning coordinator.
38	(b) The state planning coordinator is considered part of the office for purposes of
39	administration.
40	(2) The governor shall establish the director's salary within the salary range fixed by
41	the Legislature in Title 67, Chapter 22, State Officer Compensation.
42	[(3) (a) In accordance with Section 63J-4a-201, the governor shall appoint, with the
43	advice and consent of the Senate, the inspector general of the Office of Inspector General of
44	Medicaid Services.]
45	[(b) The Office of Inspector General of Medicaid Services is considered part of the
46	office for purposes of administration.]
47	Section 2. Section <b>63J-4a-201</b> is amended to read:
48	63J-4a-201. Creation of office Inspector general Appointment Term.
49	(1) There is created, within the [Governor's Office of Planning and Budget] State
50	Auditor's Office, the Office of Inspector General of Medicaid Services.
51	(2) The [governor] state auditor shall appoint the inspector general[, with the advice
52	and consent of the Senate] of Medicaid services.
53	(3) A person appointed as the inspector general of Medicaid services shall:
54	(a) be a certified public accountant or a certified internal auditor; and
55	(b) have the following qualifications:
56	(i) a general knowledge of the type of methodology and controls necessary to audit,

57	investigate, and identify fraud, waste, and abuse;
58	(ii) strong management skills;
59	(iii) extensive knowledge of, and at least seven years experience with, performance
60	audit methodology;
61	(iv) the ability to oversee and execute an audit; and
62	(v) strong interpersonal skills.
63	(4) $\hat{\mathbf{H}} \rightarrow \underline{\mathbf{(a)}} \leftarrow \hat{\mathbf{H}}$ The inspector general[:] of Medicaid services shall, except as provided by
64	Subsection (5), serve a term of two years beginning on January 1 of an even year and ending on
65	December 31 of the subsequent odd year.
65a	Ĥ→ (b) The state auditor may remove the inspector general of Medicaid services for
65b	<u>cause.</u> ←Ĥ
66	[(a) shall serve a term of two years; and]
67	[(b) may be removed by the governor, for cause.]
68	[(5) If the inspector general is removed for cause, a new inspector general shall be
69	appointed, with the advice and consent of the Senate, to serve a two-year term.]
70	(5) The state auditor shall appoint a temporary inspector general of Medicaid services
71	to serve from August 1, 2013 through December 31, 2013.
72	Section 3. Section <b>63J-4a-202</b> is amended to read:
73	63J-4a-202. Duties and powers of the inspector general of Medicaid services and
74	office.
75	(1) The inspector general <u>of Medicaid services</u> shall:
76	(a) administer, direct, and manage the office;
77	(b) inspect and monitor the following in relation to the state Medicaid program:
78	(i) the use and expenditure of federal and state funds;
79	(ii) the provision of health benefits and other services;
80	(iii) implementation of, and compliance with, state and federal requirements; and
81	(iv) records and recordkeeping procedures;
82	(c) receive reports of potential fraud, waste, or abuse in the state Medicaid program;
83	(d) investigate and identify potential or actual fraud, waste, or abuse in the state
84	Medicaid program;
85	(e) consult with the Centers for Medicaid and Medicare Services and other states to
86	determine and implement best practices for discovering and eliminating fraud, waste, and
27	abuse of Medicaid funds:

88	(f) obtain, develop, and utilize computer algorithms to identify fraud, waste, or abuse
89	in the state Medicaid program;
90	(g) work closely with the fraud unit to identify and recover improperly or fraudulently
91	expended Medicaid funds;
92	(h) audit, inspect, and evaluate the functioning of the division to ensure that the state
93	Medicaid program is managed in the most efficient and cost-effective manner possible;
94	(i) regularly advise the department and the division of an action that should be taken to
95	ensure that the state Medicaid program is managed in the most efficient and cost-effective
96	manner possible;
97	(j) refer potential criminal conduct, relating to Medicaid funds or the state Medicaid
98	program, to the fraud unit;
99	(k) determine ways to:
100	(i) identify, prevent, and reduce fraud, waste, and abuse in the state Medicaid program;
101	and
102	(ii) recoup costs, reduce costs, and avoid or minimize increased costs of the state
103	Medicaid program;
104	(1) seek recovery of improperly paid Medicaid funds;
105	(m) track recovery of Medicaid funds by the state;
106	(n) in accordance with Section [ <del>63J-4a-501</del> ] <u>63J-4a-502</u> :
107	(i) report on the actions and findings of the inspector general; and
108	(ii) make recommendations to the Legislature and the governor;
109	(o) provide training to agencies and employees on identifying potential fraud, waste, or
110	abuse of Medicaid funds; and
111	(p) develop and implement principles and standards for the fulfillment of the duties of
112	the inspector general, based on principles and standards used by:
113	(i) the Federal Offices of Inspector General;
114	(ii) the Association of Inspectors General; and
115	(iii) the United States Government Accountability Office.
116	(2) The office may conduct a performance or financial audit of:
117	(a) a state executive branch entity or a local government entity, including an entity
118	described in Subsection 63J-4a-301(3), that:

119	(i) manages or oversees a state Medicaid program; or
120	(ii) manages or oversees the use or expenditure of state or federal Medicaid funds; or
121	(b) Medicaid funds received by a person by a grant from, or under contract with, a state
122	executive branch entity or a local government entity.
123	(3) The inspector general of Medicaid services, or a designee of the inspector general
124	of Medicaid services within the office, may take a sworn statement or administer an oath.
125	Section 4. Section <b>63J-4a-502</b> is amended to read:
126	63J-4a-502. Report and recommendations to governor and Executive
127	Appropriations Committee.
128	(1) The inspector general of Medicaid services shall, on an annual basis, prepare a
129	written report on the activities of the office for the preceding fiscal year.
130	(2) The report shall include:
131	(a) non-identifying information, including statistical information, on:
132	(i) the items described in Subsection 63J-4a-202(1)(b) and Section 63J-4a-204;
133	(ii) action taken by the office and the result of that action;
134	(iii) fraud, waste, and abuse in the state Medicaid program;
135	(iv) the recovery of fraudulent or improper use of state and federal Medicaid funds;
136	(v) measures taken by the state to discover and reduce fraud, waste, and abuse in the
137	state Medicaid program;
138	(vi) audits conducted by the office; and
139	(vii) investigations conducted by the office and the results of those investigations;
140	(b) recommendations on action that should be taken by the Legislature or the governor
141	to:
142	(i) improve the discovery and reduction of fraud, waste, and abuse in the state
143	Medicaid program;
144	(ii) improve the recovery of fraudulently or improperly used Medicaid funds; and
145	(iii) reduce costs and avoid or minimize increased costs in the state Medicaid program;
146	(c) recommendations relating to rules, policies, or procedures of a state or local
147	government entity; and
148	(d) services provided by the state Medicaid program that exceed industry standards.
149	(3) The report described in Subsection (1) may not include any information that would

150	interfere with or jeopardize an ongoing criminal investigation or other investigation.
151	(4) [The] On or before October 1 of each year, the inspector general of Medicaid
152	services shall provide the report described in Subsection (1) to the Executive Appropriations
153	Committee of the Legislature and to the governor [on or before October 1 of each year].
154	(5) The inspector general of Medicaid services shall present the report described in
155	Subsection (1) to the Executive Appropriations Committee of the Legislature before November
156	30 of each year.
157	Section 5. Effective date.
158	If approved by two-thirds of all the members elected to each house, this bill takes effect
159	upon approval by the governor, or the day following the constitutional time limit of Utah
160	Constitution Article VII, Section 8, without the governor's signature, or in the case of a veto,
161	the date of veto override.