1	SUBSTANCE ABUSE TREATMENT FRAUD
2	2016 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Eric K. Hutchings
5	Senate Sponsor:
6	I
7	LONG TITLE
8	General Description:
9	This bill enacts provisions in the Insurance Code, the Utah Criminal Code, and the Utah
10	Human Services Code related to substance abuse treatment fraud.
11	Highlighted Provisions:
12	This bill:
13	 enacts provisions to provide that a person commits a fraudulent insurance act if that
14	person, with intent to deceive or defraud, pays or sponsors payment for a health
15	insurance premium in order to directly or indirectly receive proceeds from the care
16	or treatment of the insured;
17	 requires the Office of Licensing, Department of Human Services, to make rules
18	establishing:
19	• what constitutes an "outpatient treatment program";
20	• a procedure requiring a licensee to allow an insurer the ability to audit the
21	licensee's records related to any services or supplies billed to the insurer; and
22	• a protocol for the office to investigate and process complaints about licensees;
23	 directs the Office of Licensing, Department of Human Services, to electronically
24	post notices of agency action on the office's website; and
25	 directs the Division of Substance Abuse and Mental Health, Department of Human
26	Services, to make rules to develop minimum standards for licensed public and
27	private providers of substance abuse and mental health programs.

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28	Money Appropriated in this Bill:
29	None
30	Other Special Clauses:
31	None
32	Utah Code Sections Affected:
33	AMENDS:
34	31A-31-103, as last amended by Laws of Utah 2004, Chapter 104
35	62A-2-106, as last amended by Laws of Utah 2013, Chapter 442
36	62A-15-103, as last amended by Laws of Utah 2015, Chapter 412
37	76-6-521, as last amended by Laws of Utah 2004, Chapter 104
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39	Be it enacted by the Legislature of the state of Utah:
40	Section 1. Section 31A-31-103 is amended to read:
41	31A-31-103. Fraudulent insurance act.
42	(1) A person commits a fraudulent insurance act if that person with intent to deceive or
43	defraud:
44	(a) knowingly presents or causes to be presented to an insurer any oral or written
45	statement or representation knowing that the statement or representation contains false,
46	incomplete, or misleading information concerning any fact material to an application for the
47	issuance or renewal of an insurance policy, certificate, or contract;
48	(b) knowingly presents or causes to be presented to an insurer any oral or written
49	statement or representation:
50	(i) (A) as part of, or in support of, a claim for payment or other benefit pursuant to an
51	insurance policy, certificate, or contract; or
52	(B) in connection with any civil claim asserted for recovery of damages for personal or
53	bodily injuries or property damage; and
54	(ii) knowing that the statement or representation contains false, incomplete, or
55	misleading information concerning any fact or thing material to the claim;
56	(c) knowingly accepts a benefit from the proceeds derived from a fraudulent insurance
57	act;
58	(d) assists, abets, solicits, or conspires with another to commit a fraudulent insurance

59	act;
60	(e) knowingly supplies false or fraudulent material information in any document or
61	statement required by the department;
62	(f) knowingly fails to forward a premium to an insurer in violation of Section
63	31A-23a-411.1; [or]
64	(g) knowingly employs, uses, or acts as a runner for the purpose of committing a
65	fraudulent insurance act[.]; or
66	(h) pays or sponsors payment for a health insurance premium in order to directly or
67	indirectly receive proceeds from the care or treatment of the insured.
68	(2) A service provider commits a fraudulent insurance act if that service provider with
69	intent to deceive or defraud:
70	(a) knowingly submits or causes to be submitted a bill or request for payment:
71	(i) containing charges or costs for an item or service that are substantially in excess of
72	customary charges or costs for the item or service; or
73	(ii) containing itemized or delineated fees for what would customarily be considered a
74	single procedure or service;
75	(b) knowingly furnishes or causes to be furnished an item or service to a person:
76	(i) substantially in excess of the needs of the person; or
77	(ii) of a quality that fails to meet professionally recognized standards;
78	(c) knowingly accepts a benefit from the proceeds derived from a fraudulent insurance
79	act; or
80	(d) assists, abets, solicits, or conspires with another to commit a fraudulent insurance
81	act.
82	(3) An insurer commits a fraudulent insurance act if that insurer with intent to deceive
83	or defraud:
84	(a) knowingly withholds information or provides false or misleading information with
85	respect to an application, coverage, benefits, or claims under a policy or certificate;
86	(b) assists, abets, solicits, or conspires with another to commit a fraudulent insurance
87	act;
88	(c) knowingly accepts a benefit from the proceeds derived from a fraudulent insurance
89	act; or

90	(d) knowingly supplies false or fraudulent material information in any document or
91	statement required by the department.
92	(4) An insurer or service provider is not liable for any fraudulent insurance act
93	committed by an employee without the authority of the insurer or service provider unless the
94	insurer or service provider knew or should have known of the fraudulent insurance act.
95	Section 2. Section 62A-2-106 is amended to read:
96	62A-2-106. Office responsibilities.
97	(1) Subject to the requirements of federal and state law, the office shall:
98	(a) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
99	Rulemaking Act, to establish:
100	(i) except as provided in Subsection (1)(a)(ii), basic health and safety standards for
101	licensees, that shall be limited to:
102	(A) fire safety;
103	(B) food safety;
104	(C) sanitation;
105	(D) infectious disease control;
106	(E) safety of the:
107	(I) physical facility and grounds; and
108	(II) area and community surrounding the physical facility;
109	(F) transportation safety;
110	(G) emergency preparedness and response;
111	(H) the administration of medical standards and procedures, consistent with the related
112	provisions of this title;
113	(I) staff and client safety and protection;
114	(J) the administration and maintenance of client and service records;
115	(K) staff qualifications and training, including standards for permitting experience to
116	be substituted for education, unless prohibited by law;
117	(L) staff to client ratios; and
118	(M) access to firearms;
119	(ii) basic health and safety standards for therapeutic schools, that shall be limited to:
120	(A) fire safety, except that the standards are limited to those required by law or rule

121	under Title 53, Chapter 7, Part 2, Fire Prevention and Fireworks Act;
122	(B) food safety;
123	(C) sanitation;
124	(D) infectious disease control, except that the standards are limited to:
125	(I) those required by law or rule under Title 26, Utah Health Code or Title 26A, Local
126	Health Authorities; and
127	(II) requiring a separate room for clients who are sick;
128	(E) safety of the physical facility and grounds, except that the standards are limited to
129	those required by law or rule under Title 53, Chapter 7, Part 2, Fire Prevention and Fireworks
130	Act;
131	(F) transportation safety;
132	(G) emergency preparedness and response;
133	(H) access to appropriate medical care, including:
134	(I) subject to the requirements of law, designation of a person who is authorized to
135	dispense medication; and
136	(II) storing, tracking, and securing medication;
137	(I) staff and client safety and protection that permits the school to provide for the direct
138	supervision of clients at all times;
139	(J) the administration and maintenance of client and service records;
140	(K) staff qualifications and training, including standards for permitting experience to
141	be substituted for education, unless prohibited by law;
142	(L) staff to client ratios; and
143	(M) access to firearms;
144	(iii) procedures and standards for permitting a licensee to:
145	(A) provide in the same facility and under the same conditions as children, residential
146	treatment services to a person 18 years old or older who:
147	(I) begins to reside at the licensee's residential treatment facility before the person's
148	18th birthday;
149	(II) has resided at the licensee's residential treatment facility continuously since the
150	time described in Subsection (1)(a)(iii)(A)(I);
151	(III) has not completed the course of treatment for which the person began residing at

152	the licensee's residential treatment facility; and
153	(IV) voluntarily consents to complete the course of treatment described in Subsection
154	(1)(a)(iii)(A)(III); or
155	(B) (I) provide residential treatment services to a child who is:
156	(Aa) 12 years old or older; and
157	(Bb) under the custody of the Division of Juvenile Justice Services; and
158	(II) provide, in the same facility as a child described in Subsection (1)(a)(iii)(B)(I),
159	residential treatment services to a person who is:
160	(Aa) at least 18 years old, but younger than 21 years old; and
161	(Bb) under the custody of the Division of Juvenile Justice Services;
162	(iv) minimum administration and financial requirements for licensees;
163	(v) guidelines for variances from rules established under this Subsection (1); [and]
164	(vi) minimum ethical responsibilities of an adoption agency licensed under this
165	chapter, including prohibiting an adoption agency or its employee from misrepresenting facts
166	or information;
167	(vii) what constitutes an "outpatient treatment program" for purposes of this chapter;
168	(viii) a procedure requiring a licensee to allow an insurer the ability to audit the
169	licensee's records related to any services or supplies billed to the insurer and a procedure
170	allowing the licensee and the insurer to contact the Insurance Department to resolve any
171	disputes;
172	(ix) a protocol for the office to investigate and process complaints about licensees; and
173	(x) a procedure for licensees to report incidents;
174	(b) enforce rules relating to the office;
175	(c) issue licenses in accordance with this chapter;
176	(d) if the United States Department of State executes an agreement with the office that
177	designates the office to act as an accrediting entity in accordance with the Intercountry
178	Adoption Act of 2000, Pub. L. No. 106-279, accredit one or more agencies and persons to
179	provide intercountry adoption services pursuant to:
180	(i) the Intercountry Adoption Act of 2000, Pub. L. No. 106-279; and
181	(ii) the implementing regulations for the Intercountry Adoption Act of 2000, Pub. L.
182	No. 106-279;

183	(e) make rules to implement the provisions of Subsection (1)(d);
184	(f) conduct surveys and inspections of licensees and facilities in accordance with
185	Section 62A-2-118;
186	(g) collect licensure fees;
187	(h) notify licensees of the name of a person within the department to contact when
188	filing a complaint;
189	(i) investigate complaints regarding any licensee or human services program;
190	(j) have access to all records, correspondence, and financial data required to be
191	maintained by a licensee;
192	(k) have authority to interview any client, family member of a client, employee, or
193	officer of a licensee; [and]
194	(l) have authority to deny, condition, revoke, suspend, or extend any license issued by
195	the department under this chapter by following the procedures and requirements of Title 63G,
196	Chapter 4, Administrative Procedures Act[-]; and
197	(m) electronically post notices of agency action issued to a human services program,
198	with the exception of a foster home, on the office's website, in accordance with Title 63G,
199	Chapter 2, Government Records Access and Management Act.
200	(2) In establishing rules under Subsection (1)(a)(ii)(G), the office shall require a
201	licensee to establish and comply with an emergency response plan that requires clients and staff
202	to:
203	(a) immediately report to law enforcement any significant criminal activity, as defined
204	by rule, committed:
205	(i) on the premises where the licensee operates its human services program;
206	(ii) by or against its clients; or
207	(iii) by or against a staff member while the staff member is on duty;
208	(b) immediately report to emergency medical services any medical emergency, as
209	defined by rule:
210	(i) on the premises where the licensee operates its human services program;
211	(ii) involving its clients; or
212	(iii) involving a staff member while the staff member is on duty; and
213	(c) immediately report other emergencies that occur on the premises where the licensee

214	operates its human services program to the appropriate emergency services agency.
215	Section 3. Section 62A-15-103 is amended to read:
216	62A-15-103. Division Creation Responsibilities.
217	(1) There is created the Division of Substance Abuse and Mental Health within the
218	department, under the administration and general supervision of the executive director. The
219	division is the substance abuse authority and the mental health authority for this state.
220	(2) The division shall:
221	(a) (i) educate the general public regarding the nature and consequences of substance
222	abuse by promoting school and community-based prevention programs;
223	(ii) render support and assistance to public schools through approved school-based
224	substance abuse education programs aimed at prevention of substance abuse;
225	(iii) promote or establish programs for the prevention of substance abuse within the
226	community setting through community-based prevention programs;
227	(iv) cooperate with and assist treatment centers, recovery residences, and other
228	organizations that provide services to individuals recovering from a substance abuse disorder,
229	by identifying and disseminating information about effective practices and programs;
230	(v) promulgate rules in accordance with Title 63G, Chapter 3, Utah Administrative
231	Rulemaking Act, to develop, in collaboration with public and private programs, minimum
232	standards for public and private providers of substance abuse and mental health programs
233	licensed by the Department of Human Services under Title 62A, Chapter 2, Licensure of
234	Programs and Facilities;
235	[(v)] (vi) promote integrated programs that address an individual's substance abuse,
236	mental health, physical health, and criminal risk factors;
237	[(vi)] (vii) establish and promote an evidence-based continuum of screening,
238	assessment, prevention, treatment, and recovery support services in the community for
239	individuals with substance abuse and mental illness that addresses criminal risk factors;
240	[(vii)] (viii) evaluate the effectiveness of programs described in Subsection (2);
241	[(viii)] (ix) consider the impact of the programs described in Subsection (2) on:
242	(A) emergency department utilization;
243	(B) jail and prison populations;
244	(C) the homeless population; and

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245 (D) the child welfare system; and 246 $\left[\frac{(ix)}{(ix)}\right]$ (x) promote or establish programs for education and certification of instructors to 247 educate persons convicted of driving under the influence of alcohol or drugs or driving with 248 any measurable controlled substance in the body; 249 (b) (i) collect and disseminate information pertaining to mental health; 250 (ii) provide direction over the state hospital including approval of its budget, 251 administrative policy, and coordination of services with local service plans; 252 (iii) promulgate rules in accordance with Title 63G, Chapter 3, Utah Administrative 253 Rulemaking Act, to educate families concerning mental illness and promote family 254 involvement, when appropriate, and with patient consent, in the treatment program of a family 255 member; and 256 (iv) promulgate rules in accordance with Title 63G, Chapter 3, Utah Administrative 257 Rulemaking Act, to direct that all individuals receiving services through local mental health 258 authorities or the Utah State Hospital be informed about and, if desired, provided assistance in 259 completion of a declaration for mental health treatment in accordance with Section 260 62A-15-1002; 261 (c) (i) consult and coordinate with local substance abuse authorities and local mental 262 health authorities regarding programs and services; 263 (ii) provide consultation and other assistance to public and private agencies and groups 264 working on substance abuse and mental health issues; 265 (iii) promote and establish cooperative relationships with courts, hospitals, clinics, 266 medical and social agencies, public health authorities, law enforcement agencies, education and 267 research organizations, and other related groups; 268 (iv) promote or conduct research on substance abuse and mental health issues, and 269 submit to the governor and the Legislature recommendations for changes in policy and 270 legislation; 271 (v) receive, distribute, and provide direction over public funds for substance abuse and 272 mental health services: 273 (vi) monitor and evaluate programs provided by local substance abuse authorities and 274 local mental health authorities; 275 (vii) examine expenditures of any local, state, and federal funds;

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276 (viii) monitor the expenditure of public funds by: 277 (A) local substance abuse authorities; 278 (B) local mental health authorities; and 279 (C) in counties where they exist, the private contract provider that has an annual or 280 otherwise ongoing contract to provide comprehensive substance abuse or mental health 281 programs or services for the local substance abuse authority or local mental health authorities; 282 (ix) contract with local substance abuse authorities and local mental health authorities 283 to provide a comprehensive continuum of services that include community-based services for individuals involved in the criminal justice system, in accordance with division policy, contract 284 285 provisions, and the local plan; 286 (x) contract with private and public entities for special statewide or nonclinical 287 services, or services for individuals involved in the criminal justice system, according to 288 division rules: 289 (xi) review and approve each local substance abuse authority's plan and each local 290 mental health authority's plan in order to ensure: 291 (A) a statewide comprehensive continuum of substance abuse services; 292 (B) a statewide comprehensive continuum of mental health services; 293 (C) services result in improved overall health and functioning: 294 (D) a statewide comprehensive continuum of community-based services designed to 295 reduce criminal risk factors for individuals who are determined to have substance abuse or 296 mental illness conditions or both, and who are involved in the criminal justice system; 297 (E) compliance, where appropriate, with the certification requirements in Subsection 298 (2)(i); and 299 (F) appropriate expenditure of public funds; 300 (xii) review and make recommendations regarding each local substance abuse 301 authority's contract with its provider of substance abuse programs and services and each local 302 mental health authority's contract with its provider of mental health programs and services to 303 ensure compliance with state and federal law and policy; 304 (xiii) monitor and ensure compliance with division rules and contract requirements; 305 and 306 (xiv) withhold funds from local substance abuse authorities, local mental health

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authorities, and public and private providers for contract noncompliance, failure to comply
with division directives regarding the use of public funds, or for misuse of public funds or
money;

310 (d) assure that the requirements of this part are met and applied uniformly by local
311 substance abuse authorities and local mental health authorities across the state;

(e) require each local substance abuse authority and each local mental health authorityto submit its plan to the division by May 1 of each year;

(f) conduct an annual program audit and review of each local substance abuse authority
in the state and its contract provider and each local mental health authority in the state and its
contract provider, including:

317 (i) a review and determination regarding whether:

318 (A) public funds allocated to local substance abuse authorities and local mental health
 319 authorities are consistent with services rendered and outcomes reported by them or their
 320 contract providers; and

(B) each local substance abuse authority and each local mental health authority is
 exercising sufficient oversight and control over public funds allocated for substance abuse and
 mental health programs and services; and

324 (ii) items determined by the division to be necessary and appropriate; and

(g) define "prevention" by rule as required under Title 32B, Chapter 2, Part 4,

326 Alcoholic Beverage and Substance Abuse Enforcement and Treatment Restricted Account Act;

(h) establish by rule, in accordance with Title 63G, Chapter 3, Utah Administrative
Rulemaking Act, minimum standards and requirements for the provision of substance abuse
and mental health treatment to individuals who are required to participate in treatment by the
court or the Board of Pardons and Parole, or who are incarcerated, including:

(i) collaboration with the Department of Corrections, the Utah Substance Abuse
Advisory Council to develop and coordinate the standards, including standards for county and
state programs serving individuals convicted of class A and class B misdemeanors;

(ii) determining that the standards ensure available treatment includes the most current
practices and procedures demonstrated by recognized scientific research to reduce recidivism,
including focus on the individual's criminal risk factors; and

337 (iii) requiring that all public and private treatment programs meet the standards

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338 established under this Subsection (2)(h) in order to receive public funds allocated to the 339 division, the Department of Corrections, or the Commission on Criminal and Juvenile Justice 340 for the costs of providing screening, assessment, prevention, treatment, and recovery support; 341 (i) establish by rule, in accordance with Title 63G, Chapter 3, Utah Administrative 342 Rulemaking Act, the requirements and procedures for the certification of licensed public and 343 private providers who provide, as part of their practice, substance abuse and mental health 344 treatment to individuals involved in the criminal justice system, including: 345 (i) collaboration with the Department of Corrections, the Utah Substance Abuse 346 Advisory Council, and the Utah Association of Counties to develop, coordinate, and implement 347 the certification process; 348 (ii) basing the certification process on the standards developed under Subsection (2)(h) 349 for the treatment of individuals involved in the criminal justice system; and 350 (iii) the requirement that all public and private providers of treatment to individuals involved in the criminal justice system shall obtain certification on or before July 1, 2016, and 351 352 shall renew the certification every two years, in order to qualify for funds allocated to the 353 division, the Department of Corrections, or the Commission on Criminal and Juvenile Justice 354 on or after July 1, 2016; 355 (i) [collaboration] collaborate with the Commission on Criminal and Juvenile Justice 356 to analyze and provide recommendations to the Legislature regarding: 357 (i) pretrial services and the resources needed for the reduced recidivism efforts; 358 (ii) county jail and county behavioral health early-assessment resources needed for 359 offenders convicted of a class A or class B misdemeanor; and 360 (iii) the replacement of federal dollars associated with drug interdiction law 361 enforcement task forces that are reduced; 362 (k) (i) establish performance goals and outcome measurements for all treatment 363 programs for which minimum standards are established under Subsection (2)(h), including 364 recidivism data and data regarding cost savings associated with recidivism reduction and the 365 reduction in the number of inmates, that are obtained in collaboration with the Administrative 366 Office of the Courts and the Department of Corrections; and 367 (ii) collect data to track and determine whether the goals and measurements are being 368 attained and make this information available to the public;

(1) in its discretion, use the data to make decisions regarding the use of funds allocated
to the division, the Administrative Office of the Courts, and the Department of Corrections to
provide treatment for which standards are established under Subsection (2)(h); and

(m) annually, on or before August 31, submit the data collected under Subsection (2)(j)
to the Commission on Criminal and Juvenile Justice, which shall compile a report of findings
based on the data and provide the report to the legislative Judiciary Interim Committee, the
Health and Human Services Interim Committee, the Law Enforcement and Criminal Justice
Interim Committee, and the related appropriations subcommittees.

(3) (a) The division may refuse to contract with and may pursue its legal remedies
against any local substance abuse authority or local mental health authority that fails, or has
failed, to expend public funds in accordance with state law, division policy, contract
provisions, or directives issued in accordance with state law.

(b) The division may withhold funds from a local substance abuse authority or local
mental health authority if the authority's contract with its provider of substance abuse or mental
health programs or services fails to comply with state and federal law or policy.

(4) Before reissuing or renewing a contract with any local substance abuse authority or
local mental health authority, the division shall review and determine whether the local
substance abuse authority or local mental health authority is complying with its oversight and
management responsibilities described in Sections 17-43-201, 17-43-203, 17-43-303, and
17-43-309. Nothing in this Subsection (4) may be used as a defense to the responsibility and
liability described in Section 17-43-303 and to the responsibility and liability described in
Section 17-43-203.

(5) In carrying out its duties and responsibilities, the division may not duplicate
treatment or educational facilities that exist in other divisions or departments of the state, but
shall work in conjunction with those divisions and departments in rendering the treatment or
educational services that those divisions and departments are competent and able to provide.

395 (6) The division may accept in the name of and on behalf of the state donations, gifts,
396 devises, or bequests of real or personal property or services to be used as specified by the
397 donor.

398 (7) The division shall annually review with each local substance abuse authority and399 each local mental health authority the authority's statutory and contract responsibilities

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400	regarding:
401	(a) the use of public funds;
402	(b) oversight responsibilities regarding public funds; and
403	(c) governance of substance abuse and mental health programs and services.
404	(8) The Legislature may refuse to appropriate funds to the division upon the division's
405	failure to comply with the provisions of this part.
406	(9) If a local substance abuse authority contacts the division under Subsection
407	17-43-201(9) for assistance in providing treatment services to a pregnant woman or pregnant
408	minor, the division shall:
409	(a) refer the pregnant woman or pregnant minor to a treatment facility that has the
410	capacity to provide the treatment services; or
411	(b) otherwise ensure that treatment services are made available to the pregnant woman
412	or pregnant minor.
413	Section 4. Section 76-6-521 is amended to read:
414	76-6-521. Fraudulent insurance act.
415	(1) A person commits a fraudulent insurance act if that person with intent to defraud:
416	(a) presents or causes to be presented any oral or written statement or representation
417	knowing that the statement or representation contains false or fraudulent information
418	concerning any fact material to an application for the issuance or renewal of an insurance
419	policy, certificate, or contract;
420	(b) presents, or causes to be presented, any oral or written statement or representation:
421	(i) (A) as part of or in support of a claim for payment or other benefit pursuant to an
422	insurance policy, certificate, or contract; or
423	(B) in connection with any civil claim asserted for recovery of damages for personal or
424	bodily injuries or property damage; and
425	(ii) knowing that the statement or representation contains false or fraudulent
426	information concerning any fact or thing material to the claim;
427	(c) knowingly accepts a benefit from proceeds derived from a fraudulent insurance act;
428	(d) intentionally, knowingly, or recklessly devises a scheme or artifice to obtain fees
429	for professional services, or anything of value by means of false or fraudulent pretenses,
430	representations, promises, or material omissions;

431	(e) knowingly employs, uses, or acts as a runner, as defined in Section 31A-31-102, for
432	the purpose of committing a fraudulent insurance act;
433	(f) knowingly assists, abets, solicits, or conspires with another to commit a fraudulent
434	insurance act; [or]
435	(g) knowingly supplies false or fraudulent material information in any document or
436	statement required by the Department of Insurance[-]; or
437	(h) pays or sponsors payment for a health insurance premium in order to directly or
438	indirectly receive proceeds from the care or treatment of the insured.
439	(2) (a) A violation of Subsection (1)(a) is a class B misdemeanor.
440	(b) A violation of Subsections $(1)(b)$ through $(1)(g)$ is punishable as in the manner
441	prescribed by Section 76-10-1801 for communication fraud for property of like value.
442	(3) A corporation or association is guilty of the offense of insurance fraud under the
443	same conditions as those set forth in Section 76-2-204.
444	(4) The determination of the degree of any offense under Subsections (1)(b) through
445	(1)(g) shall be measured by the total value of all property, money, or other things obtained or
446	sought to be obtained by the fraudulent insurance act or acts described in Subsections (1)(b)
447	through (1)(g).

Legislative Review Note Office of Legislative Research and General Counsel