



Minnesota Department of **Human Services**

DHS Initiative: 2013 Legislative Session

Rooting out fraud and protecting the most vulnerable

The Minnesota Legislature has approved changes proposed by Gov. Mark Dayton to provide more accountability and transparency across human services programs and ensure the safety of children and vulnerable adults receiving care in licensed settings. This initiative builds on the creation of the DHS Office of Inspector General in 2011, which centralized fraud and regulatory activities to more effectively detect, investigate, recover funds, promote prosecution and prevent fraud or inappropriate billing and to improve coordination between those functions and agency licensing staff.

2013 legislation

Provider fraud and recoveries. New legislation will provide needed resources to monitor and investigate critical and costly DHS programs. More than 800,000 people are enrolled in DHS health care programs, served by 155,800 providers. The Medical Assistance (MA) investigative unit currently has only 10 investigators. The Child Care Assistance Program (CCAP), which has almost 12,500 providers and serves more than 19,000 families each month, has no unit to investigate provider fraud or overpayments. In addition, screening of some providers is required with the Affordable Care Act.

Legislation approved this year will allow DHS to:

- Expand the Surveillance and Integrity Review unit to increase MA fraud investigations.
- Require and then pursue provider surety bonds from providers that go out of business; pursue recoveries through revenue recapture and recovery of federal matching funds when provider debts are uncollectable.
- Establish a child care provider fraud investigation and data analysis unit.
- Enhance audit activity for nursing facilities.
- Implement a new fee schedule for home and community-based service providers.
- Implement federal requirements for provider enrollment screening

Internal audit operations. Changes made this legislative session will expand internal audit capacity, in order to provide greater oversight of dollars spent for the agency's \$13 billion annual budget (all funds). Critical areas subject to enhanced internal audits will include eligibility, claims processing and contracting.

Child care and background study changes. Legislation approved this year will improve child safety and provider training to enhance compliance with safe sleep practices and better protect infants receiving care in licensed settings. Changes will allow DHS to:

- Implement improved training and oversight related to infant sleep safety practices for family child care.
- Partner with Minnesota Court Information System (MNCIS) to routinely receive new criminal activity data on people subject to previous background studies.
- Expand the scope of background studies to include routine access to the Predatory Offender Registry (POR), sometimes referred to as the "sex offender registry."

Methadone treatment regulation. Legislative changes will toughen regulation of methadone clinics and improve treatment for people who are addicted. They will:

- Incorporate some federal standards into state licensing laws, making violations clearly enforceable at the state level and allowing DHS to act on violations more quickly and effectively.
- Require treatment programs to consult the Minnesota Prescription Monitoring Program (PMP) prior to prescribing any controlled substance and monthly thereafter. This will help ensure that patients do not access methadone or similar medicines from other sources.
- Direct DHS to seek a federal waiver from confidentiality regulations to allow opioid treatment programs to report client data to the PMP.
- Increase treatment services for clients to help them stabilize and recover.

Related information:

- Omnibus Health and Human Services bill: <https://www.revisor.mn.gov/laws/?id=108&doctype=Chapter&type=0&year=2013>
- DHS fact sheet page: <http://mn.gov/dhs/media/fact-sheets/>

DHS Communications: May 2013