

REVISED

STATEMENT OF PURPOSE

RS31228 / H0518

This legislation amends the Medicaid provider fraud statutes to set the punishment for provider fraud at a maximum of 15 years, allow for the recovery of prosecution and investigation costs, authorize the Attorney General or his designee to sign subpoenas, permit the Medicaid Fraud Control Unit to investigate a wider range of provider fraud so long as it has a nexus to Medicaid, and clean up the statutory language as to the elements of the crime. The purpose of this legislation is to bring the provider fraud statute more in line with Idaho's insurance fraud statute and federal regulations and to enable Idaho's Medicaid Fraud Control Unit to operate more efficiently.

FISCAL NOTE

This bill will have no discernable impact on the state general fund, any other state fund, or local funds except the decrease in costs as a result of the state being able to recover the costs of investigation and prosecution. To the extent the Medicaid Fraud Control Unit in the Attorney General's Office investigates a wider range of criminal conduct as a result of these amendments, it can do so with existing staff.

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DISCLAIMER: This statement of purpose and fiscal note are a mere attachment to this bill and prepared by a proponent of the bill. It is neither intended as an expression of legislative intent nor intended for any use outside of the legislative process, including judicial review (Joint Rule 18).