22100891D HOUSE BILL NO. 232 1 2 Offered January 12, 2022 3 Prefiled January 10, 2022 4 A BILL to amend and reenact § 32.1-320 of the Code of Virginia, relating to Medicaid Fraud Control 5 Unit; recovery of fraudulent payments; report. 6 Patron—Orrock 7 8 Referred to Committee on Health, Welfare and Institutions 9 10 Be it enacted by the General Assembly of Virginia: 1. That § 32.1-320 of the Code of Virginia is amended and reenacted as follows: 11 § 32.1-320. Duties of Attorney General; medical services providers audit and investigation unit. 12 13 A. There shall be established within the Office of the Attorney General a unit to audit and 14 investigate providers of services furnished under the State Medical Assistance Plan. The Department of 15 Medical Assistance Services shall cooperate with the Office of the Attorney General in conducting such 16 audits and investigations and shall provide such information for these purposes as may be requested by the Attorney General or his authorized representative. 17 18 B. The Attorney General or his authorized representative shall have the authority to: 19 1. Conduct audits and investigations of providers of medical and other services furnished under 20 medical assistance. Such investigations shall include investigation of complaints alleging abuse or 21 neglect of persons in the care or custody of others who receive payments for providing health care services under the state plan for medical assistance, regardless of whether the patient who is the subject 22 of the complaint is a recipient of medical assistance. The relevant board within the Department of Health Professions shall serve in an advisory capacity to the Attorney General in the conduct of audits or investigations of health care providers licensed by the respective regulatory boards. In the conduct of such audits or investigations, the Attorney General may examine (i) those records or portions thereof, including patient records, for which services were rendered by a health care provider and reimbursed by the Department of Medical Assistance Services under the Plan for Medical Assistance, and (ii) in cases involving a complaint alleging abuse or neglect of a person in the care or custody of others who receive payments for medical assistance, those records or portions thereof, including patient records, that are relevant to the investigation of the complaint, notwithstanding the provisions of Chapter 38 (§ 2.2-3800 et seq.) of Title 2.2 or of any other statute which may make or purport to make such records privileged or confidential. No original patient records shall be removed from the premises of the health care provider, except in accordance with Rule 4:9 of the Rules of the Supreme Court of Virginia. The 35 disclosure of any records or information by the Attorney General is prohibited, unless such disclosure is 36 directly connected to the official purpose for which the records or information was obtained. The 37 disclosure of patient information as required under this section shall not subject any physician or other 38 health services provider to any liability for breach of any confidential relationship between the provider 39 and the patient, but no evidence resulting from such disclosure may be used in any civil, administrative 40 or criminal proceeding against the patient unless a waiver of the applicable evidentiary privilege is 41 obtained. The Attorney General shall cause all copies of patient medical records in his possession or that of his designee to be destroyed upon completion of the audit, investigation or proceedings, including 42 43 appeals; 44 2. Issue subpoenas, propound interrogatories, compel the attendance of witnesses, administer oaths, 45 certify to official acts, take depositions within and without the Commonwealth as now provided by law, 46 and compel the production of pertinent books, payrolls, accounts, papers, records, documents and 47 testimony relevant to such investigation. If a person in attendance before the Attorney General or his authorized representative refuses, without reasonable cause, to be examined or to answer a legal and 48 49 pertinent question, or to produce a book or paper or other evidence when ordered to do so by the Attorney General or his authorized representative, the Attorney General or his authorized representative 50 51 may apply to the judge of the circuit court of the jurisdiction where such person is in attendance, upon 52 affidavit, for an order returnable in not less than two nor more than five days, directing such person to 53 show cause why he should not produce such records. Upon the hearing of such order, if the court shall determine that such person, without reasonable cause, has refused to be examined or to answer a legal 54 55 or pertinent question, or to produce a book or paper which he was ordered to bring or produce, he may

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and mileage paid as allowed in civil cases in the circuit courts of this Commonwealth. Subpoenas issued under this section are expressly excluded and excepted from the provisions of subsection H of §

61 32.1-127.1:03. All records, information, reports, documents, memoranda, and communications created or

62 developed during the course of a civil investigation under this section or pursuant to § 32.1-312 shall be 63 considered sensitive and confidential and may be considered attorney work product or privileged

64 investigative files.

65 C. The Attorney General shall report annually by October 1 to the Governor and the Chairmen of the Senate Committees on Education and Health and Finance and Appropriations and the House 66 Committees on Appropriations and Health, Welfare and Institutions (i) the number of investigations 67 conducted pursuant to this chapter of providers of medical assistance services under the state plan for medical assistance alleged to have fraudulently obtained or attempted to obtain payments; (ii) the **68** 69 70 number of cases in which it is determined that a provider has fraudulently obtained or attempted to 71 obtain payments and the total amount of any payments obtained or sought to be obtained; (iii) the number of cases in which the Attorney General sought to recover payments fraudulently obtained by a 72 73 provider and the total amount of payments determined to have been made in such cases; (iv) the number 74 of cases in which recovery of payments fraudulently obtained by a provider was not sought and the total 75 amount of payments determined to have been made in such cases; and (v) for each case in which 76 recovery of payments fraudulently obtained by a provider is sought, the total amount of such payments 77 and the amount of such payments actually recovered. Such report shall also be made available to the

78 *public on a website maintained by the Office of the Attorney General.*