



FY 2013 PERFORMANCE PLAN
Office of the Inspector General

MISSION

The mission of the Office of the Inspector General (OIG) is to conduct independent audits, investigations, and inspections to detect and prevent fraud, waste, and mismanagement, and to help the District of Columbia government improve its programs and operations by promoting economy, efficiency, and effectiveness.

SUMMARY OF SERVICES

- Initiate and conduct independent financial and performance audits, inspections, and investigations of District government operations.
- Serve as the principal liaison between the District government and the US Government Accountability Office.
- Conduct other special audits, assignments, and investigations.
- Audit procurement and contract administration on a continual basis.
- Forward to the appropriate authorities evidence of criminal wrongdoing that is discovered as the result of audits, inspections, or investigations conducted by the Office.
- Enter into a contract with an outside audit firm to perform the annual audit of the District government's financial operations with the results published in the Comprehensive Annual Financial Report (CAFR) as well as chairing the CAFR oversight committee.

AGENCY WORKLOAD MEASURES

Measure	FY 2010 Actual	FY 2011 Actual	FY 2012 YTD
Number of complaints received	610	638	285
Number of administrative referrals	308	379	122
Number of unusual incident reports received in the MFCU.	3,900	2,837	1,297
Number of investigations initiated in the MFCU	187	169	93
Number of agencies/offices provided audit coverage	21	23	22



OBJECTIVE 1: Use the Accountability, Control, and Compliance Program to conduct audits and inspections for the District government, focusing efforts on mitigating risks that pose the most serious challenges to District agencies and other stakeholders.

INITIATIVE 1.1: Schedule and conduct audits of the District of Columbia Medicaid Program.

Our audit plan for Medicaid coverage is citywide and comprehensive. The following audits are ongoing in FY 2012 and will be completed in 2013: Audits of Alliance & Medicaid Eligibility; Medicaid Administrative Services Contracts; and Nursing Home Performance and Administrative Salaries. These audits are ongoing in FY 2012 and will be completed in 2013. Additional Medicaid audit topics scheduled to commence in FY13 include: Human Care Agreements; Providers of Durable Medical Equipment; Medicaid State Plan/Program Integrity; and Reprocessing and resubmitting Denied Medicaid Claims. The purpose of the audits is to address key controls over Medicaid spending and identifying waste, fraud and abuse. The District's Medicaid program continues to spend in excess of \$2 billion on Healthcare. The Medicaid Program has been of continuing concern to the District for some time and has been identified in Management Reports related to the Comprehensive Annual Financial Report as a significant deficiency affecting the District's financial management infrastructure. Completion Date: September, 2013.

OBJECTIVE 2: Use the law enforcement and compliance program to conduct investigations into allegations of waste, fraud, and abuse relating to the programs and operations of the District Government.

INITIATIVE 2.1: Investigate waste, fraud, and abuse in the Unemployment Insurance Compensation Program.

In FY12, the OIG Investigations Division implemented an initiative regarding Department of Employment Services (DOES) unemployment insurance compensation investigations. This has resulted in an increase in the number of criminal investigations of individuals who fraudulently received unemployment insurance compensation and it is anticipated that there will be a corresponding increase in the number of criminal prosecutions of such cases. In addition, there has been an increase in the number of referrals to the Office of the Attorney General for the District of Columbia for civil recoupment of unemployment insurance compensation overpayments to individuals who were not prosecuted and corresponding referrals to the District government agencies that employ some of those individuals. This initiative has continued throughout FY 12, and may continue into FY 13. Completion Date: September, 2013.

INITIATIVE 2.2: Continue to partner with the United States Attorney's Office on the District of Columbia Medicaid Fraud Task Force.

The Medicaid Fraud Control Unit implemented a new initiative on January 23, 2012, whereby a MFCU attorney is serving a detail within the United States Attorney's Office as part of the newly-formed District of Columbia Medicaid Fraud Task Force. The purpose of the detail is to have an attorney position within the USAO, funded and staffed



by MFCU, to investigate and prosecute cases involving Medicaid fraud in the District of Columbia Superior Court. The aim is to target Medicaid fraud that often goes undetected or does not warrant prosecution in federal court in part due to relatively low monetary loss amounts. There is one FTE assigned to this initiative: a MFCU staff attorney. There is no additional funding budgeted for this initiative above and beyond the employee's regular salary and benefits. This initiative will help send the message that even low dollar amount Medicaid fraud in the District of Columbia will be prosecuted, creating a further deterrent to all Medicaid fraud. In addition, the prosecution of low dollar Medicaid fraud may result in leads and/or cooperation in larger Medicaid fraud matters. The initial term of this detail was six months; because the initiative has been productive, the detail was renewed for an additional 6 month period, until January 18, 2013. Completion Date: January, 2013.

KEY PERFORMANCE INDICATORS

Measure	FY 2011 Actual	FY 2012 Target	FY 2012 YTD	FY 2013 Projection	FY 2014 Projection	FY 2015 Projection
Number of final audit report issued (financial /performance).	28	28	28	28	28	28
Potential monetary benefits resulting from audits (\$million).	\$28.2	\$38	74.80	\$21	\$21	\$25
Number of final inspection / evaluation reports issued.	11	10	10	10	10	10
Percent of complaints evaluated within ten days of receipt in investigations.	96	85	100	85	85	85
Number of criminal/ civil resolutions obtained in MFCU cases.	27	22	14	24	26	26