



FY 2014 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.

PERFORMANCE PLAN DIVISION

- Accountability, Control, and Compliance
- Law Enforcement and Compliance
- Agency Management¹

AGENCY WORKLOAD MEASURES

Measure	FY 2011 Actual	FY 2012 Actual	FY 2013 YTD ²
Number of complaints received	638	790	473
Number of administrative referrals	379	485	249
Number of unusual incident reports received in the Medicaid Fraud Control Unit (MFCU)	2,837	3,216	1,297
Number of investigations initiated in the Medicaid Fraud Control Unit (MFCU)	169	191	91
Number of agencies/offices provided audit coverage	23	20	22

¹ For the purposes of the FY 14 Performance Plan, the (1000) Agency Management division is incorporated across the other divisions due to the relatively small size of the office and the overlap of office functions.

² Data is current as of June 30, 2013.



Accountability, Control, and Compliance

SUMMARY OF SERVICES

The Accountability, Control, and Compliance division provides audits and inspections for the District government that focus efforts on mitigating risks that pose the most serious challenges to District agencies and other stakeholders. Through this work, District government entities can better maintain fiscal integrity and operational readiness to reduce fraud, waste, and mismanagement.

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.

OIG’s audit plan for Medicaid coverage is citywide and comprehensive. The following audits are ongoing in FY13 and will be completed in 2014: Audits of Alliance & Medicaid Eligibility II; Medicaid Administrative Services Contracts; Nursing Home Performance and Administrative Salaries; Providers of Durable Medical Equipment; and Medicaid State Plan/Program Integrity. These audits are ongoing in FY13 and will be completed in FY14. The purpose of the audits is to address key controls over Medicaid eligibility, improper payments, detecting 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 the OIG continues to designate the Medicaid program as a major issue area affecting the District’s financial management infrastructure. This is an ongoing initiative that has been included in the OIG’s FY14 Audit Plan. Completion Date: September, 2014.

KEY PERFORMANCE INDICATORS – Accountability, Control, and Compliance

Measure	FY 2012 Actual	FY 2013 Target	FY 2013 YTD³	FY 2014 Projection	FY 2015 Projection	FY 2016 Projection
Number of final audit reports issued (financial /performance)	28	28	35	28	28	28
Potential monetary benefits resulting from audits (in millions)	\$74.8 million	\$21 million	\$21 million	\$25 million	\$25 million	\$25 million
Number of final inspection / evaluation reports issued	10	10	9	10	10	10

³ Data is current as of June 30, 2013.



Law Enforcement and Compliance

SUMMARY OF SERVICES

The Law Enforcement and Compliance Division conduct investigations of allegations of waste, fraud, and abuse relating to the programs and operations of the District government.

OBJECTIVE 1: 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 1.1: Conduct corruption prevention lectures to District government employees.

The OIG Investigations Division will implement an initiative conducting corruption prevention lectures with District government employees working in various agencies to inform them of the criminal, ethical, and administrative rules that District government employees are required to follow. This outreach will also educate District government employees of the mission of the OIG so that they can fulfill their obligations to report crime, corruption, and conflicts of interest appropriately. The corruption prevention lectures will include distribution of an OIG brochure which provides information about the OIG, including contact information. This initiative will continue throughout FY14. Completion Date: September 2014.

INITIATIVE 1.2: Continue to partner with the United States Attorney's Office on the District of Columbia Medicaid Fraud Task Force.

The Medicaid Fraud Control Unit (MFCU) 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 – Law Enforcement and Compliance

Measure	FY 2012 Actual	FY 2013 Target	FY 2013 YTD⁴	FY 2014 Projection	FY 2015 Projection	FY 2016 Projection
Percent of complaints evaluated within ten days of receipt in investigations.	100	85	85	85	85	85
Number of criminal/civil resolutions obtained in MFCU cases.	14	24	17	24	26	26
Percentage of referral letters sent to District department or agency within ten work days of complaint being assigned to investigations.	99%	85%	85%	85%	85%	85%

⁴ Data is current as of June 30, 2013.