



Office of the Inspector General OIG (AD)

MISSION

The mission of the Office of the Inspector General (OG) 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.

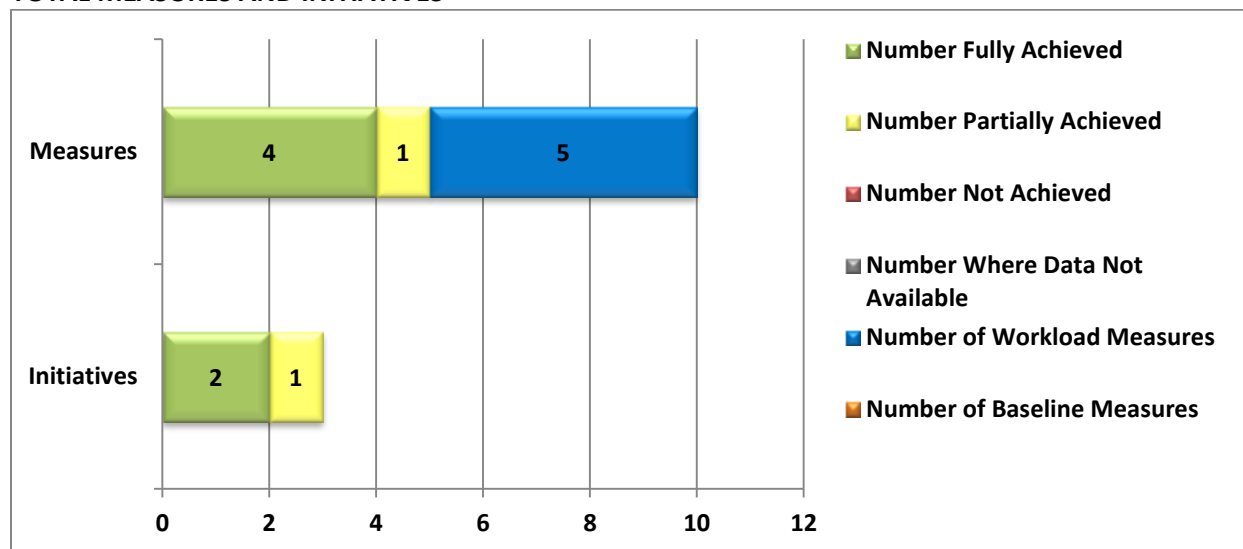
ACCOMPLISHMENTS

- ✓ Medicaid Fraud Control Unit MFCU obtained 18 fraud matters totaling \$7.7M in restitution.
- ✓ Five convictions of providers totaling \$4.6M of restitution ordered.
- ✓ Whistle blower matters with Department of Justice and other MFCUs totaling \$3M.

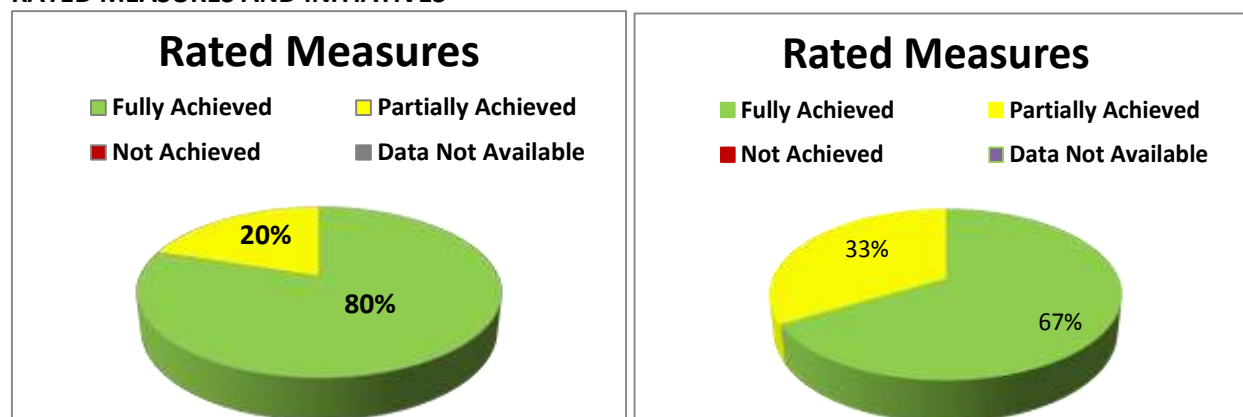


OVERALL AGENCY PERFORMANCE

TOTAL MEASURES AND INITIATIVES



RATED MEASURES AND INITIATIVES






Note: Workload and Baseline Measurements are not included

Default KPI Rating:	
$\geq 100\%$	Fully Achieved
75 - 99.99%	Partially Achieved
$< 75\%$	Not Achieved



Performance Initiatives – Assessment Details

Performance Assessment Key:

-  Fully achieved  Partially achieved  Not achieved  Data not reported

Agency Management

OBJECTIVE 1: The Accountability, Control, and Compliance Program to conduct audits and inspections.

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

Partially achieved:

Ronald W. King AIG for Audits and LaDonia Wilkins Deputy AIG for Audits. The Eligibility Determination Process for Alliance and Medicaid Participants Audit was completed in FY 2013. Audits of the Medicaid Administrative Services Contracts, Nursing Home Performance and Administrative Salaries, Durable Medical Equipment, and Medicaid State Plan/Program Integrity were ongoing in FY 2013 and will be completed in FY 2014. Therefore this initiative was partially (75%) completed in FY 2013.

OBJECTIVE 2: The Law Enforcement and Compliance Program

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

Fully Achieved: In FY12, the OIG Investigations Division implemented an initiative regarding the 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 thereby increasing the number of corresponding criminal prosecutions of such cases during the fiscal year. This initiative was completed in FY 2013.

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

Fully Achieved: 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 (USAO) 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 due to relatively low monetary loss amounts. The detail was renewed for an additional six month period, until January 18, 2013. And the initiative was completed in FY 2013.



Key Performance Indicators – Details

Performance Assessment Key:

● Fully achieved
 ● Partially achieved
 ● Not achieved
 ● Data not reported
 ● Workload Measure

	KPI	Measure Name	FY 2012 YE Actual	FY 2013 YE Target	FY 2013 YE Revised Target	FY 2013 YE Actual	FY 2013 YE Rating	Budget Program
●	1.1	Number of final audit report issued (financial/performance).	28	28		37	132.14%	ACCOUNTABILITY, CONTROL/COMPLIANCE
●	1.2	Potential monetary benefits resulting from audits	\$74.8	\$21		\$30.30	144.29%	ACCOUNTABILITY, CONTROL/COMPLIANCE
●	1.3	Number of final inspection/evaluation reports issued.	10	10		10	100%	ACCOUNTABILITY, CONTROL/COMPLIANCE
●	2.1	Percentage of complaints evaluated within ten days.	100%	85%		91.89%	108.11%	LAW ENFORCEMENT AND COMPLIANCE
●	2.2	Number of criminal/civil resolutions obtained in Medicaid Fraud Cases.	14	24		23	95.83%	LAW ENFORCEMENT AND COMPLIANCE
●	N/A	Number of complaints received	790	Target Not Required		659	Workload Measure Not Rated	LAW ENFORCEMENT AND COMPLIANCE
●	N/A	Number of administrative referrals	485	Target Not Required		387	Workload Measure Not Rated	LAW ENFORCEMENT AND COMPLIANCE
●	N/A	Number of unusual incident reports received in the MFCU.	3,216	Target Not Required		1,965	Workload Measure Not Rated	LAW ENFORCEMENT AND COMPLIANCE
●	N/A	Number of investigations initiated in the MFCU	191	Target Not Required		156	Workload Measure Not Rated	LAW ENFORCEMENT AND COMPLIANCE
●	N/A	Number of agencies/offices provided audit coverage	20	Target Not Required		27	Workload Measure Not Rated	ACCOUNTABILITY, CONTROL/COMPLIANCE?