SENATE COMMITTEE OF REFERENCE REPORT

	March 4, 2010
Chairman of Committee	Date

Committee on Health and Human Services.

After consideration on the merits, the Committee recommends the following:

<u>SB10-167</u> be amended as follows, and as so amended, be referred to the Committee on <u>Appropriations</u> with favorable recommendation:

- 1 Amend printed bill, page 6, line 5, strike "inequitable," and substitute
- 2 "inequitable,".
- 3 Page 6, line 6, strike "impracticable." and substitute "impracticable;
- 4 EXCEPT THAT NO ACTION SHALL BE TAKEN AGAINST A RECIPIENT OF
- 5 MEDICAL SERVICES IF THE OVERPAYMENT OCCURRED THROUGH NO FAULT
- 6 OF THE RECIPIENT.".
- 7 Page 7, line 19, strike "25.5-4-309" and substitute "25.5-4-310".
- 8 Page 9, strike lines 9 through 20.
- 9 Page 11, strike lines 3 through 11.
- 10 Page 11, line 12, strike "(i)" and substitute "(g)" and strike "(h)" and
- 11 substitute "(f)".
- 12 Page 11, line 18, strike "FINDS, BY CLEAR AND CONVINCING" and
- 13 substitute "FINDS".
- 14 Page 11, line 19, strike "EVIDENCE,".
- 15 Page 13, line 26, after "(2)," insert "THE FEDERAL FALSE CLAIMS ACT, OR
- ANY SIMILAR PROVISION OF THE LAWS OF ANY OTHER STATE,".

- 1 Page 15, strike lines 11 through 17 and substitute "CONDUCT THE ACTION.
- 2 If the state so requests, it".
- 3 Page 20, line 2, strike "INTIMIDATED, SUED, DEFAMED,".
- 4 Page 20, line 4, strike "EMPLOYMENT, CONTRACT, BUSINESS, OR" and
- 5 substitute "EMPLOYMENT".
- 6 Page 20, line 5, strike "PROFESSION".
- 7 Page 20, strike lines 9 through 27.
- 8 Page 21, strike lines 1 through 19.
- 9 Page 21, line 20, strike "(II)" and substitute "(b) (I)".
- Page 21, line 26, after "PAY;" insert "AND".
- 11 Page 21, strike line 27.
- 12 Page 22, strike lines 1 through 6.
- Page 22, line 7, strike "(C)" and substitute "(B)".
- Page 22, line 10, strike "(III)" and substitute "(II)".
- 15 Page 22, strike lines 12 through 27.
- 16 Strike page 23.
- 17 Page 24, strike lines 1 through 20.
- Page 46, after line 24 insert:
- 19 "25.5-4-310. Medicaid false claims report. (1) ON OR BEFORE
- JANUARY 15, 2012, AND ON OR BEFORE EACH JANUARY 15 THEREAFTER,
- 21 THE ATTORNEY GENERAL SHALL SUBMIT A WRITTEN REPORT TO THE
- 22 HEALTH AND HUMAN SERVICES COMMITTEES OF THE SENATE AND THE
- HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, AND TO
- 24 THE JOINT BUDGET COMMITTEE OF THE GENERAL ASSEMBLY A REPORT

1	CONCERNINGCLAIMSBROUGHTUNDERTHE"COLORADOMEDICAIDFALSE
2	CLAIMS ACT" DURING THE PREVIOUS FISCAL YEAR. THE REPORT SHALL
3	INCLUDE, BUT NOT BE LIMITED TO:
4	(a) THE NUMBER OF ACTIONS FILED BY THE ATTORNEY GENERAL;
5	(b) THE NUMBER OF ACTIONS FILED BY THE ATTORNEY GENERAL
6	THAT WERE COMPLETED;
7	(c) THE AMOUNT THAT WAS RECOVERED IN ACTIONS FILED BY THE
8	ATTORNEY GENERAL THROUGH SETTLEMENT OR THROUGH A JUDGMENT
9	AND, IF KNOWN, THE AMOUNT RECOVERED FOR DAMAGES, PENALTIES, AND
10	LITIGATION COSTS;
11	(d) THE NUMBER OF ACTIONS FILED BY A PERSON OTHER THAN THE
12	ATTORNEY GENERAL;
13	(e) THE NUMBER OF ACTIONS FILED BY A PERSON OTHER THAN THE
14	ATTORNEY GENERAL THAT WERE COMPLETED;
15	(f) THE AMOUNT THAT WAS RECOVERED IN ACTIONS FILED BY A
16	PERSON OTHER THAN THE ATTORNEY GENERAL THROUGH SETTLEMENT OR
17	THROUGH A JUDGMENT AND, IF KNOWN, THE AMOUNT RECOVERED FOR
18	DAMAGES, PENALTIES, AND LITIGATION COSTS, AND THE AMOUNT
19	RECOVERED BY THE STATE AND THE PERSON; AND
20	(g) THE AMOUNT EXPENDED BY THE STATE FOR INVESTIGATION,
21	LITIGATION, AND ALL OTHER COSTS FOR CLAIMS RELATED TO THE
22	"COLORADO MEDICAID FALSE CLAIMS ACT".".

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