

§ 108A-64.2. Annual fraud, waste, and abuse reporting.

No later than October 1 of each year, the Department shall submit a report to the Joint Legislative Oversight Committee on Medicaid and the Fiscal Research Division. The report shall contain all of the following for the most recently concluded State fiscal year:

- (1) An accounting of all improper Medicaid payments and expenditures, including the individual claim dollar amounts and total dollar amounts that were determined to be fraudulent, waste, or abuse.
- (2) The total amount of federal and State recovered funds, including the dollar amount per claim and the total dollar amount concerning Medicaid fraud, waste, and abuse.
- (3) Aggregate data concerning improper payments and ineligible Medicaid recipients who received Medicaid services as a percentage of those investigated or reviewed. (2026-1, s. 3C.11.)