

HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Lead Agency: **Attorney General**
 Other Agencies:
 Corrections Dept Human Services Dept
 Public Defense Board Sentencing Guidelines Comm
 Supreme Court

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative.
 Reductions shown in the parentheses.

State Cost (Savings)		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
State Total						
Total		-	-	-	-	-
Biennial Total				-		-

Full Time Equivalent Positions (FTE)		Biennium			Biennium	
		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-

Lead LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Chloe Burns **Date:** 4/30/2025 3:03:23 PM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total		-	-	-	-	-
Biennial Total				-		-
2 - Revenues, Transfers In*						
Total		-	-	-	-	-
Biennial Total				-		-

HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Agency: **Attorney General**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative.
 Reductions shown in the parentheses.

State Cost (Savings)		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-

Full Time Equivalent Positions (FTE)		Biennium			Biennium	
		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Chloe Burns **Date:** 4/30/2025 1:47:45 PM
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State Cost (Savings) Calculation Details

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*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total		-	-	-	-	-
Biennial Total				-		-
2 - Revenues, Transfers In*						
Total		-	-	-	-	-
Biennial Total				-		-

Bill Description

HF 2354-1E, coined the Medical Assistance Protection Act (the "MAP Act"), relates to the investigation and prosecution of Medicaid fraud in Minnesota. The Medicaid Fraud Control Unit ("MFCU") of the Minnesota Attorney General's Office ("AGO") has authority to investigate and prosecute fraud within the Medicaid program and abuse, neglect, and financial exploitation at Medicaid-funded facilities.

The MAP Act serves several objectives. First, it expands the AGO's subpoena authority pursuant to Minn. Stat. § 8.16, subd. 1. The expanded subpoena authority includes wage and employment records, insurance records related to claim settlement, and banking, credit card, and financial records.

Second, the MAP Act repeals Minnesota's Medical Assistance Fraud criminal statute (Minn. Stat. § 609.466) and replaces it with a new Medical Assistance Fraud statute (Minn. Stat. § 609.467). The new statute removes language referencing Medical Assistance Fraud as a crime of attempt and increases criminal penalties for offenders.

Third, the MAP Act amends Minn. Stat. § 256B.12 (Legal Representation) and Minn. Stat. § 628.26 (Limitations) to refer to the new Medical Assistance Fraud statute.

There is also an on-going annual appropriation of \$390,750 beginning in fiscal years 2026 to increase MFCU's staff to be consistent with the recommendations of the United States Department of Health and Human Services Office of Inspector General ("HHS/OIG").

Assumptions

Section 1 through Section 4, the changes to Medicaid Fraud statute, have no fiscal impact on the Attorney General's Office.

Section 5, an on-going appropriation for \$390,750, is separate from the proposed policy changes in Secs. 1-4 and is related to the recommendation from HHS/OIG that MFCU increase its staff size. HHS/OIG will be paying for 75% of the costs this expansion. The appropriation would cover the 25% State match and would allow MFCU to add the recommended nine additional staff members.

MFCU operates pursuant to a federal grant whereby the 75% of the unit's budget comes from federal funding. By statute, the MFCU operates independently of Minnesota's single state agency, the Minnesota Department of Human Services ("DHS"). The federal funding further prohibits MFCU staff members from billing or incurring costs in any other capacity within the AGO. The MFCU does not work for or bill client agencies or incur any costs independent of MFCU work. The annual appropriation represents State's share of the costs associated with hiring nine additional staff members. This appropriation would allow the AGO to add one additional attorney, seven additional investigators, and one support staff.

The amount of the appropriation was arrived at through the following calculation:

1 AAG @ \$178/hour X 1500 hours = \$267,000

8 Legal Assistant @ \$108/hour x 1500 hours = \$1,296,000

Total Cost (prior to federal match): \$1,563,000

Revenue from Federal Match (75% of total cost): \$1,172,250

State Match (25% of total cost): \$390,750

Expenditure and/or Revenue Formula

n/a

Long-Term Fiscal Considerations

n/a

Local Fiscal Impact

n/a

References/Sources

n/a

Agency Contact: Laura Sayles

Agency Fiscal Note Coordinator Signature: Laura Capuana

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HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Agency: **Corrections Dept**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

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 Reductions shown in the parentheses.

State Cost (Savings)		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-

Full Time Equivalent Positions (FTE)		Biennium			Biennium	
		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

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Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total		-	-	-	-	-
Biennial Total				-		-
2 - Revenues, Transfers In*						
Total		-	-	-	-	-
Biennial Total				-		-

Bill Description

This bill modifies certain provisions related to medical assistance fraud, authorizes the attorney general to issue subpoenas for certain related information in relation to ongoing law enforcement investigations, repeals the existing crime of medical assistance fraud and replaces it with a new offense, and appropriates funding to the attorney general to combat medical assistance fraud.

Assumptions

The Minnesota Sentencing Guidelines Commission (MSGC) projects no fiscal impact to state correctional resources as a result of this legislation.

Expenditure and/or Revenue Formula

N/A

Long-Term Fiscal Considerations

N/A

Local Fiscal Impact

MSGC projects no fiscal impact to local correctional resources as a result of this legislation.

References/Sources

Department of Corrections staff

MSGC

Agency Contact:

Agency Fiscal Note Coordinator Signature: Mark Besonen

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HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Agency: **Human Services Dept**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

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Full Time Equivalent Positions (FTE)		Biennium			Biennium	
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Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Kate Schiller **Date:** 4/6/2025 11:16:40 AM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

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Total		-	-	-	-	-
Biennial Total				-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total		-	-	-	-	-
Biennial Total				-		-
2 - Revenues, Transfers In*						
Total		-	-	-	-	-
Biennial Total				-		-

Bill Description

The bill provides the Attorney General with an expansion of what financial documents the office may subpoena to enforce Medicaid anti-fraud investigations and prosecutions. There is an appropriation to the Attorney General to more thoroughly combat medical assistance fraud. There are also new criminal penalties for medical assistance fraud.

Assumptions

The bill appropriates \$390,750 to the Attorney General's Office to address medical assistance fraud. The bill's expanded subpoena powers and new criminal penalties do not add costs to the Department of Human Services' Office of the Inspector General.

Expenditure and/or Revenue Formula**Long-Term Fiscal Considerations****Local Fiscal Impact****References/Sources****Agency Contact:**

Agency Fiscal Note Coordinator Signature: Chris Zempel

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HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Agency: **Public Defense Board**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

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		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Susan Nelson **Date:** 4/7/2025 7:55:52 AM
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State Cost (Savings) Calculation Details

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	Total	-	-	-	-	-
	Biennial Total			-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
	Total	-	-	-	-	-
	Biennial Total			-		-
2 - Revenues, Transfers In*						
	Total	-	-	-	-	-
	Biennial Total			-		-

Bill Description

The bill would modify provisions governing Medicaid fraud, and includes felony penalties for fraud depending on the dollar amount of the fraud.

Assumptions

There would be no foreseeable impact on caseloads or workloads

Expenditure and/or Revenue Formula

There would be no impact on caseloads as a result of this bill.

Long-Term Fiscal Considerations**Local Fiscal Impact****References/Sources****Agency Contact:**

Agency Fiscal Note Coordinator Signature: Kevin Kajer

Phone: 612-279-3508

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HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Agency: **Sentencing Guidelines Comm**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

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Total		-	-	-	-	-
Biennial Total				-		-

Full Time Equivalent Positions (FTE)		Biennium			Biennium	
		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Susan Nelson **Date:** 4/2/2025 1:11:06 PM
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State Cost (Savings) Calculation Details

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Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total		-	-	-	-	-
Biennial Total				-		-
2 - Revenues, Transfers In*						
Total		-	-	-	-	-
Biennial Total				-		-

Bill Description

Sections 3 and 6 repeal the existing Minn. Stat. § 609.466 (Medical Assistance Fraud) and replace it with a new § 609.467 (Medical Assistance Fraud). Three felony tiers are established.

The first tier, with a 5-year, \$10,000 maximum penalty, applies to fraudulent medical-assistance funds claims of \$5,000 or less.

The second tier, with a 10-year, \$20,000 maximum penalty, applies to fraudulent medical-assistance funds claims of over \$5,000 but not over \$35,000. The value may be aggregated over a six-month period, even if in different counties. The second tier also applies to fraudulent medical-assistance funds claims of \$5,000 or less if the defendant has, within the previous five years, been convicted of a felony or gross misdemeanor theft-related offense.

The third tier, with a 20-year, \$100,000 maximum penalty, applies to fraudulent medical-assistance funds claims of over \$35,000. The value may be aggregated over a six-month period, even if in different counties.

Section 3 is effective August 1, 2025, and applies to crimes committed on or after that date.

Sections 2 and 4 are conforming amendments.

Section 1 expands the Attorney General's subpoena power, and section 5 appropriates funds for the Attorney General to combat medical assistance fraud.

Assumptions

No assumptions are made about sections 1, 2, 4, and 5.

It is assumed that section 6 is effective August 1, 2025, and applies to crimes committed on or after that date.

It is assumed that due to the COVID-19 health pandemic, the cases sentenced in 2020 and 2021 may not be a fair approximation of cases sentenced in the future.

It is assumed that the new medical assistance fraud crime under the new Minn. Stat. § 609.467 will replace the old medical assistance fraud crime under the repealed § 609.466. The repealed crime adopted the penalty scheme of the theft statute, § 609.52. Like the new medical assistance fraud crime, the theft statute also has three felony tiers with the same statutory maximum penalties and the same general thresholds for public funds (under \$5,000; over \$5,000; and over \$35,000), although the applicability of the over \$35,000 threshold is limited to specific theft provisions.

One of the responsibilities of the Commission is to assign severity-level (SL) rankings to new felony offenses passed by

the Legislature. The Commission bases its decisions, in part, on the level of harm caused and the culpability of the person. The statutory maximum is also considered. Medical assistance fraud (§ 609.466), is ranked at either SL 3 or SL 2, depending on whether the loss exceeds \$5,000 or not. The Commission has assigned a third punishment tier, SL 6, for amounts exceeding \$35,000, although the direct statutory support for this tier is unclear.

It is assumed that the Commission will rank the new medical assistance fraud (§ 609.467) the same as the medical assistance fraud (Minn. Stat. § 609.466) repealed under this bill. At SL 2 (\$5,000 or less), cases with a criminal history score of 6 or more are recommended prison sentences. At SL 3 (over \$5,000), cases with a criminal history score of 4 or more are recommended prison sentences. At SL 6 (over \$35,000), cases with a criminal history score of 3 or more are recommended prison sentences.

According to MSGC sentencing data, from 2014 to 2023, 15 medical assistance fraud cases were sentenced (§ 609.466), an annual average of 1.5 cases. None of these cases received prison sentences (0% imprisonment rate). An average 73 percent of the cases that received probation sentences received local confinement as a condition of probation. The average pronounced confinement time was 36 days (serve 2/3 = 24 days).

With respect to elements, it is assumed that the new offense's elements are substantially similar to the elements of the repealed offense. No increase in felony case volume is assumed.

With respect to penalty, the bill's penalty structure differs from the theft statute's penalty structure in two ways. First, it specifically applies the over-\$35,000 penalty tier to medical assistance fraud. Second, it includes within the second penalty tier claims of \$5,000 or less if the defendant had received a felony-level conviction for robbery, burglary, forgery, theft, receiving stolen property, financial transaction card fraud, or medical assistance fraud within the previous five years.

Regarding the first difference, it is assumed that the creation of the over-\$35,000 penalty tier will not alter the Commission's ranking of that tier at SL 6; rather, it will simply provide statutory support for that ranking.

Regarding the second difference, it is acknowledged that some offenses may move from SL 2 to SL 3 due to the bill's previous-conviction penalty enhancement. The frequency at which that penalty enhancement may apply is not known. Due to the low volume of medical assistance fraud sentences and the similarities between SL 2 and SL 3, is assumed that the impact of the bill's previous-conviction penalty enhancement is minimal.

Expenditure and/or Revenue Formula

Long-Term Fiscal Considerations

Based on the above assumptions, because none of the existing cases received prison sentences and there will be no differences in the number of cases now sentenced, there will be no long-term fiscal impact.

Local Fiscal Impact

Based on the above assumptions, that the bill will result in no differences in the number of cases now sentenced, there will be no local government fiscal impact.

References/Sources

MSGC Monitoring Data, 2014 to 2023.

Minn. House Research, Bill Summary (March 17, 2025) (retrieved March 20, 2025, at <https://www.house.mn.gov/hrd/bs/94/HF2354.pdf>)

Agency Contact:

Agency Fiscal Note Coordinator Signature: Jill Payne

Date: 4/2/2025 1:08:01 PM

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HF2354 - 1E - Medicaid Fraud Provis. & Criminal Penalties Mod.

Chief Author: **Matthew Norris**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **4/30/2025 3:03:23 PM**
 Agency: **Supreme Court**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

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Full Time Equivalent Positions (FTE)		Biennium			Biennium	
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Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Susan Nelson **Date:** 4/4/2025 10:06:47 AM
Phone: 651-296-6054 **Email:** susan.nelson@lbo.mn.gov

State Cost (Savings) Calculation Details

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2 - Revenues, Transfers In*						
	Total	-	-	-	-	-
	Biennial Total			-		-

Bill Description

HF2354-1E ("the bill") modifies several statutory provisions related to medical assistance fraud. The bill expands the authority of the Attorney General (AG) with respect to prosecution of medical assistance fraud, including appropriating funds to the AG and expanding the types of records the AG may subpoena.

With respect to the operations of the judicial branch, the bill repeals Minn. Stat. § 609.466, which is the current criminal statute pertaining to medical assistance fraud, and creates a new section 609.467 governing crimes related to medical assistance fraud. The new section 609.467 expands the types of conduct that constitutes medical assistance fraud and establishes felony penalties for all violations of the new section. The bill allows aggregation of offenses and details where venue may be established.

Assumptions

It is assumed that criminal case filings will increase as a result of the provisions of this bill because the bill: (1) expands prohibited conduct that constitutes medical assistance fraud, and (2) increases resources towards prosecuting such offenses. It is assumed that the provisions of this bill will result in no more than a 20x increase in case filings compared with the current number of case filings under Minn. Stat. § 609.466.

Based on the current low rate of case filings under Minn. Stat. § 609.466, it is assumed the judicial branch will absorb any increased workload as a result of this bill.

Expenditure and/or Revenue Formula

Based on judicial branch data from the last ten years (2015-2024) there have been a total of 29 cases charged statewide for offenses under Minn. Stat. § 609.466. This amounts to an annual average of just under 3 cases per year. Even if case filings increased twenty times due to the provisions of this bill, based on judicial branch data used to estimate the amount of judge and staff time needed to process various types of criminal cases, an additional 60 felony cases statewide per year would not be expected to have a significant fiscal impact on the judicial branch.

Long-Term Fiscal Considerations

None

Local Fiscal Impact

References/Sources

Agency Contact:

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