Inspector General *of* Medicaid Services

OIG Advisory Board Meeting Minutes

4315 S 2700 W Taylorsville, UT 84129

September 22nd, 2026 - 11 am

Meeting run by Commissioner Marvin Dodge

Minutes Recorded by Alex Franco

Attendance

Role	Name	In Attendance	Representative
Board Members			
DHHS Commissioner	Tracy Gruber	Yes	
DHHS State Medicaid Director	Julie Ewing	No	Matt Lund
Utah State Auditor	Tina Cannon	Virtual	
MFCU Director	Kaye Lynn Wootton	Yes	
GOPB Director	Sophia DiCaro	Virtual	
State Finance Director	Van Christensen	Yes	
PEHP Director	Chet Loftis	No	
Medicaid Advisory Committee Representative	Dr. Jennifer Brinton	Yes	
Behavioral Health Commission Representative	Kyle Snow	Virtual	
GovOps and Attorney Support			
GovOps Commissioner	Marvin Dodge	Yes	
Inspector General	Nate Checketts	Yes	
Administrative Assistant	Alex Franco	Yes	
Assistant Utah Attorney General	Sam McHenry	No	Todd Jensen

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Agenda

A. Welcome and introductions - Commissioner Dodge
    a. Commissioner Dodge opened the meeting by welcoming attendees and acknowledging the new board member, Dr. Jennifer Briton. The Office of Inspector General of Medicaid Services's (OIG's) new managers also introduced themselves.

B. Board Chair and Vice Chair Appointments - Commissioner Dodge
    a. Commissioner Dodge announced official leadership appointments for the board, stating that Chet Loftis (PEHP) accepted the appointment to serve as board chair, while Van Christensen (State Division of Finance) accepted the appointment to serve as vice chair. Due to Chet Loftis' absence, Commissioner Dodge led the meeting and explained that future agendas will be established in coordination with Chet Loftis and Van Christensen.

C. Purpose of the Advisory Board - Nate Checketts
    a. Nate Checketts reviewed the board's purpose as defined by state statute and bylaws, highlighting seven core functions: promoting coordination across entities, recommending work prioritization, handling OIG employee concerns, suggesting operational improvements, reviewing risk assessments and work plans, identifying audit limitations, and monitoring agency implementation of recommendations. Nate Checketts emphasized that the board's expert guidance is vital as the OIG undergoes a major restructuring and rebuild. Commissioner Dodge discussed the historical lack of oversight for the independent OIG and praised recent positive changes and stakeholder outreach led by Nate Checketts.

D. Office of Inspector General Bylaws Adoption - Commissioner Dodge
    a. The board reviewed modified draft bylaws featuring green text to highlight changes from the draft shared last meeting. The changes added provisions allowing the creation of time-limited subcommittees comprising less than half of the board and prohibiting the discussion of individual provider billing unless publicly available to protect privacy.

    Board Action: Kaye Lynn Wootton moved to adopt the bylaws, and the board approved them unanimously.

E. Office of Inspector General organization update - Nate Checketts

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a. Nate Checketts explained that staff feedback prompted a restructuring of the OIG from separate audit and program integrity units into integrated program-area teams containing an auditor, investigator, and nurse.

    i. Tyson Cabulagan detailed the managed care team's focus on accountable care organizations, prepaid mental health plans, child health insurance plan, and behavioral health, noting plans to review encounter claims and partner with vendor HMS to recover third-party liability funds where commercial insurance was not billed. Tyson Cabulagan discussed expanding inpatient one-day stay reviews to managed care encounters.

    ii. Randy Hicks reported that the long-term services and support team is cleaning up old tracking files in the Alivia software, developing standard operating procedures, reviewing waiver programs, nursing facilities, and focusing heavily on hospice claims exceeding one year.

    iii. Amber Lucero stated that the fee-for-service team, comprising mostly nurses, reviews inpatient and outpatient hospital stays, durable medical equipment, laboratories, pharmacy, physician services, provider enrollment, and a forthcoming audit on applied behavioral analysis services for children with autism.

F. Office of Inspector General Statewide Risk Assessment - Nate Checketts

a. Tyson Cabulagan presented the OIG's first statewide risk assessment for fiscal year 2027, which evaluated budget categories and key processes based on budget growth, recent audits, investigations, and program changes. Tyson Cabulagan noted that high-risk program areas identified for fiscal year 2027 include applied behavioral analysis services, accountable care organizations, home and community-based waivers, home health and hospice, Medicaid expansion, medical transportation, mental health and substance abuse, and nursing homes and intermediate care facilities, alongside process areas like directed payments and provider enrollment . Tracy Gruber and Matt Lund noted that state directed payments and provider enrollment emerged as high-risk operational processes and would require careful coordination with DHHS if OIG were to review these areas. Nate Checketts added that stakeholder surveys were incorporated into the risk scoring, with future plans modeled after legislative auditor high-risk lists for fiscal year 2028.

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G. Annual Work Plan - Nate Checketts

a. Nate Checketts reviewed current work plan items, noting that data validation is required for the Alivia case management and fraud identification system to ensure complete accuracy matching Medicaid data. Additional ongoing or upcoming efforts include establishing lead positions across roles, reviewing hospice claims, evaluating inpatient claims pursuant to the memorandum of understanding with Medicaid, wrapping up autism claim reviews, initiating an ABA audit, conducting an HMS look behind review with a contractor, and performing behavioral health reviews.

b. Nate Checketts proposed posting general categories of resource allocation online for the next nine months without disclosing specific provider names or active investigations. Discussing the hospice claims review, Nate Checketts noted that Medicaid provided a referral regarding long hospice stays, prompting investigators to pull and review medical records. They discovered that many providers failed to meet the Medicaid policy requirement where patients must declare their election of hospice care under both Medicare and Medicaid simultaneously.

c. Van Christensen expressed concern that publishing general audit areas online might tip off targets, but distinguished between general oversight and specific findings, noting no concerns with general transparency as long as it does not interfere with active behavioral health fraud convictions. Nate Checketts credited Amber Lucero for leading statewide provider training focused on moving from post-payment review to prevention and prepayment compliance. The board discussed whether the dual Medicare/Medicaid hospice election requirement is a redundant technicality or a state policy that requires education versus policy revision.

H. Office of Inspector General process and current work - Nate Checketts

a. Nate Checketts said he felt that we covered this item throughout our discussion and no additional discussion was needed.

I. Items from board members

a. Kaye Lynn Wootton praised the unprecedented level of collaboration and positive relationship with Nate Checketts and the OIG team. Matt Lund from Medicaid echoed this appreciation, noting the vast number of concurrent audits and expressing a shared goal of delivering a high-quality program alongside internal audit.

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J. Next meeting
    a. Nate Checketts noted that no specific next meeting date was pre-arranged and suggested circulating a survey to select a timeline, with a preference expressed by the board to hold the next meeting in January 2027 before the legislative session begins.

Motion to adjourn made by Van Christensen, all were in favor at 12:27 p.m MST.

Next Advisory Board Meeting: *January 2027- Exact Date: TBD- In Person and Virtual options*

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