

481—73.3(10A) Investigative procedures. Initial complaints are reviewed and evaluated by an investigator or auditor to determine whether the provider and the recipient participate in the Medicaid program.

73.3(1) The investigator or auditor conducts a preliminary review. A written summary of the preliminary review is prepared and submitted to an evaluation team made up of:

Bureau chief,
Legal counsel,
Investigator, and
Auditor.

73.3(2) The evaluation team determines further disposition of the complaint. Options available to the bureau include, but are not limited to:

- a.* Referring the complaint to other affected agencies,
- b.* Assigning the case to an investigator or auditor, for review, audit or investigation,
- c.* Determining no action be taken.