IHSS Program Integrity Webinar Questions and Answers

In October 2013, counties were invited to participate in one of four *Program Integrity* webinars. A summary of the questions asked by participants, and the answers provided by CDSS, are included in attachment.

Question	Answer	
Data Sharing and Statewide Coordination		
How and who do we notify about our Program Integrity Point of Contact?	The Program Integrity Point of Contact can be emailed to the Program Integrity Unit at IHSS-Pl@dss.ca.gov . Please also add this information to the Very Important Contacts (VIC) listing for the IHSS program.	
What changes are planned for CMIPS II regarding Program Integrity (e.g., tracking, letters, tasks)?	After we complete the testing period in June 2014, we will evaluate potential modifications to CMIPS II to track the Program Integrity protocols.	
How do I know if my county has a Memorandum of Understanding with DHCS?	Ask your supervisor if your county has an MOU with DHCS.	
Where can I find the forms SOC 2248 (IHSS Complaint of Suspected Fraud), SOC 2245 (Fraud Data Reporting), and SOC 2247 (IHSS UHV Findings Report)?	The forms are available in ACIN I-13-13 and at dss.ca.gov under the "Forms" tab. Also, ACL 13-83 provides links to these forms.	
Are all counties required to use the form SOC 2248 for fraud complaints?	ACL 13-83 states, "Counties shall use the Complaint of Suspected Fraud Form (SOC 2248)"	
Where should the SOC 2247 be maintained, and where should the documentation be maintained (in the paper case file, or in the CMIPS II note section)?	The information should be maintained at the county. Ideally, the SOC 2247 should be kept in the case file; however, if counties have specific fraud files, the information can be documented and kept there also. CDSS does not specify where, but it has to be maintained by the county.	

Question	Answer
Unannounced Home Visits	
When county staff conducts UHVs, can we perform IHSS reassessments at the same time?	No. UHVs serve a different purpose than IHSS reassessments.
If they are <i>unannounced</i> home visits, why are notices of action sent to the consumer?	The NOA is a termination notice. By the time the consumer receives the termination NOA, all attempts to conduct a home visit have failed. The steps for UHVs are outlined in ACIN I-13-13 and ACL 13-83.
If a consumer appeals the termination, history predicts that the termination will be overturned.	As long as all protocols are properly followed and documented, cases that go to a hearing are more likely to be upheld.
If we end up terminating a case due to not being able to complete the unannounced home visit, how does the client get the services back? Do they have to reapply or just decide to cooperate with program integrity?	Whenever a case is terminated, the consumer has appeal-and-aid-paid pending rights. Cases that are terminated for failure to cooperate, which have received the NOA timely, can pursue their hearing rights. The statute does not stipulate that a consumer be terminated from the program for a specific amount of time before they can be reinstated into the program.
Would you be able to recommend what staff person should complete the UHV (e.g. IHSS Social Worker, Quality Assurance Staff, Fraud Investigator)?	CDSS is allowing each county to make that decision. The only stipulation is that the individual conducting the UHVs be designated in writing and trained.
Some counties are informing the providers at the IHSS Orientation that these UHVs are starting. Would it be beneficial for a notice to go out to all counties to do that?	There was a notice mailed out previously, and there was a drop in IHSS caseloads (an unintended event). Counties can decide to announce or not announce this information to providers.
What is the course of action for counties when, for example, all the authorized hours are being claimed in the first half of the month? Is a UHV necessary to establish the well-being of the client and to ensure that their needs are being met all month long?	Counties should take whatever action they deem appropriate to safeguard the recipient. The UHV is one option.
Can the triggers be shared that were used to identify the consumers for the visits?	ACL 13-83, page 5, states, "Counties shall ensure that when entry is granted, the UHV staff informs the recipient of the purpose of the UHV and provides general and/or specific information"

Question	Answer	
Unannounced Home Visits, Continued		
If a consumer is contacted via phone, is this the time and opportunity to schedule an appointment?	This information is contained in ACL 13-83. No, do not schedule an UHV with the consumer; simply try to find out the specifics of their schedule to be able to conduct an UHV. For example, if a consumer has appointments in the mornings, try and conduct the UHV in the afternoon. Use the phone call as an opportunity to gain any information that may result in a completed UHV.	
How often can we expect to receive UHV lists from CDSS (i.e. yearly, quarterly, or more often)?	There has been one list provided thus far. CDSS will not send another one prior to the end of FY 2013/14. The outcome of this first implementation will dictate how many lists will be provided in the future. We anticipate there will be no more than two per year.	
When is the UHV follow-up letter sent out, after the first visit or the third visit?	Per ACL 13-83, the UHV follow-up letter should be sent after the first visit. The letter can also be left at the home if the layout of the home (front porch area) is conducive to leaving the letter.	
Where can we find the UHV follow-up letter?	The letter is available as Attachment A in ACIN I-13-13, the release of IHSS Program Integrity protocols. You can also request an electronic copy of this letter by emailing the Program Integrity Unit at IHSS-PI@dss.ca.gov.	
Can the employee that performs the UHV be the same employee that performs the quality assurance for our county? The UHV tasks seem better suited to the social worker assigned to monitor the consumer's case. Why are we not simply requiring additional UHVs be performed by the social work staff?	CDSS is allowing each county to make that decision. The only stipulation is that the individual conducting the UHVs be designated in writing and trained. UHVs are different from social worker home visits. Social worker visits are primarily for assessment purposes; UHVs are to verify that consumers are receiving consistent and quality care. The UHV is also to confirm some components that are based on indicators. However, if a county wants to train a social worker to perform UHVs, there is nothing that prohibits this. The county has to designate individuals responsible for performing UHVs and ensure that they are properly trained. The county can select who will be conducting the UHVs. CDSS intentionally did not define who can conduct the UHVs; we left it up to the counties to designate who will conduct them.	

Question	Answer	
Unannounced Home Visits, Continued		
What are the determining factors for how a consumer is chosen for an unannounced home visit?	ACL 13-84, page 4 states, "Typically, a recipient will meet UHV criteria based on some concern about the receipt or the quality of their services, their wellbeing, or other program integrity concerns."	
Are the UHVs that are pulled and submitted by the State and sent to the County, in addition to the required quality-assurance home visits?	Yes. Reassessments, QA home visits, and UHVs are three distinct activities.	
Can we start conducting UHVs before the NOA is available?	Yes. Due to the UHV process taking 60 days to complete, and the goal of not having to use a termination NOA, counties can begin conducting UHVs.	
What happens when the termination notice goes out and then the consumer begins to cooperate? Do consumers re-apply for services? Does the county rescind the termination?	Consumers should exercise their appeal rights. Aid paid pending will apply. ALJs have stated that as long as all protocols are properly followed and documented, cases that go to a hearing are more likely to be upheld.	
Is the list of indicators an exhaustive list? Which form will we use to conduct the UHV (i.e. the SOC 2247 or the SOC 2248)?	No, it is not an exhaustive list. The Program Integrity Unit has distributed the list of indicators to county Points of Contact. Use the SOC 2247 to document UHVs. The SOC 2248 is to track Complaints of Suspected Fraud.	
Will you also provide detailed information as to how to accomplish the data pulls in CMIPS II?	It is the county's discretion to determine how they will pull data. If counties have questions or require assistance, they can email the Program Integrity Unit at IHSS-PI@dss.ca.gov.	
If you suspect fraud, can that case be referred for an UHV?	Yes, most definitely. Counties can conduct UHVs as they deem appropriate. However, counties cannot conduct UHVs at random; counties must be able to articulate the reason for the UHV.	
If all of the UHV attempts have been made and the UHV has still been unsuccessful, is the Social Worker required to provide a 10-day notice?	If a county has completed all required follow-up actions, the county has the option to make additional attempts to conduct the UHV. Once the county has determined that they are not able to complete a UHV at the end of the 60-day period, <i>then</i> the NOA is the required first step in the termination process.	

Question	Answer	
Directed Mailings		
What is the objective of the directed mailing? What outcomes are counties to report to the State, or do we need to report anything?	First and foremost, the objective of a Directed Mailing is to educate providers who are engaging in an activity that is questionable or suspicious. We may not see a direct, measurable outcome. Counties are not responsible to report outcomes to CDSS. Counties should send the proposed mailing list to CDSS for review and advise CDSS when the Directed Mailings occurred.	
Will there be a report available in	If you require assistance with a data pull, email	
CMIPS II for conducting Directed Mailing data pulls?	the Program Integrity Unit at IHSS-PI@dss.ca.gov.	
When does the first directed mailing have to be completed by?	By the end of June 2014.	
IHSS Program Integrity Training		
Will the ALJs receive training on the new protocols?	ALJs are always invited to participate in trainings.	
When do you anticipate the IHSS Program Integrity classroom training will be available to all counties?	Program Managers will receive updated information in January 2014 regarding additional training that will be made available to counties.	