



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**

744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

April 17, 2015

ALL-COUNTY INFORMATION NOTICE NO.: I-26-15

TO: ALL COUNTY IN-HOME SUPPORTIVE  
SERVICES PROGRAM MANAGERS

SUBJECT: ADMINISTRATIVE CLAIMING OF MEDI-CAL FEDERAL FINANCIAL  
PARTICIPATION FOR FRAUD INVESTIGATIONS AND PROGRAM  
INTEGRITY EFFORTS RELATED TO THE IN-HOME SUPPORTIVE  
SERVICES PROGRAM FOR FISCAL YEAR 2015-16

REFERENCE: [COUNTY FISCAL LETTER \(CFL\) 11/12-40](#)

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

The purpose of this All County Information Notice is to inform counties that, for Fiscal Year (FY) 2015-16, California Department of Social Services (CDSS) will permit counties to administratively claim Medi-Cal Federal Financial Participation (FFP) for allowable county expenditures related to In-Home Supportive Services (IHSS) fraud investigations, anti-fraud measures and program integrity efforts.

CDSS approval is required before counties may submit a claim against Program Codes (PCs) 740 and 741 as referenced in County Fiscal Letter (CFL) NO.11/12-40. Counties wishing to administratively claim FFP must submit the following documents to CDSS:

- A *new* IHSS Anti-Fraud Plan for FY 2015-16 as outlined below; **AND**
- Your county's Annual IHSS Fraud Prevention Budget for FY 2015-16.

Please note that your county's FY 2015-16 IHSS anti-fraud plan must, at a minimum, include the following information:

- A description of your county's current and proposed IHSS fraud detection and prevention activities;
- A timeline for your county's proposed IHSS anti-fraud activities;
- A description of how your county will identify overpayments and underpayments, including a plan to reduce the occurrence of each; and
- The details of your county's procedures for forwarding cases of confirmed IHSS fraud to the district attorney's office for prosecution.

Any county seeking to participate must submit its proposed IHSS anti-fraud plan and budget package to CDSS no later than **June 15, 2015**. Counties that are unable to meet the due date must request an extension **prior** to that date. Attached please find a sample budget justification form for your convenience. Please email completed packages to: [ihss-pi@dss.ca.gov](mailto:ihss-pi@dss.ca.gov).

If you have any questions, please contact CDSS Adult Programs Division, Policy & Quality Assurance Branch, Program integrity Unit at (916) 651-3494 or [ihss-pi@dss.ca.gov](mailto:ihss-pi@dss.ca.gov).

Sincerely,

***Original Document Signed By:***

HAFIDA HABEK, Chief  
Adult Programs Policy and Quality Assurance Branch  
Adult Programs Division

Enclosure

c: County District Attorneys

**Budget Justification  
County IHSS Fraud Plan for FY 2015-16**

**Enclosure**

<b>Budget Section</b>	<b>Total</b>
A. Personnel Costs (include employee benefits)	
B. Operating Expenses	
C. Equipment Expenses	
D. Travel/Per Diem and Training	
E. Subcontracts and Consultants	
F. Other Costs	
G. Indirect Expenses	
<b>Total Expenses:</b>	

<b>A. Personnel Costs (including employee benefits)</b>	<b>Budget</b>
Title:	
Salary Calculation (Salary \$ + Benefits \$):	
Duties Description:	
Title:	
Salary Calculation (Salary \$ + Benefits \$):	
Duties Description:	
Title:	
Salary Calculation (Salary \$ + Benefits \$):	
Duties Description:	
<b>Total Personnel Costs:</b>	

<b>B. Operating Expenses</b>	<b>Budget</b>
Title:	
Description:	
Title:	
Description:	
Title:	
Description:	
<b>Total Operating Expenses:</b>	

<b>C. Equipment Expenses</b>	<b>Budget</b>
Title:	
Description:	
Title:	
Description:	
<b>Total Equipment Expenses:</b>	

<b>D. Travel/Per Diem and Training</b>	<b>Budget</b>
Title:	
Description:	
Title:	
Description:	
Title:	
Description:	
<b>Total Travel/Per Diem and Training:</b>	

<b>E. Subcontracts and Consultants</b>	<b>Budget</b>
Title:	
Description:	
Title:	
Description:	
<b>Total Subcontracts and Consultants:</b>	

<b>F. Other Costs</b>	<b>Budget</b>
Title:	
Description:	
<b>Total Other Costs:</b>	

<b>G. Indirect Expenses</b>	<b>Budget</b>
Title:	
Description:	
Title:	
Description:	
<b>Total Indirect Expenses:</b>	