Commonwealth of Pennsylvania Department of Public Welfare's Medicaid Program

Montour County Assistance Office

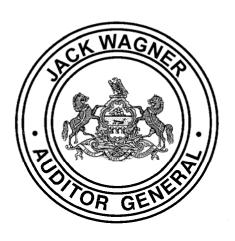
Audit Report for the Period September 8, 2007 to June 25, 2010



Commonwealth of Pennsylvania Department of Public Welfare's Medicaid Program

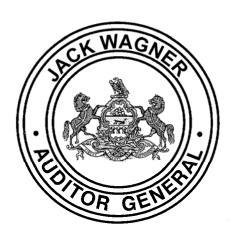
Montour County Assistance Office

Audit Report for the Period September 8, 2007 to June 25, 2010



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Report of Independent Auditors

The Honorable Tom Corbett Governor Commonwealth of Pennsylvania Harrisburg, Pennsylvania 17120

Dear Governor Corbett:

We have conducted an audit of the Montour County Assistance Office (CAO) pursuant to Section 109.1 of Title 55 of the Pennsylvania Code and Sections 402 and 403 of the Fiscal Code. The audit period was September 8, 2007 through June 25, 2010. The objectives of our audit were to determine whether the CAO made proper eligibility determinations for recipients of Medicaid and to determine whether DPW took appropriate action to address the finding and recommendations contained in our prior audit report.

When recipients are not eligible for Medicaid, the cost to Pennsylvania taxpayers of the resulting improper payments could be significant. For individuals receiving health care services through a managed care organization (MCO), a set monthly capitation fee is paid to the MCO even if the recipient did not receive services during the period of ineligibility. For individuals not in an MCO, the amount of improper payments depends on the cost of services received by individuals during periods of ineligibility.

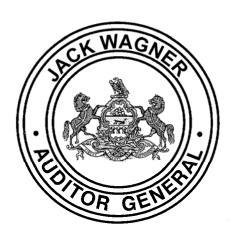
As a result of our audit, we determined that no deficiencies existed that would warrant a finding or observation in this audit report.

During the exit conference, we reviewed the audit results with the Montour CAO management. We have included the CAO and DPW management comments, where applicable, in this report.

Sincerely,

JACK WAGNER Auditor General

September 15, 2011



BACKGROUND INFORMATION

Background Information

Medicaid, also known as DPW's medical assistance program is the federal health care program for families and individuals with low income and resources. It is funded jointly by the state and the federal governments. DPW administers the program while the federal Centers for Medicare and Medicaid (CMS) establishes requirements for service delivery, quality and eligibility standards.

Eligibility determinations are based on federal and state regulations specifying which individuals qualify for a program and the amounts for which they qualify. The Code of Federal Regulations (CFR) contains the applicable federal regulations. The Pennsylvania Code contains the applicable state regulations.

Relevant information about recipients is recorded and maintained in DPW's Client Information System (CIS). This information is used to determine eligibility status and category of aid. The CAO updates information on CIS when new information becomes available.

CAO personnel utilize DPW's Income Eligibility Verification System (IEVS) to compare income and resource information with income and resource information obtained from outside sources. IEVS is updated on a regular basis with information from several sources including wage information from the Department of Labor and Industry, benefit information from the Social Security Administration, and tax and unearned income information from the Internal Revenue Service (IRS). CAO caseworkers are required to review this information at the time of application, when the recipient submits his/her semi-annual reporting (SAR) form and at the annual renewal. Caseworkers receive alerts when they are required to review certain information between the application date, the SAR and at the time of the annual renewal.

OBJECTIVES, SCOPE, AND METHODOLOGY

Objectives, Scope, And Methodology

To achieve our audit objectives regarding eligibility, we obtained a quarterly data file from the Department of Public Welfare of all recipients determined by the CAO to be eligible for Medicaid benefits as of March 31, 2010. We selected a random sample of 129 cases from the 1,093 cases related to our audit objectives for the Montour CAO represented in the data file. Our audit period was September 8, 2007 to June 25, 2010.

For each case selected in our sample, we tested certain aspects of eligibility, including income, disability, citizenship and identity, and other non-financial eligibility requirements to determine compliance with DPW regulations and administrative policies.

The criteria we used to test cases in our sample include the Code of Federal Regulations and the Pennsylvania Code, Title 55.

It is DPW's position that current law does not allow DPW to provide all federal and state wage and unearned income information to the Department of the Auditor General. Therefore, DPW did not provide all federal and state wage and unearned income information to us. This scope limitation prevents us from confirming that all available resources were included in calculating recipients' eligibility for benefits.

AUDIT SUMMARY

Audit Summary

For the audited period, our audit of the Montour CAO resulted in no findings.			

STATUS OF PRIOR AUDIT FINDINGS

Status of Prior Audit Findings

Our prior audit of the Montour CAO resulted in one reported finding: CAO management failed to make proper Medicaid eligibility determinations. We performed audit procedures regarding this finding and as a result, we determined that no deficiencies existed to warrant a repeat finding in this audit report.

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