



Office of Audit Services
Region I
John F. Kennedy Federal Building
Boston, MA 02203
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November 27, 2002

Report Number: A-01-02-00005

Mr. Robert Neely
Superintendent
Fall River Public Schools
417 Rock Street
Fall River, Massachusetts 02720

Dear Mr. Neely:

Enclosed are two copies of the U.S. Department of Health and Human Services (HHS), Office of Inspector General, Office of Audit Services' (OAS) report entitled "Medicaid Payments for School Based Health Services, Fall River, Massachusetts - July 1999 through June 2000." A copy of this report will be forwarded to the action official noted below for his/her review and any action deemed necessary.

Final determination as to actions taken on all matters reported will be made by the HHS action official named below. We request that you respond to the HHS action official within 30 days from the date of this letter. Your response should present any comments or additional information that you believe may have a bearing on the final determination.

In accordance with the principles of the Freedom of Information Act (5 U.S.C.552, as amended by Public Law 104-231), OIG, OAS reports issued to the Department's grantees and contractors are made available to members of the press and general public to the extent information contained therein is not subject to exemptions in the Act which the department chooses to exercise. (See 45 CFR Part 5.)

To facilitate identification, please refer to Report Number A-01-02-00005 in all correspondence relating to this report.

Sincerely yours,

A handwritten signature in black ink that reads "Michael J. Armstrong". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Michael J. Armstrong
Regional Inspector General
for Audit Services

Enclosures - as stated

Direct Reply to HHS Action Official:

Ms. Lynda Silva

Acting Regional Administrator

Centers for Medicare & Medicaid Services

U.S. Department of Health and Human Services

John F. Kennedy Federal Building, Room 2325

Boston, Massachusetts 02203-0003

cc: Frank McNamara, Director, Internal Control and Audit, Division of Medical Assistance
Executive Office of Health and Human Services, Commonwealth of Massachusetts
John Robertson, Associate Vice Chancellor, Center Director, Center for health Care
Financing University of Massachusetts

Department of Health and Human Services

**OFFICE OF
INSPECTOR GENERAL**

**MEDICAID PAYMENTS FOR
SCHOOL-BASED HEALTH SERVICES
FALL RIVER, MASSACHUSETTS
- JULY 1999 THROUGH JUNE 2000 -**



JANET REHNQUIST
Inspector General

November 2002
A-01-02-0005

Office of Inspector General

<http://oig.hhs.gov>

The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452, as amended, is to protect the integrity of the Department of Health and Human Services (HHS) programs, as well as the health and welfare of beneficiaries served by those programs. This statutory mission is carried out through a nationwide network of audits, investigations, and inspections conducted by the following operating components:

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EXECUTIVE SUMMARY

Background

The Medicaid Program was established by Title XIX of the Social Security Act and is jointly funded by the Federal and State Governments to provide medical assistance to pregnant women, children, and needy individuals who are aged, blind or disabled. Within broad federal guidelines, states design and administer the program under the general oversight of the Centers for Medicare and Medicaid Services (CMS). In Massachusetts, the Division of Medical Assistance (DMA) is the state agency responsible for administering the Medicaid program. The DMA contracts with the University of Massachusetts Medical School, Center for Health Care Financing, Municipal Medicaid to administer the school-based health services portion of the Medicaid program.

School-based health services reimbursable under the Medicaid program are provided by or through the Massachusetts Department of Education or a Local Education Agency to students with special needs pursuant to an Individualized Education Plan (IEP). Services are provided in the school setting or another site in the community and include speech therapy, physical therapy, occupational therapy, audiological services, behavior management or counseling. Fall River Public Schools, a Local Education Agency located in Fall River, Massachusetts, operated 40 public schools and contracted with as many as 40 private schools during our audit period. Of approximately 12,180 students who attended the Fall River Public Schools during our audit period, 2,058 students received special education services for which the school system was reimbursed \$1,095,125 (federal share) under the Commonwealth of Massachusetts' Medicaid program.

Objective

The objective of our audit was to determine whether costs claimed for school-based health services by the Fall River Public Schools through the Commonwealth of Massachusetts were reasonable, allowable and adequately supported in accordance with the terms of the State Medicaid Plan and applicable federal regulations. The audit period included Medicaid payments made during the period July 1, 1999 through June 30, 2000.

Summary of Findings

In Massachusetts, claims for school-based health services are based on a daily per diem rate for the prototype (level-of-service) developed in each Medicaid eligible student's IEP. Each school district must have evidence that any Medicaid covered service in the IEP has been delivered by a qualified provider before the Medicaid claim is submitted for federal reimbursement, including a valid IEP for each the student, accurate attendance records, and an accurate prototype.

The Fall River Public Schools needed to improve their system of controls to ensure that school-based health records were assembled and maintained to support the dates and type of Medical services provided.

Our review of payments contained in randomly selected months for 100 recipients showed that the Fall River Public Schools billed the Medicaid program: (1) when students were absent, (2) for several students who were not prescribed to receive school-based health services by a current IEP, and (3) for several students for which the school system did not locate any documentation to demonstrate that services prescribed in the IEP were delivered. Relative to our review of the randomly selected months, we estimate that the Fall River Public Schools were inappropriately overpaid at least \$25,941 (federal share).

In addition, the Fall River Public Schools billed the Medicaid program for \$1,707 (federal share) in federal reimbursements which represented the daily per diem rate for school-based health services on 23 dates when the school was not open to students.

Internal controls needed to be strengthened in the Fall River Public Schools to ensure that it appropriately submits Medicaid claims for school-based health care services.

Recommendations

We recommend that Fall River Public Schools:

- Establish procedures to ensure that Medicaid billings are based on accurate attendance records that support the students' presence to receive services, days for which the school was open, and students which have a current IEP,
- Develop written policies and procedures requiring service providers to document services delivered to Medicaid recipients which details client specific information regarding all specific services actually provided for each individual recipient of services and retain those records for review, and
- Refund through the DMA, the \$27,648 (federal share) that was inappropriately paid by the Medicaid program to the Fall River Schools for periods when the schools were not open to students, when students were otherwise absent or not qualified to justify reimbursement, or the school system did not maintain sufficient documentation that services prescribed in the IEP were delivered.

Auditee Response

In their response to the audit report, Fall River Public Schools officials generally agreed with the procedural recommendations related to establishing policies and procedures regarding Medicaid billing. However, the auditee stated they were in compliance with guidance provided by the oversight state agencies relative to: (1) billing Medicaid for IEPs for which the IEPs did not prescribe any direct special education, and (2) the school system's method of documenting services delivered even though contrary to federal requirements. Fall River Public Schools officials also stated they will comply with any regulatory changes mandated by state oversight agencies.

The auditee did not express agreement or disagreement and elected not to comment on actions that will be taken regarding the refund of the \$27,648 (federal share) that was inappropriately paid by the Medicaid program to the Fall River Public Schools. (See Appendix C for Fall River Public Schools' comments in their entity.)

Additional OAS Comments

Since the DMA has not approved a reimbursement rate for consultation for indirect services, it is inappropriate to use a bundled rate developed for direct services to seek reimbursement for indirect services. Relative to complying with Fall River Public Schools' understanding of guidance provided by state agencies relative to documentation requirements, in the Provider Agreement the Fall River Public Schools entered into with the DMA, the Fall River Public Schools agreed "...To comply with all state and federal statutes, rules, and regulations applicable to participation in the Medicaid Assistance Program...To furnish the Department [DMA] and any duly authorized state and federal officials...with such information, including copies of medical records, regarding any services for which payment was claimed from the Department...."

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INTRODUCTION

Background

The Medicaid Program was established by Title XIX of the Social Security Act and is jointly funded by the Federal and State Governments to provide medical assistance to pregnant women, children, and needy individuals who are aged, blind or disabled. Within broad Federal guidelines, states design and administer the program under the general oversight of the Centers for Medicare and Medicaid Services (CMS). In Massachusetts, the Division of Medical Assistance (DMA) is the state agency responsible for administering the Medicaid program. The DMA contracts with the University of Massachusetts Medical School, Center for Health Care Financing, Municipal Medicaid to administer the school-based health services portion of the Medicaid program.

School-based health services reimbursable under the Medicaid program are provided by or through the Massachusetts Department of Education or a Local Education Agency to students with special needs pursuant to an Individualized Education Plan (IEP). Services are provided in the school setting or another site in the community and include speech therapy, physical therapy, occupational therapy, audiological services, behavior management and/or counseling. The IEP describes the special education and related services, including school-based health services, which the student requires. An IEP must be in compliance with the Individuals with Disabilities Education Act, P.L. 94-142, as amended, and in compliance with requirements of regulations implementing Chapter 766 of the Acts of 1972, M.G.L., Chapter 71B, as amended.

To seek Medicaid reimbursement of school-based health services, school districts must:

- Have a Provider Agreement with the DMA
- Determine whether the student is enrolled in the Medicaid program
- Provide services pursuant to a valid IEP that are in compliance with all Chapter 766 requirements (the Massachusetts special education law)
- Assemble and complete documentation that any Medicaid covered service in the IEP has been delivered before the Medicaid claim is submitted to Unisys (the DMA Medicaid claims agent) for federal reimbursement
- Comply with the Massachusetts Department of Education and DMA requirements concerning the authorization to share information with the DMA
- Submit a claim for reimbursement that details the student, dates of attendance, CMS Procedure Codes (level-of-service) and rates. (School districts submit claiming documents to Unisys in order to obtain federal reimbursement.)

Massachusetts reimburses school districts for school-based health services based on the number of days in attendance times a statewide per diem rate for the Program Prototype per the student's IEP. According to the Massachusetts State Medicaid Plan, the per diem rate is based on the Medicaid fee-for-service rate for each service and a statistically representative utilization rate for those services.

Fall River Public Schools, a Local Education Agency located in Fall River, Massachusetts, operated 40 public schools and contracted with as many as 40 private schools during our audit period. Of approximately 12,180 students who attended the Fall River Public Schools during our audit period, 2,058 students received special education services for which the school system submitted reimbursement claims to the Commonwealth of Massachusetts' Medicaid program. The Fall River Public Schools contracted with the New England Medical billing (NEMB) to prepare and submit its Medicaid claims.

Objective, Scope and Methodology

The objective of our audit was to determine whether costs claimed for school-based health services by the Fall River Public Schools through the Commonwealth of Massachusetts were reasonable, allowable and adequately supported in accordance with the terms of the State Medicaid Plan and applicable federal regulations. Specifically, our audit included, but was not limited to, recipient and provider eligibility, payment rates and billing processes. The audit period included Medicaid payments made during the period July 1, 1999 through June 30, 2000.

To accomplish our audit objective, we:

- Reviewed federal and state laws, regulations and guidelines pertaining to the Medicaid program and special education related to school-based health services. We also reviewed the Commonwealth of Massachusetts State Plan Amendment 92-14 that describes the Department of Public Welfare's procedure for reimbursing school-based special needs services.
- Obtained an understanding of Fall River Public Schools' internal controls relative to recipient and provider eligibility, payment rates and billing processes, and reviewed contracts with out-of-district schools.
- Identified all individual claims made for days when the Fall River Public Schools were not in session, including holidays (e.g., Thanksgiving, Christmas and Memorial Day), winter and spring vacations, professional in-service days, and snow and emergency days. We did not review claims for a residential placement or preschool placement.
- Selected from a population of 7,364 recipient/months (federal share totaling \$1,095,125), a simple random sample of 100 recipient/months representing claims totaling a federal share of \$14,105 in Medicaid claims paid during the period July 1, 1999 through June 30, 2000 for school-based health services in the Fall River Public Schools.
- Obtained and analyzed information from Fall River Public Schools and out-of-district schools' records which supported Fall River Public Schools' claim for Medicaid reimbursement, including student eligibility for Medicaid, parental consent to bill Medicaid, student IEPs, student attendance and provider qualifications.
- Held discussions with officials from the Fall River Public Schools, NEMB and out-of-district schools.

Our audit was conducted in accordance with generally accepted government auditing standards. We performed our fieldwork at the Fall River Public Schools in Fall River, Massachusetts and other contracted out-of-district schools in Massachusetts during the period December 2001 through June 2002. See Appendix C for Fall River Public Schools' comments in their entity.

FINDINGS AND RECOMMENDATIONS

In Massachusetts, claims for school-based health services are based on a daily per diem rate for the prototype (level-of-service) developed in each Medicaid eligible student's IEP. However, we identified internal control weaknesses that need to be improved in the Fall River Public Schools system to ensure that it appropriately submits Medicaid claims for school-based health care services. The Fall River Public Schools did not design a system of controls to ensure that school-based health records were assembled and maintained to support the dates and type of Medical services provided. In this regard, each school district must have accurate attendance records, a valid IEP for each the student and evidence that any Medicaid covered service in the IEP has been delivered before the Medicaid claim is submitted for federal reimbursement.

Relative to our review of Medicaid claims in randomly selected months, we estimate that the Fall River Public Schools were inappropriately overpaid at least \$25,941 (federal share). In addition, the Fall River Public Schools billed the Medicaid program for \$1,707 (federal share) in federal reimbursements which represented the daily per diem rate for school-based health services on 23 dates when the school was not open to students.

REVIEW OF SAMPLE CLAIMS

As part of our review of the appropriateness of payments to the Fall River Public Schools under the Medicaid program for school-based health care services, we reviewed payments totaling \$14,105 (federal share) for a random sample of months for 100 recipients paid during the period July 1999 through June 2000. We excluded payments for days when the Fall River Public Schools were not in session as this is addressed in the section below.

We found that for payments contained in 11 of the 100 months reviewed, the Fall River Public Schools claimed \$923 for school-based health services when: (1) the student was absent and did not receive services for at least one day (5 sample months), (2) the student did not have a current IEP (3 sample months), and (3) the Fall River Public Schools did not maintain sufficient documentation that services prescribed in the IEP were delivered (5 sample months). The individual sample units total more than 11 because some sample units had more than one condition. While some sample units had more than one condition, we did not question more than 100 percent of the claim. (See APPENDIX A.) As a result, we estimate that the Fall River Public Schools were overpaid at least \$25,941 (federal share). (See APPENDIX B.)

Student Absences

For 5 of the 66 sample months reviewed, the Fall River Public Schools claimed the daily per diem rate for school-based health services amounting to \$109 when the students were absent and did not receive services for at least one day. Specifically, the attendance record used to bill Medicaid differed from original attendance records provided by Fall River Public School. In this regard, the attendance software used by the Fall River Public Schools and NEMB assumes that all students were in attendance 100 percent of the time unless an absence is entered in the system. However, the original attendance taken by the teacher was not always entered into the computerized attendance system correctly or timely. We were unable to review original attendance records for 34 (100 – 66) of sample months because Fall River Public Schools does not have a policy for retaining these original records and these records are no longer available.

Individualized Education Plan

For three of the sample months reviewed, the Fall River Public Schools claimed the daily per diem rate for school-based health services amounting to \$295 based on an IEP, which did not cover the sample period. Accordingly, reimbursement should not have been sought. The NEMB did not have computer edits to ensure that Medicaid claims were submitted only for students which had a currently effective IEP which prescribed special education services. For example:

- The IEP that school officials provided us to document services for a September 1999 claim for one student was not in effect that month. A review of the student's folder disclosed two documents referring to termination of services in June of 1999 – 4 months earlier.
- Using the bundled rate developed for direct services, the Fall River Public Schools submitted claims for consultation services in September 1999 and March 2000 for two students, for which the IEPs did not prescribe any direct special education services in or out of the regular education classroom. The IEPs did prescribe "Indirect Services to School Personnel and Parents." The special education teachers were to confer with the regular education teachers. One of the IEPs listed the time as 15 minutes monthly. The DMA has not approved a reimbursement rate for consultation for indirect services and it is inappropriate to use a bundled rate developed for direct services to seek reimbursement for indirect services.

Documentation of Services Delivered

For 5 of the sample months reviewed, the Fall River Public Schools claimed the daily per diem rate for school-based health services amounting to \$659 for which the school system did not maintain any documentation that services prescribed in the IEP were delivered. Specifically, the school system could not locate case/encounter notes for dates of service or progress notes spanning the sample month.

The CMS's *Medicaid and School Health: A Technical Assistance Guide*, August 1997, page 40, states: "...A school, as a provider, must keep organized and confidential records that details client specific information regarding all specific services provided for each individual recipient of services and retain those records for review ... Relevant documentation includes the dates of service..." In addition, the Commonwealth of Massachusetts' *Operational Guide for School Districts* (Revised May 1995) requires that in addition to attendance records, schools assemble and complete documentation that any Medicaid covered service in the IEP has been delivered before the Medicaid claim is submitted to Unisys for federal reimbursement.

Further, in the Provider Agreement the Fall River Public Schools entered into with the DMA, the Fall River Public Schools agreed to "... keep such records as are necessary to disclose fully the extent of the services to recipients and to preserve these records for a minimum period of six years..." Notwithstanding the agreement, school officials apprised us that individual therapists and service providers are responsible for maintaining student contact information including case notes.

Accordingly, for the students included in the 5 months reviewed, for which the Fall River Public Schools could neither locate case/encounter notes for dates of service nor progress notes spanning the sample month, we have no assurance that services prescribed in the IEP were delivered.

Fall River Public Schools did not have written policies or procedures in place requiring service providers to document services delivered to Medicaid recipients.

DAYS SCHOOLS WERE NOT OPEN TO STUDENTS

The Local Education Agency is entitled to bill Medicaid the per diem for each day the student attended school.



We reviewed 100 percent of claims for days when the Fall River Public Schools were not in session, including holidays (e.g., Thanksgiving, Christmas and Memorial Day), winter and spring vacations, professional in-service days, and snow and emergency days. From the universe of 33,737 individual claims submitted by the Fall River Public Schools during our audit period, we found 140 claims that included at least one day when school was not in session. As a result, we found that \$1,707 (federal share) was paid to Fall River Public Schools in error for these days when the student was not in school.

Recommendations

We recommend that the Fall River Public Schools:

- Establish procedures to ensure that Medicaid billings are based on accurate attendance records that support the students' presence to receive services, days for which the school was open, and students which have a current IEP,
- Develop written policies and procedures requiring service providers to document services delivered to Medicaid recipients which details client specific information regarding all specific services actually provided for each individual recipient of services and retain those records for review, and
- Refund through the DMA, the \$27,648 that was inappropriately paid by the Medicaid program to the Fall River Public Schools for periods when the schools were not open to students, when students were otherwise absent or not qualified to justify reimbursement, or the school system did not maintain sufficient documentation that services prescribed in the IEP were delivered.

Auditee Response

In their response to the audit report, Fall River Public Schools officials generally agreed with the procedural recommendations related to establishing policies and procedures regarding Medicaid billing. However, the auditee stated they were in compliance with guidance provided by the oversight state agencies relative to: (1) billing Medicaid for IEPs for which the IEPs did not prescribe any direct special education, and (2) the school system's method of documenting services delivered even though contrary to federal requirements. Fall River Public Schools officials also stated they will comply with any regulatory changes mandated by state oversight agencies."

The auditee did not express agreement or disagreement and elected not to comment on actions that will be taken regarding the refund of the \$27,648 (federal share) that was inappropriately paid by the Medicaid program to the Fall River Public Schools. (See Appendix C for Fall River Public Schools' comments in their entity.)

Additional OAS Comments

Since the DMA has not approved a reimbursement rate for consultation for indirect services, it is inappropriate to use a bundled rate developed for direct services to seek reimbursement for indirect services. Relative to complying with Fall River Public Schools' understanding of guidance provided by state agencies relative to documentation requirements, in the Provider Agreement the Fall River Public Schools entered into with the DMA, the Fall River Public Schools agreed "...To comply with all state and federal statutes, rules, and regulations applicable to participation in the Medicaid Assistance Program ...To furnish the Department [DMA] and any duly authorized state and federal officials...with such information, including copies of

medical records, regarding any services for which payment was claimed from the Department....”

APPENDICES

SCHEDULE OF SAMPLE ITEMS

Sample Number	Inaccurate Attendance			Invalid IEP			Documentation			Totals	
	Error	Days	Dollars	Error	Days	Dollars	None	Days	Dollars	Error	Dollars
93							Yes	19	231.61	1	231.61
94											
95											
96											
97											
98											
99											
100											
	5	16	\$108.98	3	53	\$295.21	5	79	\$658.49	11	\$923.43

* While some sample units had more than one condition, we did not question more than 100 percent of the claim

RESULTS OF STATISTICAL SAMPLE

Sample Size	100
Value of Sample	\$ 14,105
Number of Errors	11
Value of Errors	\$ 923
Population Size	7,364
Value of Population	\$ 1,095,125

Point Estimate	\$ 68,001
Confidence Level	@ 90 %
Lower Confidence Limit	\$ 25,941
Upper Confidence Limit	\$ 110,062
Sample Precision	+/-61.85

Based on our statistical sample, we are 95 percent confident that the amount overpaid is at least \$25,941 (federal share).

FALL RIVER PUBLIC SCHOOLS

OFFICE OF THE SUPERINTENDENT
417 ROCK STREET
FALL RIVER, MASSACHUSETTS 02720

CIN: A-01-02-00005
APPENDIX C
Page 1 of 2
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RICHARD D. PAVAO
SUPERINTENDENT

"The Scholarship City"

September 24, 2002

Mr. Michael J. Armstrong
Regional Inspector General for Audit Services
U.S. Department of Health and Human Services
Office of the Inspector General / Office of Internal Audit
John F. Kennedy Federal Building, Room 2425
Boston, Massachusetts 02203

Subject: PRELIMINARY (DRAFT) REPORT

"Medicaid Payments for School-Based Health Services – Fall River, Massachusetts – July 1999 Through June 2000"

REF; CIN: A-01-02-00005

Mr. Armstrong;

The City of Fall River Public Schools (FRPS) is pleased to respond to the audit findings contained in the subject preliminary report. This response, organized according to the report, shall acknowledge or explain and refute the findings cited by the audit.

• **Recommendation**

Establish procedures to ensure that Medicaid billings are based on accurate attendance records that support the students' presence to receive services, days for which the school was open, and students which have a current I.E.P.

Response

The FRPS has studied the findings presented in regard to *students who have current IEP's*. The Fall River Public Schools has always endeavored to follow state regulations in regards to Municipal Medicaid Billing. From a total of 100 samples, 97 IEP's were judged to be "Valid." Active IEP's were noted for 99 samples; however two of the "Invalid" IEP's were considered to be "Invalid" because of 502.1 bundled rate discords. FRPS and NEMB will abide by any regulation changes mandated by the state oversight agency should they occur.

The Department of Education Fact Sheet for Massachusetts Municipal Medicaid Program for Special Education Services distributed to schools in 1992, states: *"The composite rate for each prototype was developed based on a sample of students' IEP's in each of those prototypes. Each prototype sample included students whose IEP's showed some health related services and some who had no health related services on their IEP's at all. Having this range of IEP's in the sample allows schools to submit claims to Medicaid for all students with IEP's who are enrolled in Medicaid and whose parents have authorized sharing information with Medicaid without regard to the exact services provided on the IEP."*

In cooperation with federal agencies FRPS has studied the findings regarding attendance records and has implemented a system of edits and controls between original attendance records and computerized attendance records.

Our thorough assessment reveals that no more than only .155% of the total dollar amount was related to erroneous billing for when school was not in session. FRPS, in partnership with NEMB, has implemented additional steps to ensure the control of all school calendar records.

- **Recommendation**

Require individual district schools to retain original attendance information for a minimum period of three years.

Response

FRPS has always endeavored to comply with all required record-keeping for student attendance. Recent trends toward automation (electronic/computerized record-keeping) have lead away from the maintenance of *some* source paper documents. As a result of this audit, the District has already initiated steps to ensure the proper retention time for source records of attendance. Original attendance records for all schools will be kept for a minimum of six years. In addition, a monthly system wide random sampling of records will be made to ensure accuracy of original attendance records with computerized documentation.

- **Recommendation**

Develop written policies and procedures requiring service providers to document services delivered to Medicaid recipients which details client-specific information regarding all specific services actually provided for each individual recipient of services and retain those records for review.

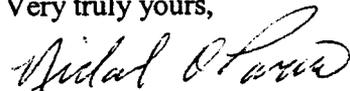
Response

From a total of 100 samples, Fall River was able to provide acceptable documentation for 95 samples. FRPS has always endeavored to comply with all required record-keeping by Service Providers. To ensure documentation henceforth, the District has initiated steps to enforce the retention of records of Service Delivery and to ensure standardized procedures for archiving of this information. District meetings will be held with staff to review and implement procedures for documentation and record-keeping, pending generation of guidelines by The Center for Health Care Financing, the Commonwealth's oversight agency.

Summary

While the preliminary report by the OIG/OIA indicates some findings contrary to *Federal* requirements for documentation, the City of Fall River Public Schools has substantially fulfilled the obligations as described in the outset of this initiative by the oversight agencies at the *state* level. In the spirit of cooperation and continuation in partnership with state and federal agencies, FRPS will move forward with increased documentation retention as described in the above recommendations, and shall remain cognizant of future requirements as they are detailed by those agencies.

Very truly yours,



Richard D. Pavao

Superintendent, Fall River Public Schools

ACKNOWLEDGMENTS □

This report was prepared under the direction of Michael J. Armstrong, Regional Inspector General for Audit Services, Region I. Other principal Office of Audit Services staff who contributed include:

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