Texas Did Not Ensure Documentation Supported That Individuals Met Eligibility Requirements and That Its Annual Report was Accurate Under Its Projects for Assistance in Transition From Homelessness Program

What OIG Found
Texas complied with PATH program requirements related to certain program costs and non-Federal contributions. However, it did not always comply with PATH program requirements when determining consumers’ eligibility and reporting the number of consumers enrolled in its PATH program. For 7 of the 70 sampled consumers, case files maintained by PATH providers did not support that the consumers were eligible to enroll in the PATH program. Specifically, PATH providers did not maintain documentation in their case files that indicated the consumers met PATH eligibility requirements for being seriously mentally ill (4 consumers) or inappropriately enrolled consumers due to clerical errors (3 consumers). In addition, Texas overstated the number of consumers enrolled in its PATH program in its Annual PATH Reports.

These deficiencies occurred because Texas lacked adequate oversight to ensure that PATH providers maintained sufficient documentation to support that consumers met eligibility requirements to enroll in the PATH program. In addition, Texas did not ensure that PATH providers reported accurate enrollment data for the State agency’s annual PATH reports to SAMHSA. On the basis of our sample results, we estimated that 1,001 consumers (10 percent) enrolled in Texas’ PATH program were ineligible to enroll in the Texas’ PATH program.

What OIG Recommends and Texas Comments
We recommend that Texas (1) expand the scope of its site visits of PATH providers to include reviews of consumers’ case files maintained by PATH providers to strengthen its current risk assessment process and ensure that providers only enroll eligible individuals into the PATH program and (2) work with relevant parties to provide guidance and training to PATH providers to ensure that its Annual PATH Report accurately represents the number of consumers served by its PATH program.

In written comments on our draft report, Texas did not indicate concurrence or nonconcurrence with our findings or recommendations; however, it described steps that it has taken or plans to take to address the deficiencies identified in our draft report related to its compliance with PATH program requirements.

The full report can be found at [https://oig.hhs.gov/oas/reports/region2/22102001.asp](https://oig.hhs.gov/oas/reports/region2/22102001.asp).