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STANISLAUS COUNTY IHSS ADVISORY COMMITTEE MEETING MINUTES

06/2405

Committee Members Present:

Jose AcostaMadelyn AmaralDwight BatemanKenny BrownMary BurchRose MartinConnie MullerOra ScruggsLinda White

Committee Members Absent: *George Sharp

IHSS Staff Present: Jeff Lambaren Maria Childers Robert Taylor

Veronica Melgoza

OPENING REMARKS by Kenny Brown

• Meeting called to order at 1:05

PUBLIC COMMENT

None were presented

ACCEPTANCE OF MINUTES

• June 10, 2005 minutes: Motion M/S/A to accept minutes.

GRIEVANCE PROCEDURE/BYLAWS AMENDMENT

- Mary Burch brought in a form that is used at the Continuing College and Outreach Program, when someone
 has a grievance to file.
- Jeff Lambaren read the form and summarized it for the committee.



^{*}Advance notice given.

- Jeff Lambaren read the "Robert's Rules and Madelyn Amaral reiterated that there isn't anything that states the members can have a grievance procedure; it indicates that the proper procedure is for members to make a motion and bring the issue up in the committee meeting.
- Kenny Brown stated that the committee should specifically put into the Bylaws that when there is an issue, it should be brought to the committee, even if it means that it has to go to the Board of Supervisors.
- Dwight Bateman stated that the committee should find out if the Chairperson has the empowerment to call an emergency meeting if necessary, if this is not in the Bylaws we could amend the Bylaws to state this.

PUBLIC AUTHORITY

- Jeff Lambaren passed out an article on UDW. The article alleges financial mismanagement and the parent organization, AFSCME, is seeking control.
- Jeff Lambaren spoke to Lynn at UDW and she said that UDW was still in operations. AFSCME has to get a court order to take over the Union.
- Jeff Lambaren spoke to County Counsel and until we have something official we still have the MOU with UDW.
- Public Authority met with the administration of UDW, the Public Authority/County was not getting the information on provider benefits and provider health care payments.
- Jeff Lambaren stated they had a meeting with the Union Representatives in May and the Union wanted to set up a trust fund to help the Union members, their children, and other family members; County asked the State for guidance on this but has not heard anything yet.
- County asked the State for guidance on that but we have not heard anything yet.
- If the idea of the trust was not allowed the Union did not want to continue with administration of health care benefits, Public Authority is the appropriate entity to take over.
- Jeff Lambaren sent out a letter to UDW stating that the Public Authority will take over the health care benefits starting in July.
- The Public Authority has two parts of money:
 One is for the administration (the daily operations), and one is for health care benefits.
- Jeff Lambaren announced that the plan is for the Public Authority to contract for staff. This is not finalized vet.
- Telephones have arrived, computer lines are in but there are no computers yet.

LEGISLATIVE UPDATE

- AB472-Background checks, providers/recipients would not be charged.
- AB652-Pilot Project, share of cost, would help the median income families.
- Jeff Lambaren announced that they received info at the conference on a bill that CAPA was sponsoring, AB48- to raise the minimum wage.
- AB899-Would authorize up to 6 hours a year of paid training for providers and would not come out of the recipient's pocket. They are working on the language for this bill.
- AB778-Auto insurance for IHSS. This bill would prohibit raising your insurance rate because you are using your auto for work.

SURVEY

- Maria Childers announced that they did receive enough surveys.
- Jeff Lambaren announced that he would bring the report to the next meeting.

ANNUAL REPORT

• Kenny Brown stated that we would wait for the survey results to include in the report.

BUDGET/STATE

 Dwight Bateman announced that the Democrats have proposed in their budget to suspend SSI Cost of living increases.

- Dwight Bateman suggested that everyone call and voice their concerns.
- Maria Childers announced that all counties are required to have a Quality Assurance Program in July.
- A copy was passed out to members.
- Part of Quality Assurance is home visits.

DEBRIEFING ON CONFERENCE

- Ora Scruggs and her attendant, Henry Dill had some difficulties when they were trying to check in to the Holiday Inn Hotel.
- Dwight Bateman made a motion to have staff write a letter to the Holiday Inn addressing the problems.
- Rose Martin suggested that staff also send a copy to the Chamber of Commerce. This was included into the
 motion made.
- Madelyn Amaral seconded the motion, motion passed.
- Staff will write a letter regarding the fact that the hotel required everyone checking in to have a credit card. We should have been told about this when reservations were made.
- Members met with the staff of the legislative representatives.
- Jeff Lambaren stated there were a number of sessions during the day. One was dealing with the media.
- Media Posse presented the session on dealing with the media and also produced a training video.
- Maria Childers suggested that we could bring AAA in to do a presentation.

HOT TOPICS

None presented

GENERAL UPDATE

• Dwight Bateman announced that DRAIL will have a fireworks booth in the office parking lot.

Meeting adjourned @ 3:30 PM Veronica Melgoza, Recorder

SignOnSanDiego.com



Domestic workers union is in turmoil

Takeover blamed on financial woes

By Michael Kinsman UNION-TRIBUNE STAFF WRITER

June 16, 2005

A San Diego-based union that represents 40,000 domestic and home-care workers statewide has been taken over by its parent organization, which alleges financial mismanagement by the union's officers and executive board.

The American Federation of State, County and Municipal Employees said it took control of the United Domestic Workers of America because financial disarray has brought it to the brink of bankruptcy.

Flora Walker, western regional director of AFSCME, was appointed to head an administratorship of the union.

"An investigation by the AFSCME judicial panel has determined that the union can no longer operate under its existing leadership," said Walker, who arrived in San Diego yesterday. "We have a team of attorneys and CPAs who will investigate the financial condition of the union, but right now we just don't really know what that is."

five officers of UDW and its 10-member executive board were suspended by AFSCME.

UDW President Ken Seaton-Msemaji denied that the union was in financial trouble and alleged a political maneuver by AFSCME, an international union based in Washington, D.C., with 1.4 million members.

"We have done nothing wrong, and we are nowhere near bankruptcy," Seaton-Msemaji said yesterday. "When we get to court, they will see that. We believe this will be a temporary administratorship and that we will be back running the United Domestic Workers soon."

AFSCME said UDW is near bankruptcy, has masked its financial condition by keeping misleading financial records and has obtained improper interest-free loans from a charitable organization controlled by union leaders.

"When it comes to financial wrongdoing, AFSCME has a zero tolerance policy," said Gerald McEntee, the AFSCME president. "That is why we are taking quick and decisive action to stop bad actors within the UDW leadership from misusing workers' hard-earned money."

Seaton-Msemaji said that for several months, the union has been battling AFSCME over funds the parent organization provided for organizing workers statewide.

He said AFSCME failed to pay the union \$45,000 in February, money the union was owed for organizing workers. The next month when UDW turned over the dues it had collected from its members to AFSCME, it deducted \$80,000 it was owed for organizing in March and the \$45,000 it was owed from February, Seaton-Msemaji said. It also deducted its April obligation from the payment to AFSCME.

May, UDW forwarded its dues to AFSCME and expected a \$96,000 rebate, which was not paid, he said.

Seaton-Msemaji suggested that AFSCME may be concerned with UDW's close association with a Service Employees International Union local that represents 110,000 workers in Los Angeles County. He said he believes AFSCME might be afraid that his union will defect to the SEIU.

"We certainly don't have financial problems," he said. "We collect about \$1.1 million in dues each month from our members, and we have maybe \$1.5 million or \$2 million in debt out there. Does that sound like an organization that's bankrupt?"

inded in 1979 by Seaton-Msemaji and his wife, Fahari Jeffers, UDW has aggressively moved to organize domestic workers and those who provide assistance for elderly and disabled individuals. Jeffers, who suffered a brain aneurysm in November, continued to hold the titles of secretary-treasurer and general counsel of the union until the AFSCME takeover.

In 2002, UDW got its first collective bargaining agreement in San Diego County. That now covers 17,000 workers here.

Home-care workers are employed by disabled or elderly individuals who qualify for assistance. Though the individuals hire the workers, the home-care workers are paid through the state's Department of Social Services. UDW negotiates the pay rates for home-care workers in San Diego and eight other counties.

In San Diego County, home-care workers earn \$9 per hour, plus medical and dental benefits.

The union also has collective bargaining agreements in nine other California counties with rights to organize in 20 other counties, Seaton-Msemaji said.

•Michael Kinsman: (619) 293-1370; michael.kinsman@uniontrib.com

Find this article at:

http://www.signonsandiego.com/news/business/20050616-9999-1b16seize.html

Check the box to include the list of links referenced in the article.

DEPARTMENT OF SOCIAL SERVICES

744 P Street, MS 19-96, Sacramento, CA 95814

RECEIVED

May 20, 2005

MAY 2 4 2005

STANISLAUS COUNTY COMMUNITY SERVICES AGENCY

ALL-COUNTY INFORMATION NOTICE NO. 1-24-05

TO: ALL COUNTY WELFARE DIRECTORS ALL IHSS PROGRAM MANAGERS

Reason	For	This	Tran	smittal
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[X] State Law Change
[] Federal Law or Regulation
Change
[] Court Order or Settlement
Agreement
[X] Clarification Requested by
one or More Counties
[] Initiated by CDSS

SUBJECT: PRELIMINARY INSTRUCTIONS REGARDING COUNTY QUALITY

ASSURANCE ACTIVITIES

REFERENCE:

California Department of Social Services (CDSS) ACIN I-69-04.

Dated September 30, 2004

This All-County Information Notice (ACIN) provides preliminary information regarding the mandated activities and functions of the county's Quality Assurance (QA) function or unit as set forth in Welfare and Institutions Code (W&IC) Section 12305.71 (see also Senate Bill (SB) 1104, Chapter 229, Statutes of 2004, § 46). This section provides that each county is required to establish a dedicated, specialized In-Home Supportive Services/Personal Care Services Program (IHSS/PCSP) QA function or unit that performs specific activities. Although specific procedures to be utilized by State and county staff are currently being developed by the State/County Procedures Workgroup, several counties have requested information regarding suggested tasks for QA staff that have been hired to perform QA functions. Section 12305.71 of W&IC (hereinafter referred to as "Section 12305.71") requires that county QA staff perform the following tasks:

Routine Scheduled Reviews of Supportive Services

Counties are to perform routine, scheduled reviews of supportive services cases to ensure that caseworkers appropriately and uniformly apply the IHSS/PCSP regulations and other State policies. If technical assistance is needed, the county staff may consult with State QA staff. Methodologies for determining sample size and selection criteria will be developed by the State/County Procedures Workgroup. The following are suggestions regarding tasks that, at a minimum, county staff can perform:

Identify a methodology to ensure that case reviews are being conducted. Ensure
that the methodology includes representation from all social workers performing
assessments, and if applicable, all district offices.



- Conduct a desk review of cases. At a minimum, this review should include:
 - Verification that all required forms are on file and properly filled out and contain appropriate signatures.
 - o For services that contain regulatory guidelines (domestic, laundry, food shopping, and other shopping and errands), ensure that written documentation is provided when the total need for services exceeds regulatory guidelines (Manual of Policy and Procedures [MPP] 30-758.41).
 - o In all protective supervision cases, verify that appropriate documentation regarding the need for protective supervision is recorded and that all protective supervision calculations on the SOC 293 are correct.
 - In cases where the recipient's spouse is residing in the household and does not receive IHSS, verify that all services authorized are consistent with the MPP 30-763.411.
 - In shared living situations, ensure that proration requirements contained in MPP 30-763.471 are met.
 - For all cases, verify that case files contain documentation showing how the need for services, and hours authorized for purchase, were determined.
 - o For cases that indicate some portion of the need is met through an alternative resource, verify that the case files contain documentation of the name of the agency or individual providing the alternative resource. If the alternative resource service provided is compensable by IHSS, a SOC 450 should be completed and signed by the individual providing the service voluntarily (MPP 30-763.64).
 - If paramedical services are authorized, verify that the services on the SOC 321 are paramedical in nature and that the certification period listed on the SOC 321 has not expired (MPP 30-757.196).
 - Determine if the assessment or reassessment was conducted in the time period specified in regulations.
- Develop methodologies to conduct home visits on a sub-sample of desk reviewed
 cases to validate the social worker's assessment, ensure that the authorized
 services are consistent with the consumer's needs, and that the authorized services
 are being provided. It is noted that some factors can be validated by telephone;
 however, in order to accurately assess the appropriateness of the services
 authorized, it is recommended that home visits be conducted in addition to any
 telephone validation efforts.
- County QA staff should also develop protocols for reporting findings from case reviews and home visits. It is recommended that the protocols include the following, at a minimum:
 - A mechanism for reporting desk review and home visit findings to management and staff responsible for responding to findings and making appropriate corrections.

- Reports to include data such as the number of cases reviewed, the number of home visits conducted, the types of findings identified, the number of cases for which county staff agree or disagree with the county QA staff's findings, and corrective actions identified and initiated, and any targeted case reviews completed.
- A process for follow up to ensure that necessary actions have been completed and those outstanding issues have been responded to.
- A process for identifying needs for quality improvement measures when issues are systemic in nature. County staff may consult with the CDSS QA staff regarding quality improvement efforts.

Respond to Data Match Discrepancies

Section 12305.71(c)(1) requires that county QA staff shall receive, resolve, and respond appropriately to claims data match discrepancies or other State-level QA and program integrity information indicating potential overpayments/underpayments for supportive services. Further written procedures and instructions regarding responding to data matches will be developed through the State/County Procedures Workgroup.

Currently, CDSS provides counties with quarterly death match reports that are generated by the State Controller's Office through the matching of State and federal death files against recipient and provider records. Written instructions regarding responding to information on the death match report has previously been provided to each county.

It is planned that additional data matches will be generated by matching specified Medi-Cal provider payment records against IHSS provider payment records. The initial data matches will include matching Medi-Cal acute hospital and skilled nursing payments against IHSS provider payments. The purpose of the matches will be to ensure that duplicate Medi-Cal payments are not made and that when potential duplicate payments are identified, county staff should take appropriate follow-up action.

Until procedures are developed and issued regarding responding to data matches other than death matches, CDSS is requesting the assistance of county staff in piloting the investigation of other types of data matches for the purpose of quality improvement.

Identify Potential Sources of Third-Party Liability

Section 12305.71(c)(2) requires that county QA staff implement procedures to identify potential sources of third-party liability for IHSS/PCSP services. The State/County Procedures Workgroup will develop written procedures and guidelines for identifying and reporting potential sources of third-party liability that are identified through the assessment

process or through QA activities. The following are examples of third-party liability that may be identified:

- Long-Term Care insurance
- Worker's Compensation insurance
- Civil judgments/pending litigations
- · Victim Compensation Program payments

Monitor the Delivery of Supportive Services to Detect & Prevent Potential Fraud

Section 12305.71(c)(3) requires that counties monitor the delivery of supportive services in the county to detect and prevent potential fraud by providers, recipients, and others, and to maximize the recovery of overpayments and remedy underpayments. CDSS will develop written procedures and guidelines in consultation with the State/County Procedures and Fraud/Data Evaluation Workgroups. Until written procedures are issued, the following are options that the county QA staff may utilize to detect and prevent potential fraud:

- Review the Over 300 Hour report provided through the Case Management,
 Information and Payrolling System (CMIPS) and perform appropriate follow-up activities when indicated.
- Use the Ad Hoc tool developed by Electronic Data Systems (EDS), to develop other criteria to identify potential fraud.

Develop a Schedule to Periodically Perform Targeted QA Studies

Section 12305.71(d) requires that each county is to develop a schedule under which county QA staff will periodically perform targeted IHSS/PCSP QA studies. For the period July 1, 2005 through June 30, 2006, it is suggested that county QA staff utilize information received from CMIPS reports, downloads, or the Ad Hoc tool to identify potential areas for targeted QA studies.

Although it is not necessary to submit the targeted QA studies plan to CDSS for approval, it is planned that State monitoring staff will incorporate review of the plan into their monitoring efforts.

Conduct Joint Case Review Activities with State QA Staff

Section 12305.71(e) requires that in accordance with protocols developed by CDSS and county welfare departments, county QA staff will conduct joint case review activities with State QA staff to identify, refer to, and work with appropriate agencies in investigation, administrative action, or prosecution of instances of fraud in the provision of supportive services. This Section additionally requires that county staff conduct random post-payment paid claims reviews to ensure that payments to providers were valid and were associated with existing program recipients. The protocol should take into account the relative priority of the activities required of county IHSS/PCSP QA functions and

available resources. Specific written procedures will be developed by the State/County Procedures Workgroup.

Further information, procedures, and guidelines will be developed by the State/County Procedures Workgroup regarding the information in this letter and will be provided when finalized. If you have further questions regarding this ACIN, please contact the Adult Programs Branch QA Bureau at (916) 229-3494 or by e-mail at IHSS-QA@dss.ca.gov.

Sincerely,

JOSEPH M. CARLIN

Acting Deputy Director

Disability and Adult Programs Division

seph W. Carlin

c: CWDA