September 12, 2012

Mr. Stephen Virbitsky  
Regional Inspector General for Audit Services  
Office of Inspector General  
150 S. Independence Mall West, Suite 316  
Philadelphia, Pennsylvania 19106-3499


Dear Mr. Virbitsky:

The West Virginia Department of Health and Human Resources and the Bureau for Medical Services (Bureau), the single State agency, offers the following response to the draft report entitled "West Virginia Did Not Properly Claim Some Personal Care Services Under Its Medicaid State Plan for the Period July 1, 2008 through June 30, 2010, Report Number: A-03-11-00204."

On page 1 of the draft report, it erroneously says "The Personal Care Program, managed by the Department of Health and Human Resources' Bureau of Senior Services, provides personal care services for the elderly and for disabled individuals." The Bureau of Senior Services is not a Bureau of the Department of Health and Human Resources. The Department of Health and Human Resources, Bureau for Medical Services, contracts with the Bureau of Senior Services to serve as the operating agency. The Bureau of Senior Services reports directly to the Office of the Governor.

Recommendations:

1. Refund $360,539 to the Federal Government.

The State concurs with the OIG's finding to refund $360,539 to the Federal Government.

2. Improve its monitoring of providers to ensure compliance with Federal and State requirements for personal care services.
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The Bureau for Medical Services is currently in the process of rewriting its Personal Care Policy Manual to improve compliance with Federal requirements. Some of the activities which the State anticipates will improve compliance are:

a. All Personal Care Services will be pre-authorized by a third part vendor. For services 60 hours or less per month, an RN will check the assessment tool to ensure the person has the three deficits needed in order to participate in the program. For 60 plus hours an RN will review the assessment and all medical information to ensure the person needs the additional hours of services.

b. A representative random sample of member charts will be reviewed annually to ensure all required documentation is in member files, that the Plan of Care is being followed, that the member is eligible for the service, etc. Currently, the review cycle has been between 48 and 36 months.

c. Personal Care providers will have to electronically submit an affidavit stating all of their employees have the licenses, certifications, training and background checks, etc. they need in order to provide services under the Personal Care Program. They will report on 100% of their employees annually. In addition, there will be random checks to verify the providers reporting on these requirements.

It is anticipated the new Personal Care Policy Manual will go into effect in early 2013. Prior to the new Policy Manual going into effect, the Bureau for Medical Services and the Bureau of Senior Services will conduct training with providers and will stress the importance of proper documentation.

Should you have any further questions, please contact Penney Hall, Program Manager, Aged and Disabled Waiver and Personal Care Services, at 304-356-4872.

Sincerely,

Nancy V. Atkins, RN, MSN, NP-BC  
Commissioner

cc: Rocco Fucillo, Cabinet Secretary, DHHR  
Warren Keefer, Deputy Secretary for Administration, DHHR  
Robert Roswall, Commissioner, Bureau of Senior Services  
Cynthia Beane, Deputy Commissioner - Policy  
Tina Bailes, Deputy Commissioner - Finance  
Penney Hall, Program Manager