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**Table 1**  
**Recommendation Status Summary**

<b>Assembly Budget Subcommittee 1 on Health and Human Services</b>		
<b>Report Number 2012-111</b>		
<i>California Department of Public Health: It Needs to Improve Accuracy in Accounting and Charging for Compliance Inspections Designed to Reduce Youth Access to Tobacco and It Could Enhance Its Compliance Inspections (June 2013)</i>		
<b>RECOMMENDATION</b>	<b>STATUS OF RECOMMENDATION</b>	<b>ENTITY</b>
1. To ensure that it can support its labor costs, Public Health should implement a process to accurately track the time its staff spends conducting statewide and local compliance inspections.	Fully Implemented	Department of Public Health
2. It should allocate expenses associated with statewide and local compliance inspections to the appropriate funding source, based on the time staff spends conducting those activities, and it should maintain accurate accounting records to reflect actual costs of statewide and local compliance inspections.	Fully Implemented	Department of Public Health
3. When Public Health enters into new contracts with local entities to conduct compliance inspections, it should evaluate its historical costs of conducting these inspections to ensure that the existing rates are adequate to recoup its costs. If it determines that the existing rates are not adequate, it should develop a new rate that accurately reflects its true costs.	Not Fully Implemented	Department of Public Health
4. When Public Health enters into new contracts with local entities to conduct compliance inspections, it should ensure that it maintains adequate documented support for the rate it charges for a compliance inspection.	Not Fully Implemented	Department of Public Health
5. Public Health should amend its recent contract with the city of Los Angeles to correct the rate it charges for a local compliance inspection to reflect its true cost.	Not Fully Implemented	Department of Public Health
6. To ensure that Public Health can more effectively monitor and enforce compliance with the STAKE Act, it should take appropriate steps to ensure that there are no restrictions placed on the use of the data acquired during the annual retailer assessment that would preclude its use for compliance inspection purposes.	Not Fully Implemented	Department of Public Health
7. To ensure that Public Health can more effectively monitor and enforce compliance with the STAKE Act, it should annually obtain the identifying information regarding the retailers that sold tobacco to minors during the annual retailer assessment and provide that information to the Food and Drug Branch.	Not Fully Implemented	Department of Public Health
8. To ensure that Public Health can more effectively monitor and enforce compliance with the STAKE Act, it should include the retailers that sold tobacco to minors during the annual retailer assessment when selecting the retailers it plans to inspect as part of the statewide compliance inspections.	Not Fully Implemented	Department of Public Health
9. Public Health should add language to its youth decoy and parent or legal guardian consent form to clarify that the data obtained from the youth's participation may be used in future research in a way that will not reveal the identity of the youth.	Fully Implemented	Department of Public Health

  

<b>Report Number 2012-107</b>		
<i>Developmental Centers: Poor-Quality Investigations, Outdated Policies, Leadership and Staffing Problems, and Untimely Licensing Reviews Put Residents at Risk (July 2013)</i>		
<b>RECOMMENDATION</b>	<b>STATUS OF RECOMMENDATION</b>	<b>ENTITY</b>
1. The department should provide a reminder to staff about the importance of promptly notifying OPS of incidents involving resident safety.	Fully Implemented	Department of Developmental Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
<p>2. Within 60 days, the department should make the following amendments to its policies and procedures for OPS:</p> <ul style="list-style-type: none"> <li>• Clarify who is responsible for deciding whether to make district attorney referrals.</li> <li>• Clarify that the final decision to initiate a specialized medical examination for an alleged victim of sexual assault rests with OPS, not with health care staff.</li> <li>• Require OPS investigators to document their efforts to communicate with alleged victims of abuse, including nonverbal clients, and require supervisors to verify that such efforts have been made when approving investigation reports.</li> <li>• Direct its investigators to record the potential violations of law or facility policy they identify and consider during each investigation.</li> </ul>	Fully Implemented	Department of Developmental Services
<p>3. To ensure adequate guidance to OPS personnel, once the department has amended OPS's policies and procedures to reflect the recommendations we have included here, the department and OPS should place a high priority on completing and implementing its planned updates to the OPS policy and procedure manual.</p>	Not Fully Implemented	Department of Developmental Services
<p>4. OPS should provide additional training to its law enforcement personnel on how to conduct an initial incident investigation, particularly regarding collection of written declarations and photographs of alleged victims following an incident.</p>	Fully Implemented	Department of Developmental Services
<p>5. To avoid jeopardizing the integrity of its criminal investigations with compelled statements acquired through administrative admonishments, the department should require that different OPS investigators conduct the administrative investigation and the criminal investigation when they involve the same incident.</p>	Fully Implemented	Department of Developmental Services
<p>6. As soon as possible, the department should hire a permanent OPS director and permanent OPS commanders that are highly qualified staff capable of performing the administrative functions these positions require.</p>	Fully Implemented	Department of Developmental Services
<p>7. To help ensure the quality of OPS investigations, the department should revise its OPS training policy to require its law enforcement personnel to attend annually specialized trainings that address their specific needs. At least initially, the department should focus the additional trainings on communicating with residents, writing effective investigative reports, and collecting investigative evidence. To further develop the leadership skills of OPS management, the department should consider having experienced or particularly skilled members of its OPS management provide this annual training.</p>	Fully Implemented	Department of Developmental Services
<p>8. To ensure that it has adequate numbers of staff to properly and promptly investigate developmental center incidents, the department should address the high number of vacancies within OPS by instituting a formal recruitment program in accordance with the guidance provided in the California State Personnel Board's Merit Selection Manual, as well as using input from OPS law enforcement personnel.</p>	Fully Implemented	Department of Developmental Services
<p>9. After the department has implemented a formal OPS recruiting program, if it can demonstrate that it is still having trouble filling vacant OPS positions, the department should evaluate how it can reduce some of the compensation disparity between OPS and the local law enforcement agencies with which it competes for qualified personnel.</p>	Not Fully Implemented	Department of Developmental Services
<p>10. To make certain that residents receive an adequate level of care and are protected from harm, the department should encourage Human Resources—which is responsible for negotiating labor agreements with employee bargaining units—to include provisions in future collective agreements to cap the number of voluntary overtime hours an employee can work and/or require departments to distribute overtime hours more evenly among staff. If, in the next round of negotiating bargaining unit agreements, Human Resources does not include provisions to cap the number of voluntary overtime hours an employee can work, the department should continue to advocate for these changes for future agreements. In the meantime, the department should adjust its overtime scheduling and monitoring practices to strengthen, where possible, procedures designed to ensure that staff working overtime do not compromise residents' health and safety.</p>	Resolved	Department of Developmental Services
<p>11. To minimize the need for overtime, the department should reassess its minimum staffing requirements, hire a sufficient number of employees to cover these requirements, and examine its employee scheduling processes.</p>	Not Fully Implemented	Department of Developmental Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
12. To ensure that staff who work overtime are paid the correct amount, developmental center management should require all staff to submit not only overtime approvals, but also the department's standardized form showing time off and overtime hours. Additionally, the department should establish a written guide to help ensure that timekeeping staff follow the overtime provisions of the various laws, regulations, and bargaining unit agreements.	Fully Implemented	Department of Developmental Services
13. The department should create specific measurable goals for OPS that include existing and new measures associated with each one, such as staffing, overtime, and the timely completion of investigations. In addition, the department should perform a regular review of the quality of OPS's activities and investigations to achieve those goals. The department should track progress in quality measures over time and adjust its training plans to increase OPS law enforcement personnel's skill and compliance with established policies and procedures.	Not Fully Implemented	Department of Developmental Services
14. To allow for the creation of consistent performance measures and comparisons of resident abuse data across all developmental centers, the department should ensure that each of its centers consistently uses the same data fields in IRIS.	Fully Implemented	Department of Developmental Services
15. To conduct licensing surveys at required intervals while minimizing additional workload, Public Health should explore further opportunities to coordinate the licensing and certification surveys. If Public Health questions the value of these surveys, it should seek legislation to modify the surveying requirements.	Not Fully Implemented	Department of Public Health
16. To ensure that the facilities Public Health monitors take timely corrective action on deficiencies, Public Health should comply with CMS's 45-day revisit requirement. If the 45-day revisit time frame is not possible due to the extent of the corrections required at particular facilities, Public Health should seek exemptions from CMS as appropriate. For facilities whose deficiencies are not severe enough to require an on-site revisit, Public Health should direct its staff to complete desk reviews within 60 days.	Fully Implemented	Department of Public Health
17. To ensure that investigations are conducted on a timely basis across priority levels, Public Health should develop and implement target time frames for the priority levels that lack them. Public Health should ensure that the timelines are being met and, if not, explore new ways to increase efficiency and manage its workload, thereby facilitating timely investigations.	Will Not Implement	Department of Public Health
18. To improve its enforcement, each year Public Health should evaluate the effectiveness of its enforcement system across all types of health facilities, including those in developmental centers, prepare the required annual report, and, if called for, recommend legislation to improve the enforcement system and enhance the quality of care.	Not Fully Implemented	Department of Public Health

**Report Number 2013-602**

*New High Risk Entity: Covered California Appears Ready to Operate California's First Statewide Health Insurance Exchange, but Critical Work and Some Concerns Remain (July 2013)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To provide as much public transparency as possible, Covered California's board should formally adopt a policy to retain confidentiality only for contracts, contract amendments, and payment rates that are necessary to protect Covered California's interests in future contract negotiations.	Fully Implemented	Covered California
2. To comply with federal requirements, Covered California should develop a plan and procedures for monitoring, recertification, and decertification of qualified health plans.	Not Fully Implemented	Covered California
3. To ensure the success of its outreach effort, Covered California should track the effect on enrollment figures of its planned outreach and marketing activities and of its assister program.	Not Fully Implemented	Covered California
4. To ensure financial sustainability, Covered California should conduct regular reviews of enrollment, costs, and revenue and make prompt adjustments to its financial sustainability plan as necessary.	Partially Implemented	Covered California

**Report Number 2012-122**

*Mental Health Services Act: The State's Oversight Has Provided Little Assurance of the Act's Effectiveness, and Some Counties Can Improve Measurement of Their Program Performance (August 2013)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that it monitors counties to the fullest extent as the MHSA specifies and that it implements best practices, Health Care Services should draft and enter into a performance contract with each county that contains assurances for effective oversight and furthers the intent of the MHSA, including demonstration that each of the county's MHSA programs are meeting the MHSA's intent.	Partially Implemented	Department of Health Care Services
2. To ensure that it monitors counties to the fullest extent as the MHSA specifies and that it implements best practices, Health Care Services should conduct comprehensive on-site reviews of county MHSA programs, including verifying county compliance with MHSA requirements.	Partially Implemented	Department of Health Care Services
3. To ensure that counties have the needed guidance to implement and evaluate their MHSA programs, Health Care Services should coordinate with the Accountability Commission and issue guidance or regulations, as appropriate, for Facilities programs and for other MHSA requirements, such as a prudent reserve.	Partially Implemented	Department of Health Care Services
4. To ensure that counties have the needed guidance to implement and evaluate their MHSA programs, Health Care Services should commence this regulatory process no later than January 2014.	Fully Implemented	Department of Health Care Services
5. To ensure that counties have the needed guidance to implement and evaluate their MHSA programs, Health Care Services should collaborate with the Accountability Commission to develop and issue guidance or regulations, as appropriate, to counties on how to effectively evaluate and report on the performance of their MHSA programs.	Partially Implemented	Department of Health Care Services
6. To ensure that Health Care Services and other state entities can evaluate MHSA programs and assist the Accountability Commission in its efforts, Health Care Services should collect complete and relevant MHSA data from the counties.	Partially Implemented	Department of Health Care Services
7. To ensure that Health Care Services and other state entities can evaluate MHSA programs and assist the Accountability Commission in its efforts, Health Care Services should resolve all known technical issues with the partnership and client services systems and provide adequate and expert resources to manage the systems going forward.	Partially Implemented	Department of Health Care Services
8. Health Care Services should, as soon as is feasible, revise or create a reasonable and justifiable allocation methodology to ensure that counties are appropriately funded based on their identified needs for mental health services. Health Care Services should ensure that it reviews the methodology regularly and updates it as necessary so that the factors and their weighting are appropriate.	Partially Implemented	Department of Health Care Services
9. To ensure that counties have needed guidance to implement and evaluate MHSA programs, the Accountability Commission should issue regulations, as appropriate, for Prevention and Innovation programs.	Not Fully Implemented	Mental Health Services Oversight and Accountability Commission
10. To ensure that counties have needed guidance to implement and evaluate MHSA programs, the Accountability Commission should commence the regulatory process no later than January 2014.	Fully Implemented	Mental Health Services Oversight and Accountability Commission
11. To fulfill its charge to evaluate MHSA programs, the Accountability Commission should undertake the evaluations specified in its implementation plan.	Not Fully Implemented	Mental Health Services Oversight and Accountability Commission
12. To ensure that it can fulfill its evaluation responsibilities, the Accountability Commission should examine its prioritization of resources as it pertains to performing all necessary evaluations.	Fully Implemented	Mental Health Services Oversight and Accountability Commission
13. To report on the progress of MHSA programs and support continuous improvement, the Accountability Commission should fully use the results of its evaluations to demonstrate to taxpayers and counties the successes and challenges of these programs.	Fully Implemented	Mental Health Services Oversight and Accountability Commission

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
14. The Planning Council should take steps to ensure that it annually reviews the overall effectiveness of MHSA programs in accordance with state law.	Fully Implemented	California Mental Health Planning Council
15. The Planning Council should document and make public the reviews that it performs of MHSA programs to demonstrate that it is performing all required reviews.	Partially Implemented	California Mental Health Planning Council
16. To improve the quality of county processes related to measuring program performance, Health Care Services should use its performance contracts with counties to ensure that they specify MHSA program goals in their plans and annual updates and include those same goals in their contracts with program providers.	Fully Implemented	Department of Health Care Services
17. To improve the quality of county processes related to measuring program performance, Health Care Services should use its performance contracts with counties to ensure that they identify meaningful data to measure the achievement of all their goals, set specific objectives, and require their program providers to capture those data so they can use the data to verify and report the effectiveness of their MHSA programs.	Fully Implemented	Department of Health Care Services
18. Health Care Services should develop standardized data collection guidelines or regulations, as appropriate, that will address inconsistencies in the data that counties report to the State. In developing these guidelines or regulations, Health Care Services should consult with the Accountability Commission to ensure that data collected reasonably fulfill statewide evaluation purposes.	Partially Implemented	Department of Health Care Services
19. To help ensure county compliance with stakeholder regulations, Health Care Services should provide technical assistance to counties on the MHSA local planning review process and ensure that its guidance to counties is clear and consistent with state regulations.	Partially Implemented	Department of Health Care Services
20. Santa Clara County should review its existing MHSA contracts and by December 31, 2013, or as soon as is feasible, amend them as necessary to include plan goals.	Fully Implemented	Santa Clara County Mental Health Department
21. Santa Clara County should ensure that all MHSA invoices are adequately supported with information that demonstrates that MHSA services were provided.	Not Fully Implemented	Santa Clara County Mental Health Department
22. Sacramento County should review its existing MHSA contracts and by December 31, 2013, or as soon as is feasible, amend them as necessary to include plan goals.	Fully Implemented	County of Sacramento Department of Health and Human Services
23. San Bernardino County should review its existing MHSA contracts and by December 31, 2013, or as soon as is feasible, amend them as necessary to include plan goals.	Fully Implemented	County of San Bernardino Department of Behavioral Health Administration
24. To ensure that Health Care Services can withhold MHSA funds from counties that fail to comply with MHSA requirements, the Legislature should enact legislation that clarifies Health Care Services' statutory authority to direct the State Controller's Office to withhold such funds from a noncompliant county.	No Action Taken	Legislature

**Report Number 2013-103**

*Armed Persons With Mental Illness: Insufficient Outreach From the Department of Justice and Poor Reporting From Superior Courts Limit the Identification of Armed Persons With Mental Illness (October 2013)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
19. To ensure that all applicable information from State Hospitals is communicated to Justice, by March 31, 2014, Justice and State Hospitals should establish a written understanding of the method and frequency with which State Hospitals will report prohibited individuals to Justice.	Fully Implemented	Department of State Hospitals

## Report Number 2013-110

*Child Welfare Services: The County Child Welfare Services Agencies We Reviewed Must Provide Better Protection for Abused and Neglected Children (April 2014)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that referral response decisions are accurate, the Butte County CWS agency should develop policies requiring a supervisory review of the hotline tool and a monitoring system to ensure that supervisory reviews are completed.	Partially Implemented	Butte County Department of Employment and Social Services
2. To ensure that referral response decisions are accurate, the San Francisco County CWS agency should develop policies requiring a supervisory review of the hotline tool and a monitoring system to ensure that supervisory reviews are completed.	Pending	City and County of San Francisco Human Services Agency
3. To ensure that referral response decisions are accurate, the Orange County CWS agency should ensure that all intake supervisors are trained on the use of the hotline tool and that they are regularly reviewing their staffs use of this tool.	Partially Implemented	Orange County Social Services Agency
4. To ensure that the statewide case management system contains accurate and complete information for each referral, the Butte County CWS agency should update its policies or otherwise provide clear guidance to social workers about the importance of ensuring that all alleged perpetrators, victims, and types of maltreatment are accurately recorded upon intake.	Pending	Butte County Department of Employment and Social Services
5. To ensure that the statewide case management system contains accurate and complete information for each referral, the Orange County CWS agency should update its policies or otherwise provide clear guidance to social workers about the importance of ensuring that all alleged perpetrators, victims, and types of maltreatment are accurately recorded upon intake.	Partially Implemented	Orange County Social Services Agency
6. To ensure that the statewide case management system contains accurate and complete information for each referral, the San Francisco County CWS agency should update its policies or otherwise provide clear guidance to social workers about the importance of ensuring that all alleged perpetrators, victims, and types of maltreatment are accurately recorded upon intake.	Pending	City and County of San Francisco Human Services Agency
7. To ensure that social workers are making reasonable and timely efforts to make in-person contact with children who are allegedly being maltreated, the Butte County CWS agency should develop clear policies for how frequently social workers must follow up with alleged victims in the event that initial attempts at contact are unsuccessful.	Fully Implemented	Butte County Department of Employment and Social Services
8. To ensure that social workers are making reasonable and timely efforts to make in-person contact with children who are allegedly being maltreated, the San Francisco County CWS agency should develop clear policies for how frequently social workers must follow up with alleged victims in the event that initial attempts at contact are unsuccessful.	Pending	City and County of San Francisco Human Services Agency
9. To ensure that social workers are making reasonable and timely efforts to make in-person contact with children who are allegedly being maltreated, the Butte County CWS agency should develop clear policies about the method and duration of social workers attempts at making contact with hard-to-reach families, and clearly state under what circumstances a referral may be closed for lack of contact.	Fully Implemented	Butte County Department of Employment and Social Services
10. To ensure that social workers are making reasonable and timely efforts to make in-person contact with children who are allegedly being maltreated, the San Francisco County CWS agency should develop clear policies about the method and duration of social workers attempts at making contact with hard-to-reach families, and clearly state under what circumstances a referral may be closed for lack of contact.	Pending	City and County of San Francisco Human Services Agency
11. To ensure that its social workers are following its policy regarding timely follow-up visits, the Orange County CWS agency should provide training or other clarification of its policy and have its supervisors regularly review whether their staff are complying with this requirement.	Partially Implemented	Orange County Social Services Agency
12. To ensure that all required SDM assessments are completed, the Butte County CWS agency should develop and implement clear guidance regarding which assessments are required in different situations.	Partially Implemented	Butte County Department of Employment and Social Services
13. To ensure that all required SDM assessments are completed, the San Francisco County CWS agency should develop and implement clear guidance regarding which assessments are required in different situations.	Pending	City and County of San Francisco Human Services Agency



RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
14. To improve the timeliness and accuracy of SDM assessments, the Butte County CWS agency should ensure that its supervisors are promptly reviewing assessments.	Partially Implemented	Butte County Department of Employment and Social Services
15. To improve the timeliness and accuracy of SDM assessments, the Orange County CWS agency should ensure that its supervisors are promptly reviewing assessments.	Pending	Orange County Social Services Agency
16. To improve the timeliness and accuracy of SDM assessments, the San Francisco County CWS agency should ensure that its supervisors are promptly reviewing assessments.	Pending	City and County of San Francisco Human Services Agency
17. To improve the timeliness of its supervisors reviews, the Butte County CWS agency should develop time frames for supervisors review and approval of assessments and monitor supervisors compliance with those time frames.	Partially Implemented	Butte County Department of Employment and Social Services
18. To improve the timeliness of its supervisors reviews, the San Francisco County CWS agency should develop time frames for supervisors review and approval of assessments and monitor supervisors compliance with those time frames.	Pending	City and County of San Francisco Human Services Agency
19. To improve the timeliness of its supervisors reviews, the Orange County CWS agency should more closely monitor supervisors compliance with its existing policy setting a 30-day time frame for review and approval of assessments.	Pending	Orange County Social Services Agency
20. To improve the quality of the investigative information available to social workers, the Butte County CWS agency should expand on its investigative narrative templates to include fields such as relevant criminal history, substance abuse, or mental health concerns.	Fully Implemented	Butte County Department of Employment and Social Services
21. To improve the quality of the investigative information available to social workers the San Francisco County CWS agency should expand on its investigative narrative templates to include fields such as relevant criminal history, substance abuse, or mental health concerns.	Pending	City and County of San Francisco Human Services Agency
22. To ensure that required safety plans are created, the Butte County CWS agency should have supervisors review all safety assessments in a timely manner and verify that a written safety plan signed by the responsible parties accompanies any assessments designating the need for a safety plan.	Partially Implemented	Butte County Department of Employment and Social Services
23. To ensure that required safety plans are created, the Orange County CWS agency should have supervisors review all safety assessments in a timely manner and verify that a written safety plan signed by the responsible parties accompanies any assessments designating the need for a safety plan.	Partially Implemented	Orange County Social Services Agency
24. To ensure that required safety plans are created, the San Francisco County CWS agency should have supervisors review all safety assessments in a timely manner and verify that a written safety plan signed by the responsible parties accompanies any assessments designating the need for a safety plan.	Pending	City and County of San Francisco Human Services Agency
25. To help strengthen safety plans to effectively mitigate safety threats, the Butte County CWS agency should ensure that supervisors are reviewing and approving all safety plans.	Partially Implemented	Butte County Department of Employment and Social Services
26. To help strengthen safety plans to effectively mitigate safety threats, the Orange County CWS agency should ensure that supervisors are reviewing and approving all safety plans.	Partially Implemented	Orange County Social Services Agency
27. To help strengthen safety plans to effectively mitigate safety threats, the San Francisco County CWS agency should ensure that supervisors are reviewing and approving all safety plans.	Pending	City and County of San Francisco Human Services Agency

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
28. As part of its responsibility to help children remain safe at all points during the investigation of a referral, the Butte County CWS agency should vet temporary living situations and caregivers to the extent allowable under the law, including a review of information contained within the statewide CWS database.	Partially Implemented	Butte County Department of Employment and Social Services
29. As part of its responsibility to help children remain safe at all points during the investigation of a referral, the Orange County CWS agency should vet temporary living situations and caregivers to the extent allowable under the law, including a review of information contained within the statewide CWS database.	Fully Implemented	Orange County Social Services Agency
30. As part of its responsibility to help children remain safe at all points during the investigation of a referral, the San Francisco County CWS agency should vet temporary living situations and caregivers to the extent allowable under the law, including a review of information contained within the statewide CWS database.	Pending	City and County of San Francisco Human Services Agency
31. As part of its responsibility to help children remain safe at all points during the investigation of a referral, the Butte County CWS agency should perform statutorily required background checks and inspections before allowing children to be placed in a home.	Partially Implemented	Butte County Department of Employment and Social Services
32. As part of its responsibility to help children remain safe at all points during the investigation of a referral, the Orange County CWS agency should perform statutorily required background checks and inspections before allowing children to be placed in a home.	Partially Implemented	Orange County Social Services Agency
33. As part of its responsibility to help children remain safe at all points during the investigation of a referral, the San Francisco County CWS agency should perform statutorily required background checks and inspections before allowing children to be placed in a home.	Pending	City and County of San Francisco Human Services Agency
34. To improve its coordination and communication with local law enforcement, the San Francisco County CWS agency should consider entering into a memorandum of understanding with the applicable law enforcement agency that delineates how the two agencies will share information and assist each other in responding to child maltreatment.	Pending	City and County of San Francisco Human Services Agency
35. To ensure that they provide clear, up-to-date guidance to its social workers, the Butte County CWS agency should designate specific personnel to stay informed of relevant statutory, regulatory, and needed practice changes and to ensure that corresponding updates are made to its policies and procedures.	Pending	Butte County Department of Employment and Social Services
36. To ensure that they provide clear, up-to-date guidance to its social workers, the San Francisco County CWS agency should designate specific personnel to stay informed of relevant statutory, regulatory, and needed practice changes and to ensure that corresponding updates are made to its policies and procedures.	Partially Implemented	City and County of San Francisco Human Services Agency
37. To ensure that its social workers and supervisors are performing required activities in a timely and effective manner, the San Francisco County CWS agency should follow through on its plans to develop a quality assurance unit. The unit should regularly review and report to management on the degree of compliance with, and effectiveness of, the agency's policies and procedures.	Pending	City and County of San Francisco Human Services Agency
38. To promote the consistent application of agency policies and procedures, and to provide a consistent framework for its reviews, the quality assurance unit that monitors the Orange County CWS agency should complete its plans to develop and regularly use tools for examining the quality of investigative and ongoing casework.	Partially Implemented	Orange County Social Services Agency
39. To be able to review regularly more referrals and cases, the Butte County CWS agency should consider adding additional staff to its quality assurance function.	Pending	Butte County Department of Employment and Social Services
40. To promote continued improvement in the CWS system, Social Services should encourage each county CWS agency to designate personnel to update regularly their policies and procedures, to include a detailed description of the need for ongoing supervisory reviews of key aspects of their respective service processes and incorporate that description into their policies and procedures, and to designate personnel to perform regular quality assurance reviews.	Partially Implemented	Department of Social Services
41. To promote continued improvement in the CWS system, Social Services should ask each county CWS agency to report to Social Services on the status of these efforts within 60 days, six months, and one year from the publication of this audit report.	No Action Taken	Department of Social Services

## Report Number 2013-120

*Sterilization of Female Inmates: Some Inmates Were Sterilized Unlawfully, and Safeguards Designed to Limit Occurrences of the Procedure Failed (June 2014)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that the necessary education and disciplinary action can be taken, the Receiver's Office should report to the California Department of Public Health, which licenses general acute care hospitals, and the Medical Board of California, which licenses physicians, the names of all hospitals and physicians associated with inmates' bilateral tubal ligations during fiscal years 2005-06 through 2012-13 for which consent was unlawfully obtained. The Receiver's Office should make these referrals as soon as is practicable.	Fully Implemented	California Correctional Health Care Services
2. To ensure that it can better monitor how its medical staff and contractors adhere to the informed consent requirements of Title 22, sections 70707.1 through 70707.7, the Receiver's Office should develop a plan by August 2014 to implement a process by December 2014 that would include providing additional training to prison medical staff regarding Title 22 requirements for obtaining informed consent for sterilization procedures, including the applicable forms and mandatory waiting period requirements, to ensure that consent is lawfully obtained.	Partially Implemented	California Correctional Health Care Services
3. To ensure that it can better monitor how its medical staff and contractors adhere to the informed consent requirements of Title 22, sections 70707.1 through 70707.7, the Receiver's Office should develop a plan by August 2014 to implement a process by December 2014 that would include developing checklists or other tools that prison medical staff can use to ensure that medical procedures are not scheduled until after the applicable waiting periods for sterilization have been satisfied.	Partially Implemented	California Correctional Health Care Services
4. To ensure that it can better monitor how its medical staff and contractors adhere to the informed consent requirements of Title 22, sections 70707.1 through 70707.7, the Receiver's Office should develop a plan by August 2014 to implement a process by December 2014 that would include periodically reviewing, on a consistent basis, a sample of cases in which inmates received treatment resulting in sterilization at general acute care hospitals, to ensure that all informed consent requirements were satisfied.	Partially Implemented	California Correctional Health Care Services
5. To ensure that it can better monitor how its medical staff and contractors adhere to the informed consent requirements of Title 22, sections 70707.1 through 70707.7, the Receiver's Office should develop a plan by August 2014 to implement a process by December 2014 that would include working with Corrections to establish a process whereby inmates can have witnesses of their choice when consenting to sterilization, as required by Title 22, or working to revise such requirements so that there is an appropriate balance between the need for secure custody and the inmate's ability to have a witness of her choice.	Pending	California Correctional Health Care Services
6. Until such time as the Receiver's Office implements a process for obtaining inmate consent for sterilization under Title 22 that complies with all aspects of the regulations, it should discontinue its practice of facilitating an inmate's consent for sterilization in the prison and allow the general acute care hospital to obtain an inmates consent.	Pending	California Correctional Health Care Services
7. To improve the quality of the information prison medical staff document in inmate medical records, the Receiver's Office should train its entire medical staff on its policy in the inmate medical procedures related to appropriate documentation in inmates' medical records. This training should be completed by December 31, 2014.	Pending	California Correctional Health Care Services
8. To improve the quality of the information prison medical staff document in inmate medical records, the Receiver's Office should either develop or incorporate into an existing process a means by which it evaluates prison medical staffs' documentation in inmates' medical records and retrain medical staff as necessary. The Receiver's Office should develop and implement this process by June 30, 2015.	Fully Implemented	California Correctional Health Care Services
9. To ensure that inmates receive only medical services that are authorized through its utilization management process, the Receiver's Office should develop processes by August 31, 2014, such that a procedure that may result in sterilization is not scheduled unless the procedure is approved at the necessary level of the utilization management process.	Fully Implemented	California Correctional Health Care Services
10. To ensure that inmates receive only medical services that are authorized through its utilization management process, the Receiver's Office should by October 31, 2014, train its scheduling staff to verify that the appropriate utilization management approvals are documented before they schedule a procedure that may result in sterilization.	Pending	California Correctional Health Care Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
11. To ensure that inmates receive only medical services that are authorized through its utilization management process, the Receiver's Office should ensure that the computer system it procures includes functionality to electronically link medical scheduling with authorization through the utilization management process to prevent all unauthorized procedures, regardless of whether they may result in sterilization, from being scheduled.	Pending	California Correctional Health Care Services

**Report Number 2013-119***California Department of Health Care Services: Its Failure to Properly Administer the Drug Medi-Cal Treatment Program Created Opportunities for Fraud (August 2014)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately coordinate with the appropriate counties to recover inappropriate payments to ineligible providers and for services purportedly rendered to deceased beneficiaries.	No Action Taken	Department of Health Care Services
2. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately develop and implement new procedures for routinely identifying and initiating recovery efforts for payments that it authorizes between the effective date of a provider's decertification and the date it became aware of the decertification, in addition to the payments it authorizes between a beneficiary's death date and its receipt of the death record.	No Action Taken	Department of Health Care Services
3. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately direct its investigations division to determine whether it authorized any improper payments to program providers for deceased beneficiaries outside of our audit period. It should also determine whether it authorized such payments through its other Medi-Cal programs. Health Care Services should initiate efforts to recover such payments as appropriate.	Pending	Department of Health Care Services
4. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately direct its investigations division to determine whether it should recover any overpayments for the high-risk payments we identified in Table 7 on page 28 and Appendix A beginning on page 63. It should also take the appropriate disciplinary action against the affected providers, such as suspension or termination.	Pending	Department of Health Care Services
5. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately direct its investigations division to further enhance its analysis of program claims data to identify the type of high-risk payments we identified on a monthly basis.	Pending	Department of Health Care Services
6. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately direct its fiscal management and accountability branch to work with Fresno, Los Angeles, and Sacramento counties to recover the specific overpayments we identified during our visits.	No Action Taken	Department of Health Care Services
7. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately instruct the counties to remind their providers to adhere to the record retention policies stated in their contracts.	Fully Implemented	Department of Health Care Services
8. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately ensure that each county has a process in place to follow up on their providers' implementation of corrective action plans aimed at resolving program deficiencies.	Pending	Department of Health Care Services
9. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately ensure that Fresno County strengthens its provider contract monitoring process, including revising its report format and conducting follow-up visits to providers.	Pending	Department of Health Care Services
10. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately ensure that Los Angeles County strengthens its provider contract monitoring process, including fully implementing its RATE system to track and respond to provider deficiencies, and that it imposes appropriate responses when warranted, such as withholding payment or suspending or terminating a contract.	Pending	Department of Health Care Services
11. To ensure that the providers receive reimbursement for only valid services, Health Care Services should immediately ensure that Sacramento County strengthens its provider contract monitoring process, including tracking provider deficiencies and conducting follow-up visits to providers.	Pending	Department of Health Care Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
12. To prevent the certification of ineligible providers, Health Care Services should immediately instruct its staff to compare the names of the managing employees whom applicant providers identify in their program applications to those whom they identify in their disclosure statements.	No Action Taken	Department of Health Care Services
13. To prevent the certification of ineligible providers, Health Care Services should immediately train its staff regularly on the program requirements, including the certification standards and the federal Medicaid provider enrollment requirements.	No Action Taken	Department of Health Care Services
14. To prevent the certification of ineligible providers, Health Care Services should immediately develop a provider agreement for program providers.	Fully Implemented	Department of Health Care Services
15. To prevent the certification of ineligible providers, Health Care Services should immediately update its procedures to include searches of the Social Security Death Master File.	No Action Taken	Department of Health Care Services
16. To prevent the certification of ineligible providers, Health Care Services should immediately develop procedures on how to evaluate provider applicant license database searches.	No Action Taken	Department of Health Care Services
17. To prevent the certification of ineligible providers, Health Care Services should immediately instruct its enrollment division to conduct all required database searches of individuals that provider applicants identify as their owners or managing employees.	No Action Taken	Department of Health Care Services
18. To prevent the certification of ineligible providers, Health Care Services should immediately ensure that its enrollment division conducts LEIE and EPLS database searches of program providers at least monthly.	No Action Taken	Department of Health Care Services
19. To prevent the certification of ineligible providers, Health Care Services should immediately designate provider applicants as moderate or high risk in accordance with federal regulations.	Fully Implemented	Department of Health Care Services
20. To prevent the certification of ineligible providers, Health Care Services should immediately establish a mechanism to identify the number of program sites the provider applicants' medical directors work at, and ensure that the physician ratio does not exceed 1-to-3 in accordance with state law and the certification standards.	No Action Taken	Department of Health Care Services
21. To prevent the certification of ineligible providers, Health Care Services should immediately identify and perform an immediate recertification of providers that signed the Compliance Agreement to ensure that these providers are currently meeting all program requirements.	No Action Taken	Department of Health Care Services
22. To prevent the certification of ineligible providers, Health Care Services should immediately use a risk-based approach for recertifying program providers.	Fully Implemented	Department of Health Care Services
23. To prevent the certification of ineligible providers, Health Care Services should immediately develop policies and procedures for its program recertification process.	No Action Taken	Department of Health Care Services
24. To prevent the certification of ineligible providers, Health Care Services should immediately develop a schedule for recertifying all program providers every five years.	Pending	Department of Health Care Services
25. To prevent the certification of ineligible providers, Health Care Services should immediately continue its implementation of an automated provider enrollment system.	No Action Taken	Department of Health Care Services
26. To prevent the certification of ineligible providers, Health Care Services should immediately complete its program recertification on or before March 24, 2016, as federal regulations require.	No Action Taken	Department of Health Care Services
27. To prevent the certification of ineligible providers, Health Care Services should immediately establish a plan for eliminating its backlog of applications for new sites and services and changes to existing certifications.	No Action Taken	Department of Health Care Services
28. To ensure that it appropriately and consistently reviews provider applications and conducts site visits, Health Care Services should update its program checklists to reflect the current federal and state laws and regulations.	No Action Taken	Department of Health Care Services
29. To ensure that it appropriately and consistently reviews provider applications and conducts site visits, Health Care Services should retain the documentation, such as checklists, that it uses to support its certification decisions in accordance with its retention policy.	No Action Taken	Department of Health Care Services
30. To ensure that it appropriately and consistently reviews provider applications and conducts site visits, Health Care Services should ensure that supervisors perform detailed reviews of all provider applicants' files, including the application, disclosure statement, and checklists, and that they evidence their reviews by signing off on the appropriate forms.	No Action Taken	Department of Health Care Services
31. To improve the coordination between its divisions, branches, and units and ensure that it addresses allegations of fraud in a timely manner, Health Care Services should continue its efforts to develop its provider risk assessment model for the PSPP unit.	Pending	Department of Health Care Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
32. To improve the coordination between its divisions, branches, and units and ensure that it addresses allegations of fraud in a timely manner, Health Care Services should continue its efforts to establish a mechanism for its PSPP unit to report the status of fraud referrals to SUD management and its investigations division.	Fully Implemented	Department of Health Care Services
33. To improve the coordination between its divisions, branches, and units and ensure that it addresses allegations of fraud in a timely manner, Health Care Services should fully implement the investigations division's recommendations shown in Appendix B. If it chooses not to implement a recommendation, it should document sufficiently the reasons for its decision.	Pending	Department of Health Care Services
34. To strengthen the coordination between the State and the counties, Health Care Services should amend the State-county contract to address any gaps in their collective monitoring efforts.	Pending	Department of Health Care Services
35. To ensure that beneficiaries have safe and reliable access to program services, Health Care Services should amend the State-county contract to allow a process for counties to notify their key partners of the providers that it has suspended.	Pending	Department of Health Care Services

**Report Number 2014-111**

*California Department of Public Health: It Has Not Effectively Managed Investigations of Complaints Related to Long-Term Health Care Facilities (October 2014)*

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To protect the health, safety, and well-being of residents in long-term health care facilities, Public Health should improve its oversight of complaint processing. Specifically, by January 1, 2015, Public Health should establish and implement a formal process for monitoring the status and progress in resolving open facility-related complaints and ERLs at all district offices. This process should include periodically reviewing a report of open complaints and ERLs to ensure that all complaints and ERLs are addressed promptly.	Partially Implemented	Department of Public Health
2. To protect the health, safety, and well-being of residents in long-term health care facilities, Public Health should improve its oversight of complaint processing. Specifically, by January 1, 2015, Public Health should improve the accuracy of information in the spreadsheet that PCB uses to track the status of complaints against individuals and review the reports of open complaints to ensure that all complaints are addressed promptly.	Pending	Department of Public Health
3. To protect the health, safety, and well-being of residents in long-term health care facilities, Public Health should improve its oversight of complaint processing. Specifically, by May 1, 2015, Public Health should establish a specific time frame for completing facility-related complaint investigations and ERI investigations and inform staff of the expectation that they will meet the time frame. Public Health should also require district offices to provide adequate, documented justification whenever they fail to meet this time frame.	Will Not Implement	Department of Public Health
4. To protect the health, safety, and well-being of residents in long-term health care facilities, Public Health should improve its oversight of complaint processing. Specifically, by May 1, 2015, Public Health should develop formal written policies and procedures for PCB to process complaints about certified individuals in a timely manner. These policies and procedures should include specific time frames for prioritizing and assigning complaints to investigators, for initiating investigations, and for completing the investigations. Public Health should also inform staff of the expectation that they will meet these time frames. It should require PCB to provide adequate, documented justification whenever PCB fails to meet the time frames.	Pending	Department of Public Health
5. To ensure that district offices address ERLs consistently and to ensure that they investigate ERLs in the most efficient manner, Public Health should assess whether each district office is appropriately prioritizing ERLs. Specifically, it should determine, on a district-by-district basis, whether district offices' assigning ERLs a priority level that requires an on-site visit is justified. This assessment should also determine whether each district office is prioritizing ERLs appropriately when determining that on-site investigations are not necessary.	Pending	Department of Public Health
6. To ensure that district offices address ERLs consistently and to ensure that they investigate ERLs in the most efficient manner, Public Health should use the information from its assessment to provide guidance to district offices by October 1, 2015, on best practices for consistent and efficient processing of ERLs.	Pending	Department of Public Health

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
7. To ensure that district offices address ERIs consistently and to ensure that they investigate ERIs in the most efficient manner, Public Health should review periodically a sample of the priorities that district offices assign to ERIs to ensure compliance with best practices.	Pending	Department of Public Health
8. To protect the residents in long-term health care facilities from potential harm, Public Health should ensure that its district offices have adequate staffing levels for its licensing and certification responsibilities, including staffing levels that allow prompt investigations of complaints. Specifically, Public Health should continue working with CalHR to complete the reclassification of district offices' investigator supervisor and manager positions and then quickly fill the vacant positions at district offices.	Pending	Department of Public Health
9. To protect the residents in long-term health care facilities from potential harm, Public Health should ensure that its district offices have adequate staffing levels for its licensing and certification responsibilities, including staffing levels that allow prompt investigations of complaints. Specifically, Public Health should complete by May 1, 2015, a staffing assessment to identify the resources necessary for district offices to investigate open complaints and ERIs and to promptly address new complaints on an ongoing basis. Public Health should use this assessment to request additional resources, if necessary.	No Action Taken	Department of Public Health
10. To protect the residents in long-term health care facilities from potential harm, Public Health should ensure that its district offices have adequate staffing levels for its licensing and certification responsibilities, including staffing levels that allow prompt investigations of complaints. Specifically, by January 1, 2015, Public Health should establish a time frame for fully implementing the recommendations that its consultant identified related to the processing of complaints about long-term health care facilities.	Pending	Department of Public Health
11. Public Health should take steps to ensure that PCB has the resources necessary on an ongoing basis to complete investigations of complaints against individuals. Specifically, Public Health should assess whether the temporary resources it has received are adequate to reduce the number of open complaints to a manageable level. This assessment should also determine whether permanent resources assigned to PCB are adequate to address future complaints. Public Health should use this assessment to request additional resources, if necessary.	Pending	Department of Public Health
12. To ensure that its district offices properly investigate complaints and ERIs, Public Health should make certain that all district offices follow procedures requiring supervisory review and approval of complaint and ERI investigations. If the district offices do not have a sufficient number of supervisors to review investigations they did not conduct, Public Health should arrange to assist the districts until such time that they do have a sufficient number of supervisors.	Pending	Department of Public Health
13. To make certain that its district offices comply with federal requirements regarding corrective action plans, Public Health should establish a process for its headquarters or regional management to inspect district office records periodically to confirm that they are obtaining corrective action plans according to the required time frame and verifying that facilities have performed the corrective actions described in the plans when required.	Pending	Department of Public Health
14. To ensure that it has closed complaints and ERIs appropriately, Public Health should take steps by April 2015 to verify that complaints that its field operations branch closed administratively were closed appropriately. For example, it could request the district offices to verify that the closures were appropriate.	Pending	Department of Public Health
15. To improve oversight of its district offices' complaint and ERI investigation process, Public Health should increase its monitoring of the district offices' compliance with federal and state laws as well as with its policies. For example, Public Health could accomplish this by directing its regional managers to spend more time at the district offices to enforce district office compliance with policies, or by directing its quality improvement section to review a random sample of investigations for quality and adherence to policy. Public Health should further establish a formal process to review periodically LA County's compliance with the terms of its contract, including compliance with the terms for investigating complaints.	Pending	Department of Public Health
16. To better protect the safety of residents in long-term health care facilities, Public Health should direct its district offices to comply with required time frames for initiating and closing completed investigations. If a district office lacks sufficient resources to initiate or close investigations within those time frames, Public Health should arrange to assist that district until such time that the district complies with the statute.	Pending	Department of Public Health

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
17. To make certain that it complies with statutory time frames for adjudicating appeals related to individuals, Public Health should establish a process to monitor its contractor's performance with contract terms.	No Action Taken	Department of Public Health
18. To ensure that the Legislature promptly receives information about the timeliness of Public Health's complaint processing related to long-term health care facilities, Public Health should continue to include all of the statutorily required information in its annual report and submit it by the due date.	Pending	Department of Public Health

**Report Number 2013-125***California Department of Health Care Services: Weaknesses in Its Medi-Cal Dental Program Limit Children's Access to Dental Care (December 2014)*

RECOMMENDATION	STATUS OF RECOMMENDATION*	ENTITY
1. To ensure that child beneficiaries throughout California can reasonably access dental services under Medi-Cal and to increase child beneficiary utilization and provider participation, Health Care Services should take the following steps for the fee-for-service delivery system by May 2015: establish criteria for assessing beneficiary utilization of dental services.	Pending	Department of Health Care Services
2. To ensure that child beneficiaries throughout California can reasonably access dental services under Medi-Cal and to increase child beneficiary utilization and provider participation, Health Care Services should take the following steps for the fee-for-service delivery system by May 2015: establish criteria for assessing provider participation in the program.	Pending	Department of Health Care Services
3. To ensure that child beneficiaries throughout California can reasonably access dental services under Medi-Cal and to increase child beneficiary utilization and provider participation, Health Care Services should take the following steps for the fee-for-service delivery system by May 2015: develop procedures for identifying periodically counties or other geographic areas in which the utilization rate for child beneficiaries and the participation rate for providers fail to meet applicable criteria.	Pending	Department of Health Care Services
4. To ensure that child beneficiaries throughout California can reasonably access dental services under Medi-Cal and to increase child beneficiary utilization and provider participation, Health Care Services should take the following steps for the fee-for-service delivery system by May 2015: immediately take action to resolve any declining trends identified during its monitoring efforts.	Pending	Department of Health Care Services
5. To help increase the number of providers participating in the program's fee-for-service delivery system, Health Care Services should improve its identification and implementation of changes that minimize or simplify administrative processes for providers. These changes should include revising its processes pertaining to dental procedures that require radiographs or photographs.	Pending	Department of Health Care Services
6. To ensure that the influx of beneficiaries resulting from recent changes to federal and state law is able to access Medi-Cal's dental services, Health Care Services should take these steps: continuously monitor beneficiary utilization, the number of beneficiaries having difficulty accessing appointments with providers, and the number of providers enrolling in and leaving the program.	Pending	Department of Health Care Services
7. To ensure that the influx of beneficiaries resulting from recent changes to federal and state law is able to access Medi-Cal's dental services, Health Care Services should take these steps: immediately take action to resolve any declining trends identified during its monitoring efforts.	Pending	Department of Health Care Services
8. To ensure that Medi-Cal's child beneficiaries have reasonable access to dental services, Health Care Services should immediately resume performing its annual reimbursement rate reviews, as state law requires.	Pending	Department of Health Care Services
9. To make certain that access to dental services for child beneficiaries is comparable to the access available to the general population in the same geographic areas, Health Care Services should immediately adhere to its monitoring plan.	Pending	Department of Health Care Services
10. To make certain that access to dental services for child beneficiaries is comparable to the access available to the general population in the same geographic areas, Health Care Services should also compare its results for measuring the percentage of child beneficiaries who had at least one dental visit in the past 12 months with the results from the three surveys conducted by other entities, as its state plan requires.	Pending	Department of Health Care Services



RECOMMENDATION	STATUS OF RECOMMENDATION*	ENTITY
11. To improve beneficiary utilization rates and provider participation under the program's fee-for-service delivery system, Health Care Services should immediately take the following actions: direct Delta Dental to submit annually a plan that describes how it will remedy the dental access problems in the State's underserved areas and in California's border communities.	Pending	Department of Health Care Services
12. To improve beneficiary utilization rates and provider participation under the program's fee-for-service delivery system, Health Care Services should immediately take the following actions: direct Delta Dental to contract with one or more entities to provide additional dental services in either fixed facilities or mobile clinics in underserved areas, as its contract requires.	Pending	Department of Health Care Services
13. To improve beneficiary utilization rates and provider participation under the program's fee-for-service delivery system, Health Care Services should immediately take the following actions: increase Delta Dental's access to beneficiary address information and require it to contact beneficiaries residing in underserved areas directly to make them aware of the program's benefits.	Pending	Department of Health Care Services
14. To improve beneficiary utilization rates and provider participation under the program's fee-for-service delivery system, Health Care Services should immediately take the following actions: review Delta Dental's outreach activities and implement measurable objectives for its outreach unit.	Pending	Department of Health Care Services
15. To improve beneficiary utilization rates and provider participation under the program's fee-for-service delivery system, Health Care Services should immediately take the following actions: require Delta Dental to develop a dental outreach and education program and to submit an annual plan by the end of each calendar year.	Pending	Department of Health Care Services
16. To ensure that the State pays only for deliverables performed by Delta Dental under the terms of its contract, Health Care Services should immediately take these steps: ensure that the financial manual and invoices are consistent with contract language.	Pending	Department of Health Care Services
17. To ensure that the State pays only for deliverables performed by Delta Dental under the terms of its contract, Health Care Services should immediately take these steps: develop and implement tangible measurements to evaluate Delta Dental's performance of all functions under the contract.	Pending	Department of Health Care Services
18. To comply with state contracting laws that protect the State's interests, Health Care services should implement future contract amendments via appropriate channels, including state contracting procedures.	Pending	Department of Health Care Services
19. To ensure that it reports in the CMS-416 an accurate number of child beneficiaries who received specific types of dental services from the centers and clinics, Health Care Services should continue working on a solution to capture the details necessary to identify the specific dental services rendered.	Pending	Department of Health Care Services
20. To make certain that it meets the requirements of the new state law and that its performance measures are accurate, Health Care Services should do the following: establish the provider-to-beneficiary ratio statewide and by county as performance measures designed to evaluate access and availability of dental services and include this measure in its October 2015 report to the Legislature.	Pending	Department of Health Care Services
21. To make certain that it meets the requirements of the new state law and that its performance measures are accurate, Health Care Services should do the following: require that the provider field in its data systems be populated in all circumstances.	Pending	Department of Health Care Services
22. To make certain that it meets the requirements of the new state law and that its performance measures are accurate, Health Care Services should do the following: correct the erroneous data currently in its data warehouse and fix its process for transferring data from its mainframe to its data warehouse.	Pending	Department of Health Care Services
23. To ensure that Health Care Services and its fiscal intermediaries reimburse providers only for services rendered to eligible beneficiaries, Health Care Services should do the following: Obtain Social Security's Death Master File and update monthly its beneficiary eligibility system with death information.	Pending	Department of Health Care Services
24. To ensure that Health Care Services and its fiscal intermediaries reimburse providers only for services rendered to eligible beneficiaries, Health Care Services should do the following: Coordinate with the appropriate fiscal intermediaries to recover inappropriate payments made for services purportedly rendered to deceased beneficiaries, if necessary.	Pending	Department of Health Care Services

\* The status of recommendations for audits issued between November and December 2014 is based on the agencies' initial response, which is included in the original audit report, available on the California State Auditor's (state auditor) Web site: [www.auditor.ca.gov](http://www.auditor.ca.gov).