

## **FINAL REPORT**

### **#0701 SAN JOAQUIN COUNTY HEALTH CARE SERVICES CHDP-99 PROGRAM**

#### **REASON FOR INVESTIGATION:**

Citizen complaint from a dentist enrolled in the Children=s Health and Disability Prevention Program (CHDP-99) about nonpayment of claims since July 2001.

#### **BACKGROUND:**

Proposition 99, the Tobacco Tax and Health Protection Act was voter approved in 1988. In Fiscal year 1989-90, AB 75 implemented some of the provisions of Proposition 99 and statutes in Fiscal Year 1991-92 extended these provisions. Under these provisions, a portion of the Tobacco Tax funds are allocated to counties. The larger counties have the California Healthcare for Indigents Program (CHIP)and the smaller counties have the Rural Health Services(RHS)program to provide health services to people who cannot afford to pay all or part of their medical care and are not covered by any other federally reimburse program.

#### **METHOD OF INVESTIGATION:**

Documents reviewed:

- CHDP claims
- Required documents submitted by San Joaquin HealthCare Services to State for allocations of funds
- Narrative from Finance Director, Health Care Services

#### **FINDINGS:**

- Claim forms reviewed showed work completed on clients with dates. The bottom line showed funds paid but no dates. However, according to narrative by Finance Director, Health Care Services, the outstanding claims total \$53,636.15.
- Various documents are required by the State at different times of the year in order for the County to receive their CHIP allocation. In turn, claims are paid to providers from these allocations by San Joaquin County Health Care Services. One of these required reports,

which is due every 3 months, is the Medically Indigent Care Reporting System (MICRS), which identifies the inpatient/outpatient utilization and demographic data.

- The State requested that the CHIP Program had to make the MICRS report Y2K compliant as well as adding new tables to the computer software.
- The San Joaquin County General Hospital contracted with a local computer programming consultant to rewrite the MICRS program, however, the vendor ceased operation prior to project completion. Ten months elapsed before the Hospital obtained a new vendor to complete the project.
- In June 2001, the hospital retained a vendor to rewrite the entire MICRS reporting system. This is being completed and the reports for FY 99-00, FY 00-01 and FY 01-02 are being produced and filed with the State.
- A State of California Health Care Analyst met with the Hospital and is satisfied that the Hospital will be current with all reports and reimbursements by August 2002.

**CONCLUSION:**

The 2001-2002 SJCCGJ reviewed documents regarding the CHDP 99 program and is assured that the problem with the State required reports is being resolved and that current and future reimbursements to CHDP providers will be made in a timely manner.

**RECOMMENDATIONS:**

1. The CHDP claim forms should include the date that the claim was submitted as well as the date that the claim was paid to the CHDP provider.
2. Develop a back up protocol for either hand written or typed reports to the State in the event of future computer program problems, thereby insuring the continued flow of allocations to the County and reimbursements to CHDP 99 Providers.
3. The 2002-2003 SJCCGJ follow up to verify that the previous CHDP-99 claims were paid and the computer problem has indeed been solved.

**RESPONSE REQUIRED:**

*Pursuant to Section '933.05 of the Penal Code:*

The San Joaquin County Health Care Services shall report to the Presiding Judge of the San Joaquin Superior Court, in writing and within 90 days of the publication of this report, the response indicates one of the following:

As to each finding in the report a response indicating one of the following:

- a. The respondent agrees with the finding.

- b. The respondent disagrees with the finding with an explanation of reasons therefore.

As to each recommendation, the response indicating one of the following:

- a. The recommendation has been implemented, with a summary of the action taken.
- b. The recommendation has not yet been implemented, but will be with a timeframe
- c. The recommendation requires further analysis, with an explanation of the scope of the analysis and a timeframe not to exceed 6 months.
- d. The recommendation will not be implemented, with an explanation therefore.