DHCS AUDITS & INVESTIGATIONS FAB

DRUG MEDI-CAL/BLOCK GRANT
1. Can we report on an accrual basis as opposed to actual basis? Is our county auditor-controller required to sign off on the attestation or can the department’s fiscal officer sign off?

2. Overview of funding sources, what each can be used for, if it can carry over or must be expended.

3. Please explain your understanding of Share of Costs and what process should the counties be doing to follow regulations regarding Share of Cost?
4. Particularly during the DMC-ODS learning process, can auditors discuss with us potential issues they identify? For example, an auditor recently reduced the DMC cost per unit for one of our program. I believe they made a mistake. Since the DMC state rate is so low, our reimbursement is not affected. Under the DMC-ODS, I’d like an opportunity to address issues like this, rather than having to go through a formal appeal process.
5. Is DHCS going to provide guidelines to the county prior to the audit?
Is this process going to be communicative of punitive?
Will the counties be dinged for items that have never had clear concise guidance from DHCS?

6. For a DMC-ODS cost report, what methods are acceptable for allocating costs to services within a program?
For example, how will a residential program allocate costs that determine bed day rate and case management rate? Same question for OTP’s, which are not required to submit costs.
7. Please explain the preferred method of Cost Allocation of Indirect Costs and Overhead.

8. Will there be any extensions for the 17/18 cost report in light of the adoption of DMC-ODS waiver and the 6-month claiming extension granted?

9. What years and what time frame will we have to provide you with requested documents?

10. How will auditors expect counties to segregate cost for integrated services? Is there an accepted or preferred methodology?
THANK YOU