



CONNECTICUT HOMEMAKER AND COMPANION ASSOCIATION

SUPPORT HB-6550, An Act Concerning Medicaid Provider Audits

Good Evening Sen. Moore, Rep. Abercrombie and members of Human Services Committee,

I am Eileen Adams, a board member of the CT Homemaker and Companion Association. Thank you for the opportunity to speak this evening to address the issue of Department of Social Services provider audits.

Fairness in audits is the issue that brought together several owner-operated and not-for-profit non-medical homemaker and companion agencies more than 12 years ago. We formed the CTHCA and now have more than 50 member agencies, representing more than 5000 caregivers and about 10,000 consumers in their residences. We were hopeful with the passages of PA10-116 and PA14-162, which required DSS to develop regulations to guide the auditors and the providers. But, as you know, the proposed regulations presented to the Regulation Review Committee may have been grammatically and legally correct, but they did not specifically bring fairness to the process.

We thank the many legislators who recognize the need for change and raised HB-6550 to help guide DSS's auditors to the intent with which the previous laws were passed. What we want for providers is no extrapolation without evidence of a sustained high level of error or where there is fraud. We should not be held to a **Zero Error Rate**, especially considering our mistakes are mostly clerical in nature and not for an overbilling when services were paid but not authorized. We ask for clear guidelines on what is an error, timeframe for the audits, and sampling methodology; and an independent appeal, not an adjudicator appointed from within DSS.

In the CT Home Care Program for Elders, homemakers and companions mostly perform recurring services. The care managers will assign blocks of time per day, per week, per month, depending upon the needs of the consumer. With agencies processing hundreds to thousands to tens of thousands of time/activity sheets each week, it's easy to see how a checkmark of what duty was performed on a given day can be missed. And yet, although the time and date was billed according to the care plan and there are signatures of both consumer and caregiver confirming the service was performed, without a checkmark indicating the service description, it is an audit finding resulting in thousands of dollars to be paid back to the state. At the exit conference, the agency may bring in evidence to support that services were performed according to the care plan. At which, auditors have said although they agree from the timesheet that a caregiver was there, they cannot accept "after the fact" evidence. Missing checkmarks like this did not result in a financial consequence to the Medicaid program, yet became a financial penalty to an agency.

Our industry's 1% increase in January, the first increase in eight years, amounted to 16 cents per hour. We are operating with thin or no profit margins. Getting the DSS audits to what they are meant to be – a way to detect fraud or legitimate overbillings – will help agencies continue to do what they do best, take care of the state's consumers in their homes, where they want to live.

Thank you for your time,
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