# **Section 10: Program Integrity and Accountability**

Program integrity and accountability activities are integral to the effective administration of the CCDF program. As stewards of federal funds, Lead Agencies must ensure strong and effective internal controls to prevent fraud and maintain continuity of services to meet the needs of children and families. In order to operate and maintain a strong CCDF program, regular evaluation of the program's internal controls as well as comprehensive training for all entities involved in the administration of the program are imperative. In this section, Lead Agencies will describe their internal controls and how those internal controls effectively ensure integrity and accountability. These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors and should apply to all CCDF funds.

## **10.1 Effective Internal Controls**

Lead Agencies must ensure the integrity of the use of CCDF funds through effective fiscal management and must ensure that financial practices are in place. Lead Agencies must have effective fiscal management practices in place for all CCDF expenditures.

**10.1.1** Organizational structure to support integrity and internal controls

Describe how the Lead Agency's organizational structure ensures the oversight and implementation of effective internal controls that promote and support program integrity and accountability. Describe: *Enter Text* 

Include the following elements in your description:

- 1) Assignment of authority and responsibilities related to program integrity. *DECAL is a well-structured organization with clear lines of responsibility and fosters a culture of integrity, accountability, and ethical values. Organization charts and job duties are clearly defined and documented. Key roles have been established and include a Commissioner, Deputy Commissioners, Directors, Managers, and staff. Each management-level has certain responsibilities to achieve program objectives.*
- 2) Delegation of duties. *DECAL's executive and senior leadership determines the level of authority for each division to fulfill organizational responsibilities. Segregation of duties is considered when delegating responsibilities and key processes.*
- 3) Coordination of activities. *DECAL conducts risk assessments and control matrices to document its internal controls.* Process flow charts are used to document internal controls. Assessment of controls are conducted to ensure agency and program objectives are efficiently achieved.
- 4) Communication between fiscal and program staff. Constant communication is conducted within the agency and with external stakeholders. Quarterly budget meetings are conducted to review financial objectives. DECAL maintains segregation of duties between finance and program staff.
- 5) Segregation of duties. The Lead Agency relies on checks and balances and separation of duties to ensure program integrity. Examples of this are evident in the processes and the structure of the Lead Agency and the CCDF program. In the CCDF program, the Lead Agency has a stand-alone Quality Assurance and Training Unit (QA&T) that performs quality assurance reviews of eligibility determinations made by the staff. This QA&T unit does not determine eligibility but does ensure quality control of the quality assurance process. The quality assurance process includes reviewing eligibility determinations and

training staff in areas that need improvement. The Lead Agency also assigns certain duties to other divisions that do not perform regular CCDF program administration. This differentiation of duties helps ensure program integrity in the CCDF program. The Lead Agency's Finance Division is responsible for receiving the CCDF funding, for making payments to CCDF providers, and for financial reporting to ACF. The Audits and Compliance Division is responsible for performing reviews and investigations of CCDF participants, providers, and eligibility staff to ensure program integrity. This allows CCDF program staff to focus on administering the program and provides extra checks and balances to ensure program integrity. Processes are documented by flowcharts to identify and remediate any weaknesses in the segregation of duties.

- 6) Establishment of checks and balances to identify potential fraud risks. *DECAL* performs annual risk assessments to identify qualitative risk factors including susceptibility to fraud. Mitigating controls are implemented to address gaps.
- 7) Other activities that support program activity. Enter Text
- **10.1.2** Fiscal management practices

Describe how the Lead Agency ensures effective fiscal management practices for all CCDF expenditures, including:

- a. Fiscal oversight of CCDF funds, including grants and contracts. Describe: Provider's bill for services on a weekly basis. After all invoices are received, built-in system analytics flag possible payment errors for review. Because all providers complete online invoicing, all provider payments are analyzed using these built in analytics. Payment flags where billing is found to be accurate will be released and included in the payment cycle for that week. Payment flags where the billing is found to be inaccurate will be denied, and the provider is notified of the denial; given opportunity for a reconsideration; and later an appeal if the reconsideration returns the same result. Additionally, the Quality Assurance and Payments team will select a percentage of providers to review billing practices in more depth for providers' invoices that are frequently flagged. Lastly, the Lead Agency's Audits and Compliance Division conducts audits of provider billing records regularly, and any invoices for care that were paid and not supported by attendance records and sign-in/sign out sheets may result in those funds being recouped by the Lead Agency.
- b. Tracking systems that ensure reasonable and allowable costs and allow for tracing of funds to a level of expenditure adequate to establish that such funds have not been used in violation of the provision of this part. Describe: The Lead Agency executes and maintains a written agreement with CCDF sub-recipients that includes a budget that itemizes allowable categories of expenditures. CCDF sub-recipients are also required to submit a request for reimbursement monthly. This request details the expenditures for which the sub-recipient is requesting reimbursement and is reviewed by the Lead Agency before disbursement of funds to ensure reasonable and allowability. The Lead Agency Audits and Compliance Division also reserves the right to audit CCDF sub-recipients where expenditures of CCDF funds are reviewed to ensure they are supported and allowable.
- *c.* Process and procedures to prepare and submit required state and federal fiscal reporting. Describe: DECAL uses internal general ledger reports to compile information for the state's budgetary compliance report, annual comprehensive annual report, and HHS financial reports (ACF-696). DECAL reconciles general ledger data to the state and federal reports to ensure completeness and accuracy. DECAL has an internal review process before the final reports are

submitted to the cognizant financial reporting agencies.

- d. Other Enter Text
- **10.1.3** Effectiveness of fiscal management practices

Describe how the Lead Agency knows there are effective fiscal management practices in place for all CCDF expenditures, including:

- a. How the Lead Agency defines effective fiscal management practices. Describe: Effective fiscal management (EFM) includes strategic planning, directing, and controlling financial resources within government. Its primary objectives are to ensure efficient use of funds and to achieve DECAL goals. EFM includes key components to ensure effective EFM. Balance Budgets: DECAL adheres to state budgeting practices to estimate accurate revenues and expenditures to establish a budget. DECAL has a budget team that monitors monthly budgets to ensure the agency stays within the budget. Minimizing Waste: Efficient fiscal management involves identifying and eliminating unnecessary expenses. By minimizing waste, organizations can allocate resources more effectively and avoid overspending. Maximizing Value: Effective fiscal management focuses on achieving the highest value from available resources. This includes prioritizing essential services and evaluating cost-effectiveness for all programs. Proper Planning and Record-Keeping: DECAL maintains detailed budgets and accounting records to provide timely and credible financial information for leaders. DECAL follows state and federal accounting and reporting rules and records transactions as they occur.
- b. How the Lead Agency measures and tracks results of their fiscal management practices. Describe: *DECAL produces budget monitoring reports to compare budgets to actual expenditures. These reports are produced on a monthly and quarterly basis. DECAL closes fiscal year reports in accordance with the state's closing procedures.*
- c. How the results inform implementation. Describe: DECAL's monthly financial reports reflected programmatic decisions on spending grant funds. DECAL creates monthly and quarterly financial reports for senior and executive leadership. Timely decisions can be made to address financial concerns such as potential over-expenditures or revenue shortfalls.
- d. Other. Describe: DECAL adheres to state accounting policy and federal regulations in making financial decisions. This adherence includes proper governmental accounting practices, review of federal regulations such as the Uniform Administrative Grant requirements (Part 200), and state procurement rules.

#### 10.1.4 Identifying risk

Describe the processes the Lead Agency uses to identify risk in the CCDF program including:

a. Each process used by the Lead Agency to identify risk (including entities responsible for implementing each process). Describe: *DECAL performs risk* assessments using the GAO Framework, known as the Green Book. Risk factors included are: Complexity of Activity, Centralization of Processes, Location, History of Past Errors, Volume of Activity, Automation, Susceptibility of Fraud. Elements of risk assessment are considered when assessing risk and include Likelihood,

Financial Impact, Operational Impact, Strategic Impact, and Compliance Impact. In addition, the Audits and Compliance Division uses data obtained through multiple Lead Agency programs to inform the audit team about risk areas within the program. Furthermore, the CAPS Quality Assurance and Payments team implemented a new process whereby billing data is analyzed upon submission to DECAL to identify red flags that can then be investigated before payment. The Payment Assurance team identifies red flags with each billing cycle and creates a red flag report showing issues that can be investigated before payment

- b. The frequency of each risk assessment. Describe: *DECAL performs monitoring functions and conducts risk assessments annually and as needed basis for major updates.*
- c. How the Lead Agency uses risk assessment results to inform program improvement. Describe: *DECAL performs a Gap Analysis to assess processes that need improvement or mitigating controls.*
- d. How the Lead Agency knows that the risk assessment processes utilized are effective. Describe: *DECAL performs a test-of-one to test effectiveness of processes. Using the Green Book framework, DECAL evaluates likelihood and impact of risks.*
- e. Other. Describe: Enter Text

#### 10.1.5 Processes to train about CCDF requirements and program integrity

Describe the process the Lead Agency uses to train staff of the Lead Agency and other agencies engaged in the administration of CCDF, and child care providers about program requirements and integrity.

- a. Describe how the Lead Agency ensures that all staff members who administer the CCDF program (including through MOUs, grants, and contracts) are informed and trained regarding program requirements and integrity:
  - i. Describe the training provided to staff members around CCDF program requirements and program integrity: The Lead Agency relies on training, checks and balances, and separation of duties to ensure program integrity. Examples of this are evident in the processes and the structure of the Lead Agency and the CCDF program. The Lead Agency's CCDF program contains a stand-alone Quality Assurance and Training (QA&T) unit to conduct training on policy that includes information on program integrity. QA&T also conducts training on policy changes and on how policy is implemented. The scope and type of training is based on the needs of the staff members and is categorized into three main areas: 1) new hires, 2) existing staff, and 3) other divisions within the Lead Agency and other agencies. New hires to the CCDF program are trained on full policy and on how to use the various systems needed to operate the program. Existing staff are given policy and systems training based on their needs and on ongoing monitoring that determines areas that need improvement. Other divisions within the Lead Agency and other agencies are given policy and systems training based on their needs and roles. The QA&T unit also conducts weekly updates to address policy changes, policy clarifications, and best practices to help

ensure program integrity. When changes to the CCDF program policies and procedures manual are made, CCDF program staff within the Lead Agency and other agencies are notified of all changes via email communications. Additionally, all policy changes are reflected in a comprehensive document available on the CCDF program website at (https://caps.decal.ga.gov/en/), and staff are notified that a new version is available. Staff members within the Lead Agency and other agencies have access to the CCDF program website. Further, to ensure program integrity, QA&T performs quality assurance reviews of eligibility determinations made by the staff. The QA&T unit does not determine eligibility but does ensure quality control of the *quality assurance process. The quality assurance process includes reviewing* eligibility determinations and training staff in areas that need improvement. The Lead Agency also assigns certain duties to other divisions that do not perform regular CCDF program administration. This differentiation of duties helps ensure program integrity in the CCDF program. The Lead Agency's Finance Division is responsible for receiving the CCDF funding, for making payments to CCDF providers, and for financial reporting to ACF. The Audits and Compliance Division is responsible for performing reviews and investigations of CCDF participants, providers, and eligibility staff to ensure program integrity. This allows CCDF program staff to focus on administering the program and provides extra checks and balances to ensure program integrity.

- ii. Describe how staff training is evaluated for effectiveness: The Lead Agency's CCDF program staff conduct quality assurance reviews on eligibility determinations at initial eligibility, case changes, and redetermination. The quality assurance reviews are used to monitor and assess policy implementation on an ongoing basis and determine the effectiveness of training. The quality assurance reviews are completed by members of the CCDF program Quality Assurance and Training (QA&T) unit, management, and coordinators. Cases are selected from a random sample of initial eligibility, changes during the eligibility period, and redeterminations completed each month. Cases processed by newer staff are monitored more frequently than staff who have more experience processing eligibility. To further ensure that training is effective, the QA&T unit also supports staff by conducting ongoing focused training in areas with the highest error rate in determining eligibility. CCDF program supervisors also follow up with their staff on areas that need improvement. Additionally, the Lead Agency's Audits and Compliance unit outside of the CCDF program conducts quarterly error-rate reviews on cases to ensure training effectiveness, provide feedback to staff, and improve reliability in determining eligibility according to policy.
- iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing staff training needs: The Lead Agency CCDF program regularly assesses the risk of its policies and procedures to change practice and address training

needs. The CCDF program has a Policy and Process Improvement Administrator whose sole responsibility is to consistently assess and revise policy as needed. In addition, members of the CCDF program leadership team regularly meet to discuss policy issues that arise. This group includes program management, the CCDF administrator, and leaders from across the Lead Agency. The Lead Agency has also implemented a practice of meeting after certain hearings in which its policies and procedures were brought into question to assess if revisions to those policies and procedures would be beneficial.

- b. Describe how the Lead Agency ensures all providers for children receiving CCDF funds are informed and trained regarding CCDF program requirements and program integrity:
  - i. Describe the training for providers around CCDF program requirements and program integrity? Describe: *The Lead Agency requires all new providers enrolling in CAPS to attend orientation training where they are trained on program requirements and program integrity.*
  - ii. Describe how provider training is evaluated for effectiveness: Adherence to program requirements is reviewed during compliance investigations conducted by the DECAL Audits and Compliance team.
  - iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing provider training needs: The CAPS Provider Relations Education and Outreach team (training team) works with the DECAL Audits and Compliance team to discuss trends in findings from investigations and uses that information to target areas where providers need additional and enhanced training.
- 10.1.6 Evaluate internal control activities

Describe how the Lead Agency uses the following to regularly evaluate the effectiveness of Lead Agency internal control activities for all CCDF expenditures.

- a. Error rate review triennial report results (if applicable). Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: *At the conclusion of the triennial error rate review, the review team shares the results with program personnel. Each error is categorized by the error type/cause. The program uses the information to guide improvement plans to reduce the rate of errors.*
- b. Audit results. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: *The audit team shares audit results with program personnel, especially on occasions when an intentional program violation has occurred that will require a coordinated response, such as a program dismissal or disqualification.*
- c. Other. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: *Enter Text*

#### 10.1.7 Identified weaknesses in internal controls

Has the Lead Agency or other entity identified any weaknesses in its internal controls?

- a. No. If no, describe when and how it was most recently determined that there were no weaknesses in the Lead Agency's internal controls. Although DECAL has not identified weaknesses in its internal controls, DECAL performs annual risk assessments on key processes using the GAO Framework, known as Green Book.

### 10.2 Fraud Investigation, Payment Recovery, and Sanctions

Lead Agencies must have the necessary controls to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process and other review processes, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition.

10.2.1 Strategies used to identify and prevent program violations

Check the activities the Lead Agency employs to ensure program integrity, and for each checked activity, identify what type of program violations the activity addresses, describe the activity and the results of these activities based on the most recent analysis.

- - i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The Lead Agency's Audits and Compliance team developed a risk assessment tool that incorporates data from other programs, including the Child and Adult Care Food Program, Georgia's Pre-K Program, the state Child Care Licensing program, and the Department of Labor wage file. These datamatching activities allow the Lead Agency to better identify irregularities in attendance or billing patterns and eligibility determinations that may have been based on inaccurate or incomplete data provided by the applicant.*
  - ii. ☐ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The Lead Agency's Audits and Compliance team developed a risk assessment tool that incorporates data from other programs, including the Child and Adult Care Food Program, Georgia's Pre-K Program, the state Child Care Licensing program, and the Department of Labor wage file. These data-matching activities allow the Lead Agency to better identify irregularities in attendance or billing patterns and eligibility determinations that may have been based on inaccurate or incomplete data provided by the applicant. In*

November 2023, the Lead Agency created a new functional area, CAPS *Provider Relations, composed of four teams, one of them the Quality* Assurance and Payments team. This team is responsible for proactive reviews of provider payments to detect and correct errors in billing before payment. This review reduces overpayments to providers and later recoupment of funds. Errors in provider billing are shared with the CAPS Provider Relations Education and Outreach team to perform the following: 1) Target areas of training on provider billing practices; and 2) Recommend specific providers for technical assistance visits. Multiple analytics that flag potential payment errors are built into the payment system. These flags are reviewed by the QA&P consultants and released if there is no payment error. If a payment error is detected, the payment is corrected and issued to the provider. Analytics that indicate possible errors made by eligibility staff when issuing certificates are shared with the applicable teams to complete the following: 1) Training with eligibility staff on policy compliance; and 2) System requirements needed to prevent unintentional errors in issuing benefits.

- b. 🛛 Run system reports that flag errors (include types).
  - i. Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Enter Text*
  - ii. Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Enter Text*
- c. Review enrollment documents and attendance or billing records.
  - i. Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The Audits and Compliance team reviews attendance documents and billing records by requesting attendance documents via a letter emailed to providers or requested while onsite. Once the records are received, staff compare the attendance documents to the billing records. Any discrepancies are identified, and a determination of the improper payment is made. The results of these activities include establishing an overpayment when warranted, and collection efforts are made pursuant to policy. If discrepancies that are the result of an intentional program violation are found or suspected, the cases will be forwarded to an investigative*

agency or to the State Attorney General's Office for review.

- ii. ☑ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: The Audits and *Compliance team reviews attendance documents and billing records by* requesting attendance documents via a letter emailed to providers or requested while onsite. Once the records are received, staff compare the attendance documents to the billing records. Any discrepancies are identified, and a determination of the improper payment is made. The results of these activities include establishing an overpayment when warranted, and if the discrepancies are due to an unintentional program violation, collection efforts are made pursuant to policy. In addition, in November 2023, the Lead Agency implemented a new payment system and built in analytics to flag potential payment errors. These flags are reviewed by the QA&P consultants and released if there is no payment error. If a payment error is detected, the payment is corrected and issued to the provider. Errors detected are shared with the Provider Relations Education and Outreach team to target areas for potential training on billing practices or to conduct technical assistance with specific providers. Analytics that indicate possible errors made by eligibility staff when issuing certificates are shared with the applicable teams to complete the following: 1) Training with eligibility staff on policy compliance; and 2) *System requirements needed to prevent unintentional errors in issuance of* benefits.
- iii. ☑ Agency errors. Describe the activities, the results of these activities, and how they inform better practice: The Audits and Compliance team reviews attendance documents and billing records by requesting attendance documents via a letter emailed to providers or requested while onsite. Once the records are received, staff compare the attendance documents to the billing records. Any discrepancies are identified, and a determination of the improper payment is made. The results of these activities include establishing an overpayment when warranted, and collection efforts are made pursuant to policy. If an improper payment is found to be the result of an agency error, the improper payment will not be collected.
- d. Conduct supervisory staff reviews or quality assurance reviews.

i.

☑ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: The Lead Agency has a stand-alone Quality Assurance & Training (QA&T) unit that performs quality assurance reviews of eligibility determinations made by staff. These quality assurance reviews are used to monitor and assess policy implementation on an ongoing basis, ensure program integrity, and determine effectiveness of training. The QA&T unit does not determine eligibility but does administer the quality assurance process by reviewing the work of others and providing training for staff in areas that need improvement. Cases are selected from a random sample of initial eligibility, changes during the eligibility period, and redeterminations completed each month. Cases processed by newer staff are monitored

more frequently than staff who have more experience processing eligibility. To further ensure program integrity, the QA&T unit also supports staff by conducting ongoing focused training in areas with the highest error rate in determining eligibility. In addition, the Lead Agency CCDF program supervisors conduct quality assurance reviews of cases processed by their staff and provide coaching on areas that need improvement. The Lead Agency's Audits and Compliance unit separate from the CCDF program also conducts quarterly error-rate reviews on cases to ensure training effectiveness, provide feedback to staff, and improve reliability in determining eligibility according to policy.

- ii. Initentional program violations. Describe the activities, the results of these activities, and how they inform better practice: The Lead Agency has a stand-alone Quality Assurance & Training (QA&T) unit that performs quality assurance reviews of eligibility determinations made by staff. These quality assurance reviews are used to monitor and assess policy implementation on an ongoing basis, ensure program integrity, and determine effectiveness of training. The QA&T unit does not determine eligibility but does administer the quality assurance process by reviewing the work of others and providing training for staff in areas that need improvement. Cases are selected from a random sample of initial eligibility, changes during the eligibility period, and redeterminations completed each month. Cases processed by newer staff are monitored more frequently than staff who have more experience processing eligibility. To further ensure program integrity, the QA&T unit also supports staff by conducting ongoing focused training in areas with the highest error rate in determining eligibility. In addition, the Lead Agency CCDF program supervisors conduct quality assurance reviews of cases processed by their staff and provide coaching on areas that need improvement. The Lead Agency's Audits and Compliance unit separate from the CCDF program also conducts quarterly error-rate reviews on cases to ensure training effectiveness, provide feedback to staff, and improve reliability in determining eligibility according to policy.
- iii. Agency errors. Describe the activities, the results of these activities, and how they inform better practice: The Lead Agency has a stand-alone *Quality Assurance & Training (QA&T) unit that performs quality assurance* reviews of eligibility determinations made by staff. These quality assurance reviews are used to monitor and assess policy implementation on an ongoing basis, ensure program integrity, and determine effectiveness of training. The QA&T unit does not determine eligibility but does administer the quality assurance process by reviewing the work of others and providing training for staff in areas that need improvement. Cases are selected from a random sample of initial eligibility, changes during the eligibility period, and redeterminations completed each month. Cases processed by newer staff are monitored more frequently than staff who have more experience processing eligibility. To further ensure program integrity, the QA&T unit also supports staff by conducting ongoing focused training in areas with the highest error rate in determining eligibility. In addition, the Lead Agency CCDF program supervisors conduct quality

assurance reviews of cases processed by their staff and provide coaching on areas that need improvement. The Lead Agency's Audits and Compliance unit separate from the CCDF program also conducts quarterly error-rate reviews on cases to ensure training effectiveness, provide feedback to staff, and improve reliability in determining eligibility according to policy.

- e. 🛛 Audit provider records.
  - i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The Audits and Compliance unit reviews attendance documents and billing records by requesting attendance documents via a letter emailed to providers or requested while onsite.* Once the records are received, staff then compare the attendance documents to the billing records. Any discrepancies are identified, and a determination of the improper payment is made. The results of these activities include establishing an overpayment when warranted, and collection efforts are made pursuant to policy. The Audits team also reviews relevant provider documents at the onset of every provider review.
  - ii. In Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The Audits and Compliance Division unit reviews attendance documents and billing records by requesting attendance documents via a letter emailed to providers or requested while onsite. Once the records are received, staff then compare the attendance documents to the billing records. Any discrepancies are identified, and a determination of the improper payment is made. The results of these activities include establishing an overpayment when warranted, and collection efforts are made pursuant to policy. The Audits team also reviews relevant provider documents at the onset of every provider review.*
  - iii. Agency errors. Describe the activities, the results of these activities, and how they inform better practice: *The Audits and Compliance unit reviews attendance documents and billing records by requesting attendance documents via a letter emailed to providers or requested while onsite. Once the records are received, staff then compare the attendance documents to the billing records. Any discrepancies are identified, and a determination of the improper payment is made. The results of these activities include establishing an overpayment when warranted, and collection efforts are made pursuant to policy. The Audits team also reviews relevant provider documents at the onset of every provider review.*
- f. Irain staff on policy and/or audits.
  - i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: The Lead Agency's CCDF program contains a stand-alone Quality Assurance and Training (QA&T) unit to conduct training on policy and implementation. The scope and type of policy and/or audits training is based on the needs of the staff members and is categorized into three main areas: 1) new hires, 2) existing

staff, and 3) other divisions within the Lead Agency and other agencies. New hires to the CCDF program are trained in full policy and how to use the various systems needed to operate the program. Existing staff are given policy and systems training based on the needs of those staff and through ongoing monitoring of areas that need improvement. Other divisions within the Lead Agency and other agencies are given policy and systems training based on their needs and roles. The QA&T unit also conducts weekly updates to clarify policy and best practices to ensure that staff training needs are met in a timely manner. This training helps staff identify signs of intentional or unintentional program violations and agency errors.

- ii. Initentional program violations. Describe the activities, the results of these activities, and how they inform better practice: The Lead Agency's CCDF program contains a stand-alone Quality Assurance and Training (QA&T) unit to conduct training on policy and implementation. The scope and type of policy and/or audits training is based on the needs of the staff members and is categorized into three main areas: 1) new hires, 2) existing staff, and 3) other divisions within the Lead Agency and other agencies. New hires to the CCDF program are trained in full policy and how to use the various systems needed to operate the program. Existing staff are given policy and systems training based on the needs of those staff and through ongoing monitoring of areas that need improvement. Other divisions within the Lead Agency and other agencies are given policy and systems training based on their needs and roles. The QA&T unit also conducts weekly updates to clarify policy and best practices to ensure that staff training needs are met in a timely manner. This training helps staff identify signs of intentional or unintentional program violations and agency errors.
- iii. Agency errors. Describe the activities, the results of these activities, and how they inform better practice: The Lead Agency's CCDF program contains a stand-alone Quality Assurance and Training (QA&T) unit to conduct training on policy and implementation. The scope and type of policy and/or audits training is based on the needs of the staff members and is categorized into three main areas: 1) new hires, 2) existing staff, and 3) other divisions within the Lead Agency and other agencies. New hires to the CCDF program are trained in full policy and how to use the various systems needed to operate the program. Existing staff are given policy and systems training based on the needs of those staff and through ongoing monitoring of areas that need improvement. Other divisions within the Lead Agency and other agencies are given policy and systems training based on their needs and roles. The QA&T unit also conducts weekly updates to clarify policy and best practices to ensure that staff training needs are met in a timely manner. This training helps staff identify signs of intentional or unintentional program violations and agency errors.

#### g. Other. Describe the activity(ies): *Enter Text*

i. Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *In addition to the activities noted above, the Audits and Compliance unit maintains a* 

dedicated phone line and an email inbox where complaints can be submitted. The phone number and email address are published in the Lead Agency CCDF program policy manual. Upon receiving a complaint, the Audits and Compliance unit investigates to determine if a program violation or administrative error has occurred and, if so, if funds are due back to the Lead Agency as a result.

- ii. ☑ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: In addition to the activities noted above, the Audits and Compliance unit maintains a dedicated phone line and an email inbox where complaints can be submitted. The phone number and email address are published in the Lead Agency CCDF program policy manual. Further, in November 2023, the Lead Agency created a new functional area, CAPS Provider Relations, composed of four teams, including a Quality Assurance and Payments (QA&P) team. This team is responsible for proactive reviews of provider payments to detect and correct errors in billing before payment. This review reduces overpayments to providers and later recoupment of funds. Errors in provider billing are shared with the CAPS Provider Relations Education and Outreach team to: 1) Target areas of training on provider billing practices; and 2) Recommend specific providers for technical assistance visits. Multiple analytics that flag potential payment errors are built into the payment system. These flags are reviewed by the QA&P consultants and released if there is no payment error. If a payment error is detected, the payment is corrected and issued to the provider. Analytics that indicate possible errors made by eligibility staff are shared with the applicable teams to complete the following: 1) Training with eligibility staff on policy compliance; and 2) System requirements needed to prevent unintentional errors in issuance of benefits.
- iii. ⊠ Agency errors. Describe the activities, the results of these activities, and how they inform better practice: In addition to the activities noted above, the Audits and Compliance unit maintains a dedicated phone line and an email inbox where complaints can be submitted. The phone number and email address are published in the Lead Agency CCDF program policy manual. Upon receiving a complaint, the Audits and Compliance unit investigates to determine if a program violation or administrative error has occurred and, if so, if funds are due back to the Lead Agency as a result.

#### 10.2.2 Identification and recovery of misspent funds

Lead Agencies must identify and recover misspent funds that are as a result of fraud, and they have the option to recover any misspent funds that are a result of unintentional program violations or agency errors.

a. Identify which agency is responsible for pursuing fraud and overpayments (e.g., State Office of the Inspector General, State Attorney): The Lead Agency works closely with the Office of the Attorney General to prosecute cases involving fraud. The Lead Agency also works with the State Office of the Inspector General and the U.S. Department of Health and Human Services Office of Inspector General to investigate cases.

- b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Consider in your response potential fraud committed by providers, clients, staff, vendors, and contractors. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:
  - i. □ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
  - ii. ⊠ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: In some cases, a court of competent jurisdiction may order a repayment. In these cases, the Lead Agency follows those orders.
  - iii. It Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: *In some cases, a court of competent jurisdiction may order a repayment. In these cases, the Lead Agency follows these orders.*
  - iv. Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
  - v. Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
  - vi. Recover through other means. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
  - vii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
  - viii. Other. Describe the activities and the results of these activities: *Enter Text*
- c. Does the Lead Agency investigate and recover improper payments due to unintentional program violations?
  - i. 🗆 No.
  - ii. 🛛 Yes.

If yes, check and describe below any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity.

i. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: Click or tap here to enter text.

- □ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: Enter Text
- iii. 
  □ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- iv. Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: *Improper payments that are the result of unintentional program violations are generally recouped by the program until the debt is paid. The program will recoup at 50% unless other arrangements are made. For instance, providers can pay the amount all at once or can submit a hardship request to extend the payment period.*
- v. Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- vi. Recover through other means. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- vii. □ Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- viii. 🛛 Other. Describe the activities and the results of these activities: *Enter Text*
- d. Does the Lead Agency investigate and recover improper payments due to agency errors?
  - 🗵 No.
  - $\Box$  Yes.

If yes, check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- i. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- ii. 
   Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- iii. □ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- iv. Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*

- v. Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- vi. Recover through other means. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- vii. Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis: *Enter Text*
- viii. Other. Describe the activities and the results of these activities: *Enter Text*