

COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS AGENDA ITEM TRANSMITTAL

(1) DEPARTMENT	EPARTMENT (2) MEETING DATE (3) CONTACT/PHONE									
Auditor - Controller -	10/19/2021	Mark Maier (805) 781-4267								
Treasurer -Tax Collector	, ,									
(4) SUBJECT										
	eview report of the Department of Soc 209 Report for the quarter ended June		Against Households							
	Board receive, review, and file the vali ainst Households Food and Nutrition S	•	•							
(6) FUNDING SOURCE(S)	(8) ANNUAL FINANCIAL	(9) BUDGETED?								
N/A	IMPACT	IMPACT	Yes							
	\$0.00	0.00								
(10) AGENDA PLACEMENT										
{X} Consent {} Presenta	ation { } Hearing (Time Est) { } Board Busine	ss (Time Est)							
(11) EXECUTED DOCUMENTS										
{ } Resolutions { } Cont	racts { } Ordinances { X } N/A									
(12) OUTLINE AGREEMENT R	EQUISITION NUMBER (OAR)	(13) BUDGET ADJUSTM	IENT REQUIRED?							
N1/A		BAR ID Number: N/A								
N/A		{ } 4/5th's Vote Requ	ired {X} N/A							
(14) LOCATION MAP	(15) BUSINESS IMPACT STATEMENT?	(16) AGENDA ITEM HIS	TORY							
N/A No { } N/A Date										
(17) ADMINISTRATIVE OFFICE REVIEW										
Zachary A. Lute										
(18) SUPERVISOR DISTRICT(S	()									
All Districts										



COUNTY OF SAN LUIS OBISPO

TO: Board of Supervisors

FROM: James W. Hamilton, CPA, Auditor – Controller – Treasurer – Tax Collector

DATE: 10/19/2021

SUBJECT: Submittal of the validation review report of the Department of Social Services' Status of Claims

Against Households Food and Nutrition Services 209 Report for the guarter ended June 30, 2021.

All Districts.

RECOMMENDATION

It is recommended that the Board receive, review, and file the validation review report for the Department of Social Services' Status of Claims Against Households Food and Nutrition Services 209 Report for the quarter ending June 30, 2021.

DISCUSSION

On a quarterly basis, the Department of Social Services is required to report on over-issuance claims establishment and collection activities in the CalFresh program to the California Department of Social Services (CDSS). The CDSS then submits a statewide report to the United States Department of Agriculture (USDA), Food and Nutrition Services (FNS). Every other year, the California Department of Social Services requires an external validation review of the most recent June report and prescribes the external validation requirements.

The objective of our review was to validate the accuracy of the claim amounts reported by the Department of Social Services for the quarter ending June 30, 2021. Our review determined the claim amounts reported to CDSS were accurate.

OTHER AGENCY INVOLVEMENT/IMPACT

Department of Social Services.

FINANCIAL CONSIDERATIONS

The Department of Social Services reported a Claims Against Households balance of \$2,594,425 as of June 30, 2021.

RESULTS

The validation report helps reduce County risk, maintain and improve internal controls and procedures for reporting requirements, and contributes to the County's vision of a well-governed community.

ATTACHMENTS

1 FY 2020-21 Department of Social Services FNS-209 Validation Report



Status of Claims Against Households Food and Nutrition Services 209 Report Validation Quarter Ended June 30, 2021

September 2021

James W. Hamilton, CPA
Auditor-Controller • Treasurer-Tax Collector



James W. Hamilton, CPA Auditor-Controller • Treasurer-Tax Collector

TO: DEVIN DRAKE, SOCIAL SERVICES DIRECTOR

FROM: JAMES W. HAMILTON, CPA, AUDITOR-CONTROLLER-TREASURER-TAX COLLECTOR

DATE: SEPTEMBER 21, 2021

SUBJECT: STATUS OF CLAIMS AGAINST HOUSEHOLDS FOOD AND NUTRITION SERVICES 209

REPORT VALIDATION FOR QUARTER ENDED JUNE 2021

Our office recently completed a validation review of the figures reported by the Department of Social Services (DSS) on the Food and Nutrition Service's Status of Claims Against Households 209 Report (FNS-209) for the quarter ended, June 30, 2021. The validation review did not result in any exceptions.

PURPOSE

The purpose of this review was to validate the accuracy of the figures reported on the FNS-209 report for the quarter ended June 30, 2021.

METHODOLOGY

We conducted our review in conformance with the *International Standards for the Professional Practice of Internal Auditing (Standards)*. The *Standards* require that the internal audit activity be independent and internal auditors be objective in performing their work. The *Standards* also require that internal auditors perform their engagements with proficiency and due professional care; that the internal audit function be subject to a program of quality assurance; and that the results of engagements are communicated.

We collected the information through interviews with DSS staff, review of DSS overpayment of claims recording and reporting processes, and through the review of DSS claims management systems' reports.

RESULTS

ACCOUNTABILITY TEST 1: QUARTERLY CLAIMS FIGURES

Federal and state regulations require that all amounts in FNS-209 form be reported accurately and be supported with internal accounting records. DSS provided quarterly reports and reconciliations for the Intentional Program Violation (IPV), Inadvertent Household Error (IHE) and Agency Administrative Error (AE) claims. Per the California Department of Social Services (CDSS) compliance requirements, we traced lines 3b through 20b of the June 30, 2021, report to Social Services' internal records.



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We found no exceptions during the completion of the procedure performed.

See Attachment A for the comparison of the amounts reported on the FNS-209 report to the supporting internal accounting records.

ACCOUNTABILITY TEST 2: ENDING BALANCE CLAIMS FIGURES

Federal regulations require that the beginning and ending balances on the FNS-209 report be supported by automated claims management systems and/or paper records. Per CDSS' compliance requirements, we traced the June 30, 2021, ending balance on the FNS-209 report to the automated claims management systems and paper records used by Social Services.

We found no exceptions during the completion of the procedure performed.

See Attachment B for the summary comparison of the claims management system and the FNS-209 Report's Ending Balances.

PRIOR YEAR FINDING AND STATUS

Requirement: 7 CFR 273.18 (m) requires agencies maintain a system for monitoring receipt

claims against households that maintains claim records and the corresponding receipt information. The system must also be able to produce

summary reports and reconcile to supporting records.

Observation: Social Services' June 30, 2019, FNS-209 report's ending balances (Line 13) for

Inadvertent Household Error and Administrative Error claims did not match to the automated claims management system's historical reports. The FNS-209 report's ending balance for the Inadvertent Household Error claims were 56 claims and \$26,602 (1%) less than the automated claims management system amounts. The FNS-209 report's ending balance for Agency Administrative Error claims were 68 claims and \$61,292 (9%) less than

automated claims management system amounts.

Cause(s): The department's automated claims management system has several

reporting constraints which hinder the efficient reconciliation of the system's ending balances to the FNS-209 reported ending balances. The system reports include claims that have not yet been verified by the department and exclude claims for clients who do not have current benefits to offset a claim.

Effect: The department is out of compliance with the CDSS reporting requirements.



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Recommendation: We recommend the department work with CDSS to address the automated

claims management systems' reporting constraints and gain FNS-209

reporting compliance.

Current status: Corrective action has been implemented. Ending balances were

supported by automated claims management system and records.

We would like to thank your staff for the cooperation and assistance we received during our review. If you have any questions regarding this report or the review that was conducted, please contact Kari Lekvold, Internal Auditor at (805) 781-4846.

Sincerely,

James W. Hamilton, CPA

Auditor-Controller-Treasurer-Tax Collector

Attachments

Cc: Michelle Enfantino, Department of Social Services Fiscal Department Administrator Dora Rosales, Department of Social Services Accountant David Barcellos, Department of Social Services Collections Officer

				<u>"</u>	Inten	tional Program \	Vio	lations (IPV) C	laims	I		
						Automat			·			
		FNS-209				System/Paper Records				Var	iance	!
Line Item		Number	Δ	Amount		Number		Amount		Number		Amount
Claims Summary	$\overline{}$	rumber		inount		Humber		7 illiount		- Italiaei		illouit
3a. Beginning Balance		36	\$	81,636.56		36	\$	81,636.56		-	\$	-
3b. Balance Adjustments (+/-)		0	\$	1,532.80		-	\$	1,532.80		-	\$	-
4. Newly Established		0	\$	-		-	\$	-		-	\$	-
5. Transfers (+/-)		3	\$	29,247.00		3	\$	29,247.00		-	\$	-
6. Refunds (20a+20b)			\$	-			\$	-			\$	-
7. Total (3a+3b+4+5+6)		39	\$	112,416.36		39	\$	112,416.36		-	\$	-
8. Closed		1		,		1	Ť	,		-	T	
9. Terminated			\$	1,218.72		2	\$	1,218.72		-	\$	-
10. Compromised			\$	-		-	\$	-		-	\$	-
11a. Collection (18a)		0	\$	3,525.00		-	\$	3,525.00		-	\$	-
11b. Collection Adj. (18b+18c)		0	\$	-		-	\$	-		-	\$	-
12. Total		3	\$	4,743.72		3	\$	4,743.72		-	\$	-
13. Ending Balance		36	\$	107,672.64		36	\$	107,672.64		-	\$	-
Collection Summary												
14. Cash, Check, M.O.			\$	2,533.00			\$	2,533.00			\$	
15. Food Stamps			\$	-			\$	-			\$	-
16. Recoupment			\$	992.00			\$	992.00			\$	-
17. Offset			\$	-			\$	-			\$	
18a. Total (14+15+16+17)			\$	3,525.00			\$	3,525.00			\$	-
18b. Cash Adjustments (+/-)			\$	-			\$	-			\$	-
18c. Non-Cash Adjustments			\$	-			\$	-			\$	-
19. Transfers (+/-)			\$	1,085.00			\$	1,085.00			\$	-
20a. Cash Refunds			\$	-			\$	-			\$	-
20b. Non-Cash Refunds			\$				\$	-			\$	-
21. Total (18a+18b+18c+19-20a-20b)			\$	4,610.00			\$	4,610.00			\$	-

					Inad	vertent Househo	old E	Error (IHE) Cla	aims				
		Automated Claims											
										Variance			
		FNS	FNS-209 System/Paper Records										
	Line Item	Number		A		Number		0		Number		A	
Clair	ns Summary	Number		Amount		Number		Amount		Number		Amount	
3a.	Beginning Balance	2,240	ć	1,822,794.24		2,240	ċ	1,822,794.24		_		•	
3b.	Balance Adjustments (+/-)	(4)	-	(22,666.18)		(4)		(22,666.18)					
		66	\$, , , ,		(4)		, ,		-			
4.	Newly Established			78,919.41				78,919.41		-	_		
5.	Transfers (+/-)	(3)		(29,247.00)		(3)	-	(29,247.00)		-			
6.	Refunds (20a+20b)		\$	1,341.13			\$	1,341.13					
7.	Total (3a+3b+4+5+6)	2,299	\$	1,851,141.60		2,299	\$	1,851,141.60		-	;	-	
8.	Closed	101				101				-			
9.	Terminated	29	\$	8,687.44		29	\$	8,687.44		-		, -	
10.	Compromised	=	\$			-	\$	-		-	:	-	
11a.	Collection (18a)	-	\$	70,570.23		-	\$	70,570.23		-	:	-	
11b.	Collection Adj. (18b+18c)	-	\$	(398.00)		-	\$	(398.00)		-	:	-	
12.	Total	130	\$	78,859.67		130	\$	78,859.67		-		, -	
13.	Ending Balance	2,169	\$	1,772,281.93		2,169	\$	1,772,281.93		-	Ş	-	
Colle	ection Summary												
14.	Cash, Check, M.O.		\$	43,220.19			\$	43,220.19			:	-	
15.	Food Stamps		\$	5,398.00			\$	5,398.00			:	-	
16.	Recoupment		\$	21,952.04			\$	21,952.04			:	-	
17.	Offset		\$	·			\$	-			9	-	
18a.	Total (14+15+16+17)		\$	70,570.23			\$	70,570.23				-	
18b.	Cash Adjustments (+/-)		\$	(398.00)			\$	(398.00)			:	-	
18c.	Non-Cash Adjustments		\$	-			\$	-			:	÷ -	
19.	Transfers (+/-)		\$	(1,085.00)			\$	(1,085.00)			:	-	
20a.	Cash Refunds		\$	1,341.13			\$	1,341.13				-	
20b.	Non-Cash Refunds		\$	-			\$	-			:	÷ -	
21.	Total (18a+18b+18c+19-20a-20b)		\$	67,746.10			\$	67,746.10			- !	-	

					Age	ency Administrat	ive	Error (AE) Cla	ims				
						Automat							
		FNS-209				System/Paper Records				Variance			
	Line Item	Number		Amount		Number		Amount		Number		Amount	
Clain	ns Summary	Number		Amount		Number		Amount		Number		Amount	
3a.	Beginning Balance	1,030	ċ	725,770.46		1,030	ć	725,770.46		_	\$		
3b.	Balance Adjustments (+/-)	(1)	-	(12,067.32)		(1)	+	(12,067.32)			\$	-	
		(1)	\$			34	<u> </u>	, , ,			\$	-	
4.	Newly Established	34	7	57,304.00		34	\$	57,304.00		-		-	
5.	Transfers (+/-)	-	\$	-		-	\$	-		-	\$	-	
6.	Refunds (20a+20b)		\$	898.18			\$	898.18			\$	-	
7.	Total (3a+3b+4+5+6)	1,063	\$	771,905.32		1,063	\$	771,905.32		-	\$	-	
8.	Closed	59				59				-			
9.	Terminated	12	\$	14,148.80		12	\$	14,148.80		-	\$	-	
10.	Compromised	14	\$	13,234.36		14	\$	13,234.36		-	\$	-	
11a.	Collection (18a)	-	\$	30,052.19		-	\$	30,052.19		-	\$	-	
11b.	Collection Adj. (18b+18c)	-	\$	-		-	\$	-		-	\$	-	
12.	Total	71		57,435.35		71		57,435.35		-	\$	-	
13.	Ending Balance	992	\$	714,469.97		992	\$	714,469.97		-	\$	-	
Colle	ection Summary												
14.	Cash, Check, M.O.		\$	17,052.85			\$	17,052.85			\$	-	
15.	Food Stamps		\$	5,352.34			\$	5,352.34			\$	-	
16.	Recoupment		\$	7,647.00			\$	7,647.00			\$	-	
17.	Offset		\$	-			\$	-			\$	-	
18a.	Total (14+15+16+17)		\$	30,052.19			\$	30,052.19			\$	-	
18b.	Cash Adjustments (+/-)		\$	-			\$	-			\$	-	
18c.	Non-Cash Adjustments		\$	-			\$	-			\$	-	
19.	Transfers (+/-)		\$	-			\$	-			\$	-	
20a.	Cash Refunds		\$	866.18			\$	866.18			\$	-	
20b.	Non-Cash Refunds		\$	32.00			\$	32.00			\$	-	
21.	Total (18a+18b+18c+19-20a-20b)		\$	29,154.01			\$	29,154.01			\$	-	

Attachment B - Accountability Test #2: Beginning/Ending Balances

Historical Claims Management Report and FNS-209 Report Comparison

Claims #	IPV (#)	IHE (#)	AE(#)	Total (#)								
CalWIN Ending Balance report:	36	2,234	1,126	3,396								
Less Unverified Claims:	=	(65)	(134)	(199)								
Adjusted CalWIN Total*:	36	2,169	992	3,197								
June 2021 FNS-209:	36	2,169	992	3,197								
Difference:	=	-	-	-								

Claims Amounts	IPV (\$)	IHE (\$)	AE (\$)	Total (\$)
CalWIN Ending Balance report:	107,672.64	1,781,974.96	750,731.71	2,640,379.31
Less Unverified Claims:	-	(9,693.03)	(36,261.74)	(45,954.77)
Adjusted CalWIN Total*:	\$ 107,672.64	\$ 1,772,281.93	\$ 714,469.97	\$ 2,594,424.54
June 2021 FNS-209:	\$ 107,672.64	\$ 1,772,281.93	\$ 714,469.97	\$ 2,594,424.54
Difference:	-	-	-	-

 $[\]hbox{*CalWin Ending Balance Report adjusted for claims not yet verified from internal accounting records.}$