



County of San Bernardino



Auditor–Controller/Treasurer/Tax Collector

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Auditor–Controller/Treasurer/Tax Collector

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COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

(Of departments relating to Single Audit findings)

Year ended June 30, 2019

Compiled by

Auditor-Controller/Treasurer/Tax Collector
Internal Audits Section
County of San Bernardino, California

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2019

Finding 2019-001

Program: Medical Assistance Program (Medicaid Cluster)
CFDA No.: 93.778
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Department of Health Services
Award Year: FY 2018-19
Compliance Requirements: Eligibility

Departments Response: We concur.

Corrective Action Plan:

In order to remind staff part of the file Re-Evaluation (RE) process is to ensure all required information is sent and received back from the customer and processed timely, The Human Services Department (Department) will create a flyer to be discussed in unit staff meetings to remind staff of the importance of requesting missing information for REs. In addition, the Department has cases that go through Successful Automated MAGI (SAM) to automatically process the RE. Part of that process requires staff to verify information matches within three systems; Medi-Cal Eligibility Data System (MEDS), C-IV and California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS). The Department will create a flyer to be discussed in unit staff meetings to remind staff of the requirement to match the three systems and complete the Quality Assurance (QA) process when scanning items into imaging. The QA process is performed after scanning documents to verify each document meets the image quality standards required in order to store, view and work with documents online.

Utilizing these flyers will help remind staff to follow the process of the RE, determine what actions need to be taken in a timely manner, ensure appropriate cases are processed through SAM and to verify items are properly scanned in imaging.

Name of Responsible Person: Mari Anton, Internal Review Accountant III

Name of Department Contact: Mari Anton, Internal Review Accountant III

Projected Implementation Date: May 31, 2020

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2019

Finding 2019-002

Program: Medical Assistance Program (Medicaid Cluster)
CFDA No.: 93.778
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Department of Health Services
Award Year: FY 2018-19
Compliance Requirements: Eligibility

Departments Response: We concur.

Corrective Action Plan:

MEDS Alert 2130 is generated when a deceased person is reported to the State. In order to remind staff of the importance to process these MEDS Alerts, the Human Services Department (Department) will send staff a list of the alerts to be processed monthly. The alert will be discussed in unit staff meetings. The Department will check progress on processing the alerts on a quarterly basis. This will ensure timely action is taken when a deceased person is reported.

Name of Responsible Person: Mari Anton, Internal Review Accountant III

Name of Department Contact: Mari Anton, Internal Review Accountant III

Projected Implementation Date: May 31, 2020

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2019

Finding 2019-003

Program: Aging Cluster
CFDA No.: 93.041, 93.042, 93.043, 93.044, 93.045, 93.052, 93.053
Federal Grantor: U.S. Department of Health and Human Services (HHS)
Passed-through: California Department of Aging
Award Year: FY 2018-19
Compliance Requirements: Subrecipient Monitoring

Departments Response: We concur.

Corrective Action Plan:

The Department of Aging and Adult Services has implemented a subrecipient monitoring schedule tool to ensure that monitoring is completed in a timely fashion according to the Federal award requirements and uniform guidance. Further, it coordinates scheduling of report finalization, follow-up, and corrective action due dates.

Name of Responsible Person: Cesar Bernal, Administrative Supervisor II

Name of Department Contact: Cesar Bernal, Administrative Supervisor II

Projected Implementation Date: Immediately

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2019

Finding 2019-004

Program: Aging Cluster
CFDA No.: 93.041, 93.042, 93.043, 93.044, 93.045, 93.052, 93.053
Federal Grantor: U.S. Department of Health and Human Services (HHS)
Passed-through: California Department of Aging
Award Year: FY 2018-19
Compliance Requirements: Subrecipient Monitoring

Departments Response: We concur.

Corrective Action Plan:

The Department of Aging and Adult Services implemented a new contract format on July 1, 2019 that includes the subrecipient identification information specified in 2 CFR section 200.331. Additionally, a letter will be sent to each subrecipient that includes the applicable identification information for contracts active in the 2018-2019 fiscal year.

Name of Responsible Person: Cesar Bernal, Administrative Supervisor II

Name of Department Contact: Cesar Bernal, Administrative Supervisor II

Projected Implementation Date: Immediately

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2019

Finding 2019-005

Program: Block Grants for Prevention and Treatment of Substance Abuse
CFDA No.: 93.959
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Department of Health Services
Award Year: FY 2018-19
Compliance Requirements: Subrecipient Monitoring

Departments Response: We concur.

Corrective Action Plan:

The Department of Behavioral Health has created a grant award notification letter template, processes and procedures to address the required elements of the subrecipient subaward notification that are not already included in the contract as specified in 2 CRF 200.331(a) of the Uniform Grant Guidance. This letter will become a part of the budget template that will be included with all contracts awarded that contain federal awards funding. In addition, a letter will be sent to current subrecipients with a subaward notification containing relevant information.

Name of Responsible Person: Kimberlee E. Van, Administrative Supervisor II, DBH
Fiscal

Name of Department Contact: Kimberlee E. Van, Administrative Supervisor II, DBH
Fiscal

Projected Implementation Date: Immediately