**DEPARTMENT:** Human Services  
**BY:** James Rydingsword  
**PHONE:** 966-2000

**RECOMMENDED ACTION AND JUSTIFICATION:**

It is respectfully requested that your Board 1) approved and authorize the chair to sign the In Home Supportive Services (IHSS) Anti-Fraud Plan; 2) approve the budget action to receive the IHSS Anti-Fraud revenue and fund associated expenditures. ($32,724)  

**BACKGROUND AND HISTORY OF BOARD ACTIONS:**

Board approved same plan for fiscal year 2009-2010 as res. no. 09-576

**ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:**

Negative action would result in the loss of $32,724 for anti-fraud activities.

<table>
<thead>
<tr>
<th>Financial Impact? ( ) Yes ( ) No</th>
<th>Current FY Cost: $32,724</th>
<th>Annual Recurring Cost: $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budgeted in Current FY? ( ) Yes ( X ) No ( ) Partially Funded</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Amount in Budget:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional Funding Needed:</td>
<td>$32,724</td>
<td></td>
</tr>
<tr>
<td>Source:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal Transfer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unanticipated Revenue</td>
<td>X</td>
<td>4/5's vote</td>
</tr>
<tr>
<td>Transfer Between Funds</td>
<td></td>
<td>4/5's vote</td>
</tr>
<tr>
<td>Contingency</td>
<td></td>
<td>4/8's vote</td>
</tr>
<tr>
<td>( ) General</td>
<td>( ) Other</td>
<td></td>
</tr>
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</table>

**CLERK’S USE ONLY:**

- Res. No.: 09-484  
- Ord. No.:  
- Vote – Ayes: 5  
- Noes:  
- Absent:  
- Approved:  
- Minute Order Attached:  
- No Action Necessary:  

The foregoing instrument is a correct copy of the original on file in this office.

- Date:  
- Attest: MARGIE WILLIAMS, Clerk of the Board  
- County of Mariposa, State of California  
- By: Deputy  

**COUNTY ADMINISTRATIVE OFFICER:**

- Requested Action Recommended  
- No Opinion  
- Comments:  

- CAO:  

Revised Dec. 2002
October 19, 2010

TO: Members, Board of Supervisors
    Rick Benson, CAO
FROM: James Rydingsword, Director
RE: In Home Supportive Services Anti-Fraud Plan

Recommendation
It is respectfully requested that your Board 1) approve and authorize the chair to sign the In Home Supportive Services (IHSS) Anti-Fraud Plan; 2) approve the budget action to receive the IHSS Anti-Fraud revenue and fund associated expenditures.

Background/Current Situation
The Governor’s Proposed Budget for 2010-2011 includes $10 million of state funds for the purpose of fraud prevention, detection, referral, investigation, and additional program integrity efforts related to the IHSS Program. These state funds allow for draw of federal dollars and require a local match of approximately 5%. The dollar amounts for Mariposa are $18,974 federal, $13,750 state and $5,893 local.

The attached plan outlines the Department’s current anti-fraud activities and proposes to use these funds to enhance our efforts by establishing a formal Program Integrity Unit in conjunction with our Special Investigations Unit. The plan also outlines collaborations with the District Attorney’s Office (DAO), Department of Health Care Services (DHCS) and California Department of Social Services (CDSS).

Services performed by the DAO will be invoiced under an interagency MOU with a not to exceed amount of $5,000. This MOU will be submitted for approval within 30 days of receipt of the funds with the implementation of the plan to begin within 60 days of receipt of the funds.

Financial
The attached budget action forms increase revenue by $18,974 federal and $13,750 state in the administration revenue and transfer out lines in fund 363 and increase transfer in lines in the operating budget 001-0501 by the same. Appropriations in the operating budget are also increased as necessary to keep the unit in balance. Social Service Realignment funds will be used for the local match. It is anticipated that the current level of funding from realignment is adequate to meet this requirement. There is no impact to the general fund.
### BUDGET ACTION FORM

<table>
<thead>
<tr>
<th>FUND</th>
<th>DEP/DIV</th>
<th>ACCOUNT</th>
<th>DESCRIPTION</th>
<th>PROJECT</th>
<th>INCREASE</th>
<th>DECREASE</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>0501</td>
<td>309.1705</td>
<td>Federal Administration</td>
<td></td>
<td></td>
<td>(18,974)</td>
</tr>
<tr>
<td>001</td>
<td>0501</td>
<td>309.1706</td>
<td>State Administration</td>
<td></td>
<td></td>
<td>(13,750)</td>
</tr>
<tr>
<td>001</td>
<td>0501</td>
<td>661.0173</td>
<td>EW III</td>
<td></td>
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<tr>
<td>001</td>
<td>0501</td>
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<td>Office Expense</td>
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<td>001</td>
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<td>Travel &amp; Training</td>
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<td>1,000</td>
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**TOTALS**

<table>
<thead>
<tr>
<th>TRANSFER BETWEEN FUNDS</th>
<th>DEBIT</th>
<th>CREDIT</th>
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<td></td>
<td></td>
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</tbody>
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**TOTALS**

**ACTION REQUESTED:** (Check all that apply)

(X) Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget, or transferring appropriation from Contingencies

( ) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** IHSS Anti Fraud Allocation

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**DEPT HEAD SIGNATURE**

**DATE** 9/30/10

**APPROVED BY RES NO.** 10-184  CLERK

**DATE** 10-10-10

**DEPARTMENT** Human Services

**AUDITOR'S USE ONLY**

**BA #**

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Budget Revision Form Revised 07/2000
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<tr>
<td>363</td>
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<td>305.4505</td>
<td>Administration - State</td>
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<td>(13,750)</td>
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<tr>
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<td>0513</td>
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<td>363</td>
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<td>State Administration</td>
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<td>13,750</td>
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</table>

### TRANSFER BETWEEN FUNDS

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TOTALS

### ACTION REQUESTED:

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- ( ) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

### JUSTIFICATION

IHSS Anti Fraud Allocation

### DEPT HEAD SIGNATURE

DATE: 9/30/10

### APPROVED BY RES NO.

APPROVED BY RES NO. 10-184 CLERK DATE: 10/19/10

### DEPARTMENT

DEPARTMENT: Human Services

### AUDITOR'S USE ONLY

BA #

Budget Revision Form Revised 07/2000