



agency for persons with disabilities  
State of Florida

Ron DeSantis  
Governor

October 3, 2019

■ ■  
Barbara Palmer  
Director

Barbara Palmer, Director  
Agency for Persons with Disabilities  
4030 Esplanade Way, Suite 380  
Tallahassee, FL 32399-0950

■ ■  
State Office

■ ■  
4030 Esplanade Way  
Suite 380  
Tallahassee  
Florida  
32399-0950

Re: OIG# 190815-01, Status of Corrective Actions, Auditor General  
Report No. 2019-186, State of Florida Compliance and Internal  
Controls Over Financial Reporting and Federal Awards

■ ■  
(850) 488-4257

Fax:  
(850) 922-6456

■ ■  
Toll Free:  
(866) APD-CARES  
(866-273-2273)

Dear Director Palmer:

As required by section 20.055(6)(h), Florida Statutes, the corrective action status report for Auditor General Report Number 2019-186, State of Florida Compliance and Internal Controls Over Financial Reporting and Federal Awards is attached. The report details the implementation or current status of each recommendation.

Please contact me if you have any questions.

Sincerely,

Erin Romeiser  
Inspector General

Enclosure

cc: [JLAC@leg.state.fl.us](mailto:JLAC@leg.state.fl.us)  
Melinda M. Miguel, Chief Inspector General  
Sherrill F. Norman, Auditor General  
David Dobbs, Chief of Staff

Status of Corrective Actions for Auditor General Report No. 2019-186,  
State of Florida Compliance and Internal Controls Over Financial  
Reporting and Federal Awards

| Status Type                                     |           | Report No.   | Report Title                             |                             |
|---|-----------|--|--|-----------------------------|
| STATUS UPDATE - 6 MONTHS                        |           | 2019-186   | Statewide Federal Financial Awards Audit |                             |
| Contact Person                                  |           | Program/Process  | Phone No.                                |                             |
| Lori Gephart,<br>Registered Nurse<br>Consultant |           | Programs   | (850) 921-3786                           |                             |
| Activity  |           | Accountability   | Schedule                                 |                             |
| Utilization Control<br>and Program<br>Integrity |           | Responsible Unit   | Repeat Finding                           | Anticipated Completion Date |
|   |           | Clinical Supports  | YES                                      | 12/31/2018                  |
| <b>Finding:</b>                                 |           |  |  |                             |
| <b>No.</b>                                      | 2018-031  |  |  |                             |
| <b>Date</b>                                     | 3/28/2019 |  |  |                             |
|   |           | The FAPD did not always ensure that continued stay reviews were conducted every 6 months for beneficiaries of Intermediate Care Facility Services for Individuals with Intellectual Disabilities. (ICF-IIDs).  |  |                             |
| <b>Recommendation</b>                           |           | We recommend that FAPD management take steps to ensure that continued stay reviews of ICF-IID beneficiaries are timely conducted in accordance with Federal regulations.   |  |                             |
| <b>Original Response/<br/>Action Plan</b>       |           | <p>The Agency concurs.</p> <p>FAPD has executed a contract with Keystone Peer Review Organization, Inc. to outsource the Utilization Review/Continued Stay Reviews (UR/CSR) function. One performance goal in the contract is to ensure 100% of the reviews are conducted every 6 months for beneficiaries of Intermediate Care Facility Services for Individuals with Intellectual Disabilities.</p> <p>In addition to the executed contract, FAPD continues to conduct monthly Medical Case Management conference calls (statewide and Regional) for FAPD staff (including supervisors). UR/CSR is a standard topic on the agenda and includes the region providing an update on the UR/CSRs performed and any outstanding issues. Also discussed during our conference calls are upcoming reviews and any potential barriers of the CSRs that are coming due and to account for all the CSRs that should have been completed. Focus in the Regions will be on ensuring that all reviews are completed timely.</p> <p>FAPD will monitor Regional completion of Continued Stay Reviews and Certificates of Need completed by the facilities.</p> <p>Regional management provides oversight and supervision of the UR/CSR process.</p> |  |                             |

Status of Corrective Actions for Auditor General Report No. 2019-186,  
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|   |  |
|---|--|
| <p><b>Status Updates</b></p> <p><input type="checkbox"/> Open</p> <p><input type="checkbox"/> Partially complete</p> <p><input checked="" type="checkbox"/> Complete</p> <p><input type="checkbox"/> Complete pending verification by OIG</p> <p><input type="checkbox"/> Management assumes risk</p> | <p>FAPD has executed a contract with Keystone Peer Review Organization, Inc. to outsource the Utilization Review/Continued Stay Reviews (UR/CSR) function. One performance goal in the contract is to ensure 100% of the reviews are conducted every 6 months for beneficiaries of Intermediate Care Facility Services for Individuals with Intellectual Disabilities.</p> <p>On June 1, 2019 APD began working with KEPRO to transition the Continued Stay Reviews for all Medicaid eligible recipients residing in an ICF/IID. This process will be streamlined and electronic.</p> <p>KEPRO is responsible for: Ensuring the timely completion of all CSRs in accordance with federal and state laws; Confirming the initial physician certification and annual re-certifications; and Confirming the facilities UR Plan.</p> <p>APD will continue to be responsible for: Eligibility and admissions.</p> <p>KEPRO will provide a monthly report to APD for review.</p> |
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