

TEXAS HEALTH AND HUMAN SERVICES COMMISSION  
**OFFICE OF INSPECTOR GENERAL**  
AUDIT REPORT

**COLLIN COUNTY MHMR CENTER**

---

*Local Intellectual and Developmental Disability  
Authority Performance Contract*



**Issued: February 28, 2020**  
**Revised: March 6, 2020**  
**OIG Report No. AUD-20-006**

---



## HHSC OIG

TEXAS HEALTH AND HUMAN  
SERVICES COMMISSION  
OFFICE OF  
INSPECTOR GENERAL

March 6, 2020

# COLLIN COUNTY MHMR CENTER

## *Local Intellectual and Developmental Disability Authority Performance Contract*

### WHY THE OIG CONDUCTED THIS AUDIT

The Texas Health and Human Services Commission (HHSC) Office of Inspector General (OIG) Audit Division conducted an audit of the Collin County Mental Health and Mental Retardation (MHMR) Center, which operates as a local intellectual and developmental disability authority (LIDDA) under a contract with HHSC. LIDDAs are the primary gateway for providing IDD services to individuals with intellectual and developmental disabilities.

The audit objective was to determine whether Collin County MHMR Center performed according to contract requirements when (a) coordinating services to enrolled individuals, (b) monitoring and evaluating service delivery, and (c) reporting general revenue (GR) expenses.

The audit scope covered the LIDDA contract between Collin County MHMR Center and HHSC for the period from September 1, 2017, through August 31, 2018.

### WHAT THE OIG RECOMMENDS

Collin County MHMR should ensure:

- Documentation of individual service needs and preferences is developed and retained in a written plan of service using the person-directed planning process for GR-funded services.
- Signature pages with all individuals that participated in the HCS and TxHmL person-directed planning process are retained and signed.
- All required face-to-face contacts for GR-funded, HCS, and TxHmL programs are performed in accordance with Texas Administrative Code requirements.

For more information, contact:

[OIG.AuditDivision@hhsc.state.tx.us](mailto:OIG.AuditDivision@hhsc.state.tx.us)

### WHAT THE OIG FOUND

Collin County MHMR Center consistently assigned service coordinators to members as required, and prepared Person-Directed Plans (PDPs) for individuals enrolled in Home and Community-based Services (HCS) and Texas Home Living (TxHmL) programs. However, Collin County MHMR Center should strengthen its processes related to written plans of service for its general revenue (GR)-funded programs, and it should ensure that it consistently performs all required face-to-face contacts for its HCS, TxHmL, and GR-funded program recipients.

LIDDAs are organizations that serve as the point of entry for publicly funded intellectual and developmental disability (IDD) programs. They screen individuals and enroll those who are eligible into Medicaid programs such as HCS and TxHmL. GR-funded IDD services are also provided by or through the LIDDA to help individuals remain in their own or their families' homes. LIDDAs provide and coordinate services and support for individuals with intellectual and developmental disabilities and are responsible for monitoring and evaluating service delivery. HHSC paid Collin County MHMR Center \$1.73 million to administer its LIDDA contract for 2018.

A sample of 214 records related to individuals enrolled and receiving services under HCS, TxHmL, and GR-funded IDD services was reviewed for this audit. Service coordinators were assigned to all 214 individuals in the sample who received services through HCS, TxHmL, and GR-funded programs. No reportable issues were identified during the review of GR expenses.

Collin County MHMR Center should strengthen its processes related to written plans of services, Person-Directed Plans (PDPs), and conducting required face-to-face contacts. Specifically:

- 39 of 214 individuals enrolled in GR-funded services, HCS, or TxHmL programs did not receive at least one required face-to-face contact as prescribed in the written plans of service or PDPs. Service coordinators documented reasons for missed face-to-face contacts for 17 of 39 individuals. In total, those 39 individuals missed 70 required face-to-face contacts. Face-to-face contacts are important to help individuals access medical, social, educational, and other services and supports.
- 4 of 84 written plans of services for individuals that received GR-funded services were not always developed and retained. Plans of service contain the goals of the person-directed planning process and are critical for each individual's access to medical, social, educational, and other services and supports.
- 9 of 130 PDPs for individuals enrolled in HCS and TxHmL programs did not always include the required signatures page. All participants involved in the PDP process must sign the signature page because it signifies their participation in the person-directed planning process.

The OIG Audit Division presented the audit results, issues, and recommendations to Collin County MHMR Center in a draft report dated February 13, 2020. Collin County MHMR Center concurred with the OIG Audit Division recommendations and will provide training to address the findings.

# TABLE OF CONTENTS

<b>INTRODUCTION .....</b>	<b>1</b>
<b>AUDIT RESULTS .....</b>	<b>5</b>
<i>Issue 1: For GR-Funded Programs, Written Plans of Services         Were Not Always Developed and Retained.....</i>	<i>6</i>
Recommendation 1.....	6
<i>Issue 2: For HCS and TxHmL, Signature Pages Were Not         Always Retained.....</i>	<i>7</i>
Recommendation 2.....	8
<i>Issue 3: Service Coordinators for GR-funded, HCS, and TxHmL         Programs Did Not Always Perform Required Number of         Face-to-Face Contacts .....</i>	<i>9</i>
Recommendation 3.....	10
<b>CONCLUSION.....</b>	<b>12</b>
<b>APPENDICES .....</b>	<b>13</b>
A: <i>Collin County MHMR Center’s Management Response .....</i>	<i>13</i>
B: <i>Report Team and Distribution .....</i>	<i>14</i>
C: <i>OIG Mission, Leadership, and Contact Information .....</i>	<i>16</i>

---

## INTRODUCTION

The Texas Health and Human Services Commission (HHSC) Office of Inspector General (OIG) Audit Division conducted an audit of the Collin County Mental Health and Mental Retardation (MHMR) Center. Collin County MHMR Center operates as a local intellectual and developmental disability authority (LIDDA) under a contract with HHSC.

LIDDAs are organizations that serve as the point of entry for publicly funded intellectual and developmental disability (IDD) programs. They screen individuals and enroll those who are eligible into Medicaid programs such as Home and Community-based Services (HCS) and Texas Home Living (TxHmL). LIDDAs provide and coordinate services and supports for individuals with intellectual and developmental disabilities and are responsible for monitoring and evaluating service delivery.

Records related to individuals who were enrolled and received services under HCS, TxHmL, and General Revenue (GR)-funded IDD services were reviewed for this audit. HCS and TxHmL are both Medicaid waiver programs that supply services and support to Texans with an intellectual disability or a related condition to assist members with independent living in the community. HCS and TxHmL services are intended to supplement rather than replace services received from other Medicaid programs or from natural supports, including families, neighbors, or community organizations.

GR-funded IDD services are provided by or through the LIDDA to help individuals remain in their own or their families' homes. An individual may be eligible for GR-funded services if they are in crisis or if they live in the LIDDA's service area and meet at least one of the following conditions of eligibility:<sup>1</sup>

- Have a diagnosis of an intellectual disability (based on the individual's IQ score, adaptive behavior level, and evidence of disability originated before the 18<sup>th</sup> birthday).
- Have a pervasive developmental disorder, such as autism.
- Be a nursing facility resident who is eligible for specialized services or a related condition pursuant to § 1919(e)(7) of the Social Security Act.
- Be a child eligible for early childhood intervention services.

---

<sup>1</sup> HHSC, "Explanation of Services and Supports: Intellectual and Developmental Disabilities (June 2019)," <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/lidda/iddserviceseng.pdf> (accessed Dec. 17, 2019).

The LIDDA contract between HHSC and Collin County MHMR Center during this audit was effective September 1, 2017, and terminated on August 31, 2019. The total amount of HHSC's share of this contract for 2018 was \$1.73 million. Collin County MHMR Center's local match share of this contract for 2018 was \$151,770. The total value of the contract for 2018 was \$1.88 million.

Unless otherwise described, any year referenced is the state fiscal year, which covers the period from September 1 through August 31.

## Objective and Scope

The audit objective was to determine whether Collin County MHMR Center performed the following in accordance with contract requirements:

- Coordinated services to enrolled individuals
- Monitored and evaluated service delivery
- Reported GR expenses correctly

The audit scope covered the LIDDA contract between Collin County MHMR Center and HHSC for 2018.

## Methodology

To accomplish its objectives, the OIG Audit Division collected information for this audit through discussions and interviews with management and staff at Collin County MHMR Center and HHSC IDD Services, and through collection and review of individual and financial IDD program records:

- Maintained at Collin County MHMR Center
- Entered into the HHSC Client Assignment and Registration System (CARE)

HHSC IDD Services identified 2,239 individuals with intellectual and developmental disabilities who received assistance from Collin County MHMR Center during 2018. The OIG Audit Division judgmentally selected the records of 214 individuals receiving the highest number of IDD services through the Collin County MHMR Center during 2018 for review.

Auditors reviewed the sample of 214 records for compliance with LIDDA contract requirements specific to the program the individual was enrolled in during the audit scope. Files for all participants were tested to determine whether (a) a service coordinator was assigned to each member, (b) each member file contained a written plan of services for GR-funded individuals or Person-Directed Plans (PDPs) for participants in HCS and TxHmL, and (c) each member received the required number of face-to-face contacts. Face-to-face contacts are required to meet the

LIDDA minimum contact requirement described in the Texas Administrative Code<sup>2</sup> and are the only type of service coordination contact tested for this audit. Table 1 shows the number of individuals from each program whose records were selected for testing.

**Table 1: Number of Individuals' Records Reviewed by Program**

Program	Number of Individuals
GR	84
HCS	93
TxHmL	37
Total	214

Source: *OIG Audit Division*

Auditors also reviewed Collin County MHMR Center's GR expense records for 2018 to determine whether:

- GR expenses were reported correctly
- Reconciliation of expenses to supporting documentation was performed

The OIG Audit Division presented the audit results, issues, and recommendations to Collin County MHMR Center in a draft report dated February 13, 2020. Collin County MHMR Center concurred with the OIG Audit Division recommendations and will provide training to address the findings. The Collin County MHMR Center's management responses are included in the report after the recommendations. The response in its entirety is provided in Appendix A.

## Criteria

The OIG Audit Division used the following criteria to evaluate the information provided:

- 40 Tex. Admin. Code § 2.307 (2015)
- 40 Tex. Admin. Code § 2.556 (2016)
- 40 Tex. Admin. Code § 2.561 (2004)
- HHSC Interlocal Cooperation Contract #529-18-0030-00001 (2017)

<sup>2</sup> 40 Tex. Admin. Code § 2.556(d)(1) (Mar. 20, 2016).

- HHSC, “Explanation of Services and Supports: Intellectual and Developmental Disabilities,” <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/lidda/iddserviceseng.pdf> (2019)
- HHSC, “Form 8665, Person-Directed Plan, Instructions,” <https://hhs.texas.gov/laws-regulations/forms/8000-8999/form-8665-person-directed-plan> (2019)

## **Auditing Standards**

### GAGAS

The OIG Audit Division conducted this audit in accordance with generally accepted government auditing standards issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for the issues and conclusions based on our audit objectives. The OIG Audit Division believes the evidence obtained provides a reasonable basis for our issues and conclusions based on our audit objectives.

## AUDIT RESULTS

Service coordinators were assigned to all 214 individuals in the sample who received services through HCS, TxHmL, and GR-funded programs. No reportable issues were identified during the review of GR expenses.

There were issues noted with the required written plans of services, PDPs, and the required face-to-face contacts, specifically:

- 39 of 214 individuals enrolled in GR-funded services, HCS, or TxHmL programs did not receive at least one required face-to-face contact as prescribed in the written plans of service or PDPs. Service coordinators documented reasons for missed face-to-face contacts for 17 of 39 individuals. In total, those 39 individuals missed 70 required face-to-face contacts. Face-to-face contacts are important to help individuals access medical, social, educational, and other services and supports.
- 4 of 84 written plans of services for individuals that received GR-funded services were not always developed and retained. Plans of service contain the goals of the person-directed planning process and are critical for each individual's access to medical, social, educational, and other services and supports.
- 9 of 130 PDPs for individuals enrolled in HCS and TxHmL programs did not always include the required signatures page. All participants involved in the PDP process must sign the signature page because it signifies their participation in the person-directed planning process.

Collin County MHMR Center uses a person-directed planning process to develop an individualized plan of services and support for individuals. The person-directed planning process empowers the individual and the legally authorized representative on the individual's behalf, to direct the development of a plan of supports and services that meet the individual's personal outcomes.<sup>3</sup>

Service coordinators work with the individual, the individual's family, and providers to direct the development of a plan that meets the individual's needs and preferences.

Issues related to GR-funded written plans of services, HCS and TxHmL PDPs, and face-to-face contacts are detailed in the sections that follow.

---

<sup>3</sup> HHS (formerly Texas Department of Aging and Disability Services), "Person Directed Planning Guidelines," <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/lidda/persondirectedplanningguidelines.pdf> (accessed Jan. 15, 2020).

---

**Issue 1: For GR-Funded Programs, Written Plans of Services Were Not Always Developed and Retained**

---

The Texas Administrative Code requires a LIDDA to develop a written plan of services and supports using a person-directed planning process for individuals enrolled in GR-funded services.<sup>4</sup>

Collin County MHMR Center did not always document individuals' needs and preferences in a written plan of services. Of the 84 records reviewed for individuals receiving GR-funded services from the Collin County MHMR Center IDD program, a written plan of services was not documented in 4 records (5 percent).

Collin County MHMR Center terminated three service coordinators for varying performance reasons including failure to document a written plan of services for the four records at issue.

Collin County MHMR Center did not meet requirements of the Texas Administrative Code because a written plan of services was not always maintained in each individual's file. A written plan of services contains the goals of the person-directed planning process and is critical for an individual's access to medical, social, educational, and other services and supports that will help them achieve an acceptable quality of life and community participation.<sup>5</sup>

**Recommendation 1**

Collin County MHMR Center should ensure that a copy of the individual written plan of services is developed and retained for each individual receiving GR-funded services.

**Management Response<sup>6</sup>****Action Plan**

*Per the recommendations of OIG, [Collin County MHMR Center doing business as] LifePath will address the findings that involve the timing and documentation of services. This will require additional training within the Intellectual and Developmental Disabilities (IDD) division. This will correct the OIG audit*

---

<sup>4</sup> 40 Tex. Admin. Code § 2.307 (e)(1)(A) (Nov. 15, 2015).

<sup>5</sup> HHSC, "Explanation of Services and Supports: Intellectual and Developmental Disabilities (June 2019)," <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/lidda/iddserviceseng.pdf> (accessed Dec. 17, 2019).

<sup>6</sup> See Collin County MHMR Center's management response in its entirety in Appendix A.

*findings by ensuring all Service Coordinators (SC) understand contract requirements so that ... documentation of individual service needs and preferences is developed and retained in a written plan of service using the person-directed planning process for GR-funded services.*

- *When an SC terminates employment, the individual receiving services will be assigned a new SC. The new SC will review records and update any missing documents as needed.*

Responsible Manager

*IDD Director*

Target Implementation Date

*May 13, 2020*

---

**Issue 2: For HCS and TxHmL, Signature Pages Were Not Always Retained**

---

The HCS and TxHmL programs require that participants involved in the person-directed planning process, including the individual for whom services are being identified (if able), sign the PDP signifying their participation in the planning process.<sup>7</sup>

Collin County did not always retain the signature page with the signatures of all participants involved in the person-directed planning process. Of the 130 records for individuals enrolled in the HCS and TxHmL programs reviewed, 9 (6 in HCS and 3 in TxHmL) did not include the signature page of the PDP.

The contract states the LIDDA shall use Form 8665 (PDP), as well as form instructions, when conducting person-directed planning for individuals enrolling in the HCS and TxHmL programs.<sup>8</sup> Form 8665 instructions state all participants involved in the PDP process must sign the signature page.<sup>9</sup>

Collin County MHMR Center should obtain and retain signatures of all individuals who participated in the person-directed planning process because it signifies their participation in the person-directed planning process.

---

<sup>7</sup> HHSC, "Form 8665, Person-Directed Plan, Instructions," <https://hhs.texas.gov/laws-regulations/forms/8000-8999/form-8665-person-directed-plan>, (accessed Nov. 22, 2019).

<sup>8</sup> HHSC Interlocal Cooperation Contract # 529-18-0030-00001, Attachment A-6, § 1.2.3 (Sept. 1, 2017).

<sup>9</sup> HHSC, "Form 8665, Person-Directed Plan, Instructions," <https://hhs.texas.gov/laws-regulations/forms/8000-8999/form-8665-person-directed-plan>, (accessed Nov. 22, 2019).

## **Recommendation 2**

Collin County MHMR Center should obtain signatures of all individuals who participated in the person-directed planning process and retain the signature page of the PDP.

## **Management Response**<sup>10</sup>

### Action Plan

*Per the recommendations of OIG, [Collin County MHMR Center doing business as] LifePath will address the findings that involve the timing and documentation of services. This will require additional training within the Intellectual and Developmental Disabilities (IDD) division. This will correct the OIG audit findings by ensuring all Service Coordinators (SC) understand contract requirements so that ... signature pages with all individuals who participate in the HCS and TxHmL person-directed planning process are retained and signed.*

- *Currently the Service Planning Team (SPT) signs the general signature sheet for face-to-face meetings. SC's will have additional training on having the SPT sign both the general signature sheet and the PDP signature sheet.*

### Responsible Manager

*IDD Director*

### Target Implementation Date

*May 13, 2020*

---

<sup>10</sup> See Collin County MHMR Center's management response in its entirety in Appendix A.

**Issue 3: Service Coordinators for GR-funded, HCS, and TxHmL Programs Did Not Always Perform Required Number of Face-to-Face Contacts**

Service coordinators for GR-funded, HCS, and TxHmL programs are required to periodically monitor the person-directed planning process and the achievement of desired outcomes for services an individual received.<sup>11</sup> Face-to-face contacts are required to meet the LIDDA minimum contact requirement described in the Texas Administrative Code<sup>12</sup> and are the only type of service coordination contact tested for this audit. The frequency and duration of face-to-face contact with an individual is based on an individual’s needs and preferences and is documented (a) in the written plan of services for individuals receiving GR-funded services or (b) the PDP for individuals enrolled in HCS or TxHmL.

Of the 214 individuals whose records were reviewed, 39 individuals (18 percent) did not receive at least one required face-to-face contact as prescribed in the written plans of service or PDPs. Service coordinators documented reasons for missed face-to-face contacts for 17 of the 39 individuals. Reasons for missed contacts included that the service coordinator was unable to reach or locate the individual; the individual cancelled or rescheduled the contact, which resulted in missing the contact for current month; and the individual relocated or moved out of the service area. For the remaining 22 individuals, the LIDDA did not have documentation to support why the face-to-face contacts were missed.

In total, those 39 individuals missed 70 required face-to-face contacts. Table 2 shows the number of individuals who did not receive at least one required face-to-face contact as prescribed in the written plans of service or PDPs.

**Table 2: Number of Missed Face-to-Face Contacts**

Program	Number of Individuals With Missed Contacts	Number of Required Contacts	Number of Contacts Performed	Number of Missed Contacts
HCS	20	240	210	30
GR	15	172	138	34
TxHmL	4	48	42	6
Total	39	460	390	70

Source: OIG Audit Division Analysis of Information Provided by Collin County MHMR Center

<sup>11</sup> HHSC Interlocal Cooperation Contract #529-18-0030-00001, Attachment A-3, “Service Coordination,” (Sept. 1, 2017).

<sup>12</sup> 40 Tex. Admin. Code § 2.556(d)(1) (Mar. 20, 2016).

Texas Administrative Code states:<sup>13</sup>

A LIDDA must ensure that a service coordinator meets face-to-face with an individual in accordance with one of the following, whichever is the most frequent:

- (A) at least once every 90 days; or
- (B) for the minimum number of face-to-face contacts required by:
  - (i) rules or other requirements of the program or services in which the individual is enrolled;<sup>14</sup> or
  - (ii) a contract between DADS<sup>15</sup> and the LIDDA.

Documentation should include:<sup>16</sup>

- The date of contact
- The description of the element(s) of service coordination provided
- The progress or lack of progress in achieving goals or outcomes
- The person with whom the contact occurred
- The staff who provided the contact and his or her professional discipline, if applicable

Service coordination through face-to-face contacts helps individuals access medical, social, educational, and other services and supports that will help them achieve an acceptable quality of life and community participation.<sup>17</sup>

### **Recommendation 3**

Collin County MHMR Center should perform all required face-to-face contacts as required by rules or other requirements of the program or services in which the individual is enrolled.

---

<sup>13</sup> 40 Tex. Admin. Code § 2.556(d)(1) (Mar. 20, 2016).

<sup>14</sup> HHSC Interlocal Cooperation Contract #529-18-0030-00001, Attachment A-3, "Service Coordination," (Sept. 1, 2017).

<sup>15</sup> Department of Aging and Disability Services (DADS) was consolidated into HHSC.

<sup>16</sup> 40 Tex. Admin. Code § 2.561(a) (Sept. 1, 2004).

<sup>17</sup> HHSCS, "Explanation of Services and Supports: Intellectual and Developmental Disabilities (June 2019)," <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/lidda/iddserviceseng.pdf> (accessed Dec. 17, 2019).

**Management Response**<sup>18</sup>Action Plan

*Per the recommendations of OIG, [Collin County MHMR Center doing business as] LifePath will address the findings that involve the timing and documentation of services. This will require additional training within the Intellectual and Developmental Disabilities (IDD) division. This will correct the OIG audit findings by ensuring all Service Coordinators (SC) understand contract requirements so that all required face-to-face contacts for GR-funded, HCS, and TxHmL programs are performed in accordance with Texas Administrative Code requirements.*

- *For people that have a history of cancelling and/or have difficulty attending scheduled visits per the person-directed-plan (PDP), the SC will:*
  - *Attempt to schedule meetings at the beginning of the month to account for possible cancellations/rescheduling/etc.*
  - *Consider changing the frequency of face-to-face visits per the PDP.*
  - *Document attempts, correspondence, cancellations, etc.*

Responsible Manager

*IDD Director*

Target Implementation Date

*May 13, 2020*

---

<sup>18</sup> See Collin County MHMR Center's management response in its entirety in Appendix A.

## CONCLUSION

A service coordinator was assigned to the 214 individuals in the sample who received services through HCS, TxHmL, and GR-funded programs.

Written plans of services were prepared for the 93 HCS individuals and the 37 TxHmL individuals sampled. However, 4 of 84 individuals that received GR-funded services did not have a written plan of services, and 9 of 130 individuals enrolled in HCS and TxHmL programs did not have the required signatures documented in their PDPs. Specifically, 6 of 93 HCS individuals and 3 of 37 TxHmL individuals did not have the required signatures documented in their PDPs.

At least one required face-to-face contact was not performed as prescribed per the written plans of service or PDPs for 39 of the 214 individuals in the sample tested.

No reportable issues were identified during the review of GR expenses.

The OIG Audit Division offered recommendations to Collin County MHMR Center, which, if implemented, may ensure:

- Documentation of individual service needs and preferences is developed and retained in a written plan of service using the person-directed planning process for GR-funded services.
- Signature pages with all individuals that participated in the HCS and TxHmL person-directed planning process are retained and signed.
- All required face-to-face contacts for GR-funded, HCS, and TxHmL programs are performed in accordance with Texas Administrative Code requirements.

The OIG Audit Division thanks management and staff at Collin County MHMR Center for their cooperation and assistance during this audit.

## Appendix A: Collin County MHMR Center's Management Response



### LIFEPATH SYSTEMS OIG AUDIT PLAN OF CORRECTION FEBRUARY 21, 2020

The Texas Health and Human Services Commission (HHSC) Office of Inspector General (OIG) Audit Division conducted an audit of the Collin County Mental Health and Mental Retardation (MHMR) Center d/b/a LifePath Systems.

The audit objectives were to determine whether LifePath Systems performed the following in accordance with contract requirements:

- Coordinated services to enrolled individuals
- Monitored and evaluated service delivery
- Reported GR expenses correctly

The audit scope covered the LIDDA contract between LifePath Systems and HHSC for fiscal year 2018.

LifePath Systems management concurs with the OIG audit findings. As such, no changes are indicated in the accounting of GR expenses.

Per the recommendations of OIG, LifePath will address the findings that involve the timing and documentation of services. This will require additional training within the Intellectual and Developmental Disabilities (IDD) division. Jo Beth Collier, Director, IDD is responsible to ensure additional training will occur on or before May 13, 2020. This will correct the OIG audit findings by ensuring all Service Coordinators (SC) understand contract requirements so that:

1. All required face-to-face contacts for GR-funded, HCS, and TxHML programs are performed in accordance with Texas Administrative Code requirements.
  - **For people that have a history of cancelling and/or have difficulty attending scheduled visits per the person-directed-plan (PDP), the SC will:**
    - **Attempt to schedule meetings at the beginning of the month to account for possible cancellations/rescheduling/etc.**
    - **Consider changing the frequency of face-to-face visits per the PDP.**
    - **Document attempts, correspondence, cancellations, etc.**
2. Documentation of individual service needs and preferences is developed and retained in a written plan of service using the person-directed planning process for GR-funded services.
  - **When an SC terminates employment, the individual receiving services will be assigned a new SC. The new SC will review records and update any missing documents as needed.**
3. Signature pages with all individuals who participate in the HCS and TxHML person-directed planning process are retained and signed.
  - **Currently the Service Planning Team (SPT) signs the general signature sheet for face-to-face meetings. SC's will have additional training on having the SPT sign both the general signature sheet and the PDP signature sheet.**

We appreciate the work performed by the OIG audit team and will implement the changes noted above in our continuing effort to serve the needs of individuals with intellectual or developmental disabilities in our community.

Tammy Mahan  
Chief Executive Officer  
LifePath Systems  
February 24, 2020

---

## Appendix B: Report Team and Distribution

---

### Report Team

The OIG staff members who contributed to this audit report include:

- Audrey O’Neill, CIA, CFE, CGAP, Deputy IG for Audit
- Kacy VerColen, CPA, Interim Assistant Deputy IG for Audit
- Joel A. Brophy, CIA, CFE, CRMA, Audit Director
- Priscilla Suggs, CIA, CFE, Audit Manager
- Yania Munro, CFE, CGAP, Project Manager
- James Hicks, CISA, Project Manager
- Lorraine Chavana, CFE, Senior Auditor
- Julia Youssefnia, CPA, Senior Auditor
- Antoinette Brewer, Staff Auditor
- Michael Martinez, Staff Auditor
- Melissa Larson, CISA, CIA, CFE, HCISPP, Quality Assurance Reviewer
- Mo Brantley, Senior Audit Operations Analyst

### Report Distribution

#### Health and Human Services

- Dr. Courtney N. Phillips, Executive Commissioner
- Ruth Johnson, Chief Operating Officer
- Victoria Ford, Chief Policy and Regulatory Officer
- Karen Ray, Chief Counsel
- Michelle Alletto, Chief Program and Services Officer
- Nicole Guerrero, Director of Internal Audit
- Stephanie Muth, State Medicaid Director, Medicaid and CHIP Services
- Sonja Gaines, Deputy Executive Commissioner, IDD – Behavioral Health Services

- Haley Turner, Associate Commissioner, IDD Services
- Roderick Swan, Associate Commissioner, IDD – Behavioral Health Contract Operations
- Jennifer D. Miller, Director IDD – Behavioral Health Contract Operations

Collin County MHMR Center

- Randy Routon, Chief Executive Officer
- Tammy Mahan, Chief Operating Officer
- Pam Spears, Chief Financial Officer
- Rik Lindahl, Director, Compliance, Planning and Quality Assurance
- Jo Beth Collier, Director, Intellectual and Developmental Disabilities
- Brandy Hazelwood, Program Administrator for Service Coordination

---

## Appendix C: OIG Mission, Leadership, and Contact Information

---

The mission of OIG is to prevent, detect, and deter fraud, waste, and abuse through the audit, investigation, and inspection of federal and state taxpayer dollars used in the provision and delivery of health and human services in Texas. The senior leadership guiding the fulfillment of OIG's mission and statutory responsibility includes:

- Sylvia Hernandez Kauffman, Inspector General
- Susan Biles, Chief of Staff
- Dirk Johnson, Chief Counsel
- Juliet Charron, Chief of Strategy
- Christine Maldonado, Chief of Operations and Workforce Leadership
- Quinton Arnold, Chief of Inspections and Investigations
- Steve Johnson, Chief of Medicaid Program Integrity

### To Obtain Copies of OIG Reports

- OIG website: [ReportTexasFraud.com](http://ReportTexasFraud.com)

### To Report Fraud, Waste, and Abuse in Texas HHS Programs

- Online: <https://oig.hhsc.texas.gov/report-fraud>
- Phone: 1-800-436-6184

### To Contact OIG

- Email: [OIGCommunications@hhsc.state.tx.us](mailto:OIGCommunications@hhsc.state.tx.us)
- Mail: Texas Health and Human Services Commission  
Office of Inspector General  
P.O. Box 85200  
Austin, Texas 78708-5200
- Phone: 512-491-2000