

LOUISIANA DEPARTMENT OF HEALTH



INVESTIGATIVE AUDIT
ISSUED FEBRUARY 21, 2018

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LOUISIANA LEGISLATIVE AUDITOR
DARYL G. PURPERA, CPA, CFE

February 21, 2018

DR. REBEKAH E. GEE, SECRETARY
LOUISIANA DEPARTMENT OF HEALTH
Baton Rouge, Louisiana

We audited certain transactions of the Louisiana Department of Health. This investigative audit was conducted in accordance with Title 24 of the Louisiana Revised Statutes to determine the validity of complaints we received.

Our audit consisted primarily of inquiries and the examination of selected financial records and other documentation. The scope of our investigative audit was significantly less than that required by *Government Auditing Standards* for a financial audit.

The accompanying report presents our findings and recommendations, as well as management's response. This is a public report. Copies of this report have been delivered to the District Attorney for the 16th Judicial District of Louisiana, the District Attorney for the 19th Judicial District of Louisiana, and others as required by law.

Respectfully submitted,

A handwritten signature in blue ink that reads "Daryl G. Purpera".

Daryl G. Purpera, CPA, CFE
Legislative Auditor

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LDH JABA 2018

TABLE OF CONTENTS

	Page
Executive Summary	2
Background and Methodology.....	4
Findings and Recommendations:	
Medicaid Services Not Provided	5
JABA Received Medicaid Reimbursements for Ineligible Direct Service Workers	8
JABA Billed LDH for Medicaid Services without Prior Authorization	10
Inadequate and/or Inaccurate Documentation of Services Provided.....	11
JABA Not in Good Standing with State Agencies.....	13
Recommendations	14
Legal Provisions.....	16
Management’s Responses.....	Appendix A

EXECUTIVE SUMMARY

Medicaid Services Not Provided

We reviewed time sheets and service logs completed by JABA Enterprises, LLC (JABA) employees and identified eight employees who appear to have recorded a total of 768 hours of personal care services they may not have provided. Independent records, including time sheets from JABA's employees' other employers, incarceration records, drivers' license photos, and/or employees' statements, indicate that the employees were not working for JABA during these hours. From July 2012 to September 2016, JABA billed the Louisiana Medicaid Program (Medicaid) a total of \$11,090 for these hours. By recording hours for Medicaid services not provided, JABA employees may have violated State law. In addition, by billing Medicaid for services not provided, JABA may have violated its Medicaid provider agreements with the Louisiana Department of Health (LDH).

JABA Received Medicaid Reimbursements for Ineligible Direct Service Workers

During our audit, we matched New Opportunities Waiver (NOW) program recipient addresses to the addresses of their direct service workers (DSWs) and found several instances in which it appeared that the DSW lived in the same household as the recipient. According to the Louisiana Medicaid Program Provider Manual for the NOW waiver program, service may be provided by a member of the recipient's family, provided that the recipient does not live in the family member's residence and the family member is not the legally responsible relative. By allowing household members to provide services to NOW waiver program clients, JABA may have violated its provider agreements with LDH.

JABA Billed LDH for Medicaid Services without Prior Authorization

From January 2012 to June 2016, JABA submitted claims to Medicaid for services totaling \$1,325,807 without prior authorization and approval by the program. By submitting claims for services without prior authorization and approval, JABA may have violated its Medicaid provider agreements with LDH.

Inadequate and/or Inaccurate Documentation of Services Provided

During our audit, we reviewed JABA client files with the highest dollar amount of Medicaid claims from January 2012 to June 2016 and found several instances in which the documentation included in service logs was inadequate and/or inaccurate. To be eligible for reimbursement for NOW and LT-PCS services, Medicaid requires providers to complete service logs documenting the services performed. By failing to properly document services performed, JABA may have been improperly reimbursed for ineligible services.

JABA Not in Good Standing with State Agencies

Records obtained from the Louisiana Secretary of State and the Louisiana Workforce Commission indicate that JABA was not in good standing with these agencies for failure to file periodic reports and/or remit amounts owed. State law and rules for Louisiana Medicaid providers require providers to be in good standing with State agencies in order to participate in commercial business operations with the state. By failing to maintain good standing with state agencies, JABA may be in violation of its Medicaid provider agreements with LDH.

BACKGROUND AND METHODOLOGY

The Louisiana Department of Health (LDH) is an executive branch department that reports to the governor. LDH's mission is to protect and promote health and to ensure access to medical, preventative, and rehabilitative services for all citizens of the state of Louisiana. LDH provides health and medical services for uninsured and medically-indigent persons and maintains a coordination of services with the Louisiana State University Health Sciences Center, local health departments, and federally-qualified centers. LDH supervises, coordinates, and provides facilities for mental health, addictive disorders, public health services, services for developmentally disabled, and Medicaid services.

Medicaid provides health coverage to more than one million Louisianans, including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities. The Louisiana Medicaid Program is administered by LDH, according to Federal requirements, and is funded jointly by Louisiana and the Federal government.

JABA Enterprises, LLC (JABA) is a Louisiana limited liability corporation domiciled in St. Mary Parish, Louisiana, which registered with the Louisiana Secretary of State on April 30, 2004. JABA is licensed through LDH to provide home- and community-based services through the Louisiana Medicaid Program in Iberia, Lafayette, St. Martin, St. Mary, and Vermilion parishes. According to LDH records, JABA submitted 276,469 claims to LDH for Medicaid services totaling \$18,723,070 between January 2012 and June 2016. During a review of LDH's Medicaid claims, LLA financial auditors found 52,120 of JABA's claims (19% of JABA's total claims, totaling \$2,664,220) were denied by LDH. Based on JABA's high rate of denied claims, LLA initiated this investigative audit. The procedures performed during this audit included:

- (1) interviewing LDH and JABA employees;
- (2) interviewing other persons, as appropriate;
- (3) examining selected LDH and JABA documents and records;
- (4) gathering and examining external parties' documents and records; and
- (5) reviewing applicable State laws and regulations.

FINDINGS AND RECOMMENDATIONS

Medicaid Services Not Provided

We reviewed time sheets and service logs completed by JABA Enterprises, LLC (JABA) employees and identified eight employees who appear to have recorded a total of 768 hours of personal care services they may not have provided. Independent records, including time sheets from JABA's employees' other employers, incarceration records, drivers' license photos and/or employees' statements, indicate that the employees were not working for JABA during these hours. From July 2012 to September 2016, JABA billed the Louisiana Medicaid Program (Medicaid) a total of \$11,090 for these hours. By recording hours for Medicaid services not provided, JABA employees may have violated State law.¹ In addition, by billing Medicaid for services not provided, JABA may have violated its Medicaid provider agreements with the Louisiana Department of Health (LDH).

JABA is licensed through LDH to provide personal care services to Louisiana Medicaid recipients who require assistance with daily living needs in Iberia, Lafayette, St. Martin, St. Mary, and Vermilion parishes. JABA employs direct service workers (DSW) to provide personal care services to allow Medicaid recipients to achieve and/or maintain increased independence, productivity, enhanced family functioning, and inclusion in the community or for the relief of the primary caregiver. Services include assistance and prompting with personal hygiene, dressing, bathing, grooming, eating, toileting, ambulation or transfers, and other personal care and behavioral support needs. The number of hours and the specific services to be provided to each recipient are summarized in a plan of care. Once the plan of care is approved, the provider will receive authorization to perform services and can bill Medicaid for the number of units approved each period. DSW's are required to complete time sheets and service logs to document the times and specific activities that were performed and billed by JABA. Time sheets and service logs are signed by either the recipient or the recipient's designated personal representative to certify that the DSW performed the services.

During our audit, we reviewed JABA client files with the highest dollar amount of Medicaid claims from January 2012 to June 2016. We compared time sheets for the DSWs associated with these client files to time sheets from alternate employment, incarceration records, and drivers' license/identification photos and identified eight DSWs whose JABA work activities overlapped with other activities for a total of 768 hours. JABA billed Medicaid \$11,090 for these hours. We obtained drivers' license and Louisiana identification card photos for 19 different DSWs and compared the timestamps from these photos to their JABA time sheets. We found that the photos overlapped with time worked by seven (37%) of the 19 DSWs, meaning that seven JABA employees submitted time sheets showing they were working when their State drivers' license/identification card photos were taken. Five of those seven JABA employees had multiple drivers' license/identification photos that overlap with their JABA time sheets. Additional examples of JABA DSWs whose time sheets overlapped with other documented activities include:

Medicaid Recipient #1

LDH records indicate that JABA received \$134,451 in Medicaid payments for services provided to Recipient #1 from October 2012 to June 2016. At various times during this period, the recipient's brother was employed by JABA as a DSW to provide personal care services. Time sheets and service logs on file at JABA indicate that he provided personal care services to Recipient #1 from July 4, 2015 to July 14, 2015, when other records show the recipient's brother was incarcerated in St. Mary Parish. JABA billed Medicaid and received \$1,199 for 83 hours of services while the DSW was incarcerated.

The time sheets and service logs supporting services performed by the recipient's brother from July 4, 2015 to July 14, 2015, were certified by the recipient's mother as the legal guardian/authorized representative. We provided the recipient's mother with copies of these time sheets, and she acknowledged that the recipient's brother (who is also her son) had been incarcerated and did not work the hours represented on his time sheets. The recipient's mother stated that her son's (the DSW's) girlfriend completed the time sheets and that she signed the time sheets with the knowledge that her son (the DSW) did not work the hours. The recipient's mother stated that she provided care to her son (the recipient) while his brother (the DSW) was incarcerated.

In addition, we obtained the DSW's driver's license photos which indicate that he obtained driver's licenses at 3:06 p.m. on March 26, 2015, and at 2:13 p.m. on May 7, 2015. Time sheets submitted by the DSW indicate that he was performing services for the recipient on each of these days from 8 a.m. to 4 p.m. Recipient #1's mother stated that she took the recipient and the DSW to the Office of Motor Vehicles (OMV) on both occasions. She added that the DSW was working because the recipient went with them to the OMV. We reviewed the service logs for these days and found no entries to support trips to the OMV. In addition, we attempted to speak to the DSW; however, his mother stated that he moved out of state.

Medicaid Recipient #2

From January 2012 to June 2016, JABA billed Medicaid \$171,147 for services provided to Recipient #2. Records indicate that the recipient's grandmother has been his DSW since 2007. We spoke with the DSW and her daughter (the recipient's mother). The DSW stated that she provides personal care services to the recipient from 5:45 a.m. to 6:45 a.m. in order to get the recipient ready for school and that she returns at 3:00 p.m., when the recipient comes home from school. The DSW explained that she prepares a snack, walks outside with the recipient, prepares dinner, and leaves the residence between 4:30 and 4:45 p.m. The recipient's mother confirmed these hours and then indicated that either she or her daughter care for the recipient after the DSW leaves around 4:45 p.m.

We compared time sheets completed by the DSW to the work schedule the DSW described during our interview. These time sheets indicate that the DSW provides services on weekdays from 5:45 a.m. to 6:45 a.m. and 3:00 p.m. to 9:45 p.m. Based on this information, it appears that the DSW records a total of five hours (4:45 p.m. to 9:45

p.m.) each weekday when she was not present to perform services for the recipient. From January 6, 2016 through September 9, 2016, the DSW's time sheets included a total of 555 hours on weekdays from 4:45 p.m. to 9:45 p.m. JABA billed and received Medicaid reimbursements totaling \$8,014 for these hours.

Medicaid Recipient #3

According to Medicaid records, JABA was paid \$244,379 for services provided to Recipient #3 from January 2012 to June 2016. We compared drivers' license photos of the recipient's DSW, which were taken at 2:28 p.m. on July 6, 2012, and at 1:48 p.m. on May 9, 2016, to time sheets on file at JABA. Time sheets for these days indicate that the DSW provided services to the recipient from 12:00 p.m. to 10:30 p.m. Further, detailed progress notes for these days did not mention time spent with the recipient at the OMV. In addition, we stopped by the residence at 2:00 p.m. on October 13, 2016, and no one answered the door. Time sheets indicate that the DSW provided services on this day and did not note any activities that would have required the DSW and/or the recipient to leave the residence.

Medicaid Recipient #4

Records indicate that JABA was paid \$70,670 to provide services to Recipient #4 from January 2012 to June 2016. We found that the recipient's daughter is the DSW and that she generally performs services from 9:00 a.m. to 3:00 p.m. We visited the recipient's residence on October 13, 2016, at 10:20 a.m. At that time, the recipient indicated that her DSW hadn't arrived yet. The recipient then contacted the DSW by telephone and informed her that auditors were present. The DSW arrived at the residence at 11:12 a.m. Although the DSW did not arrive at the recipient's residence until 11:12 a.m., her time sheet and service log indicate that she worked from 9:00 a.m. to 2:30 p.m. that day.

Conclusion

We reviewed JABA's employees' time sheets and service logs and identified eight employees who appear to have recorded a total of 768 hours of personal care services that may not have been provided. Independent records such as time sheets from alternate employment, incarceration records, drivers' license photos, and/or statements from these employees indicate that they were not working for JABA during these hours. From July 2012 to September 2016, JABA billed Medicaid a total of \$11,090 for these hours. By recording hours for Medicaid services not provided, JABA employees may have violated State law.¹ In addition, by billing Medicaid for services not provided, JABA may have violated its Medicaid provider agreements with LDH.

JABA Received Medicaid Reimbursements for Ineligible Direct Service Workers

During our audit, we matched New Opportunities Waiver (NOW)^A program recipient addresses to the addresses of their DSWs and found several instances in which it appeared that the DSW lived in the same household as the recipient. According to the Louisiana Medicaid Program Provider Manual for the NOW waiver program, service may be provided by a member of the recipient's family, provided that the recipient does not live in the family member's residence and the family member is not the legally responsible relative. By allowing household members to provide services to NOW waiver program clients, JABA may have violated its provider agreements with LDH.

Medicaid Recipient #1

In addition to finding that the DSW for this recipient completed time sheets for services not provided (see previous finding), it appears that the DSW lived in the household with the recipient during the same period. OMV records indicate that the DSW renewed his driver's license on March 26, 2015. The address on the driver's license matched the address the recipient used on an eligibility determination form on May 5, 2015, and a plan of care that was completed on August 6, 2015. As mentioned in the previous finding, the DSW was arrested and incarcerated on July 4, 2015. Records from the arrest included the same address as the DSW's driver's license and the recipient's address per his eligibility determination and plan of care. Based on this information, it appears that the DSW lived in the same household as the recipient. We spoke with the mother of both the DSW and the recipient, who told us that the DSW lived in the household prior to becoming the recipient's DSW but moved out of the household before performing services. The DSW's mother stated that the DSW continued to use the address to receive his mail.

Medicaid Recipient #2

Records indicate that the recipient's grandmother has been employed by JABA as the DSW since 2007 (see previous finding). We obtained the DSW's Louisiana identification card, which was issued on December 10, 2007, and found that the address on the card was the same address listed on the recipient's plan of care. We reviewed the DSW's JABA personnel file, which included a photocopy of the same identification card. However, it appears that the photocopy was altered and included an address different from the address on the identification card.

We contacted the DSW at the recipient's address. The DSW and her daughter (the recipient's mother) both stated that the DSW lived at the residence; however, the DSW later stated that she lives in a house down the street. After speaking with the DSW, we

^A The New Opportunities Waiver (NOW) program is a Medicaid waiver designed to provide home and community-based supports and services to recipients with developmental disabilities who require the level of care of an intermediate care facility for people with intellectual disabilities. The objectives of the NOW program are to offer an alternative to institutionalization and promote independence and community inclusion for recipients through the provision of services.

searched Louisiana Medicaid records and found that the DSW is also a Medicaid recipient. According to these records, the DSW is registered at the same address as her grandson for whom she provides NOW waiver services as a JABA employee.

Medicaid Recipient #5

From January 2012 to June 2016, JABA was paid \$166,963 for providing services to this recipient. During our audit, we noted that the recipient's sister worked for JABA as the DSW. We matched the addresses on driver's licenses obtained by the DSW on March 26, 2013, and September 6, 2013, to the address listed on the recipient's plan of care, which was completed on July 13, 2013. These records indicate that the DSW and the recipient shared the same address from at least July 2013 to September 2013. We searched the DSW's JABA personnel file and found a photocopy of the driver's license she obtained on September 6, 2013. The photocopy of the driver's license appears to have been altered as it included an address different from the address on the actual driver's license. In addition, the time sheet submitted by the DSW indicates that the DSW was working for JABA when the driver's license photograph was taken.

Medicaid Recipient #6

According to Medicaid records, JABA was paid \$181,433 for providing services to this recipient from January 2012 to June 2016. We obtained driver's licenses for the recipient's DSW and found that the DSW's address matched the recipient's address. In addition, wage records from the Louisiana Workforce Commission (LWC) indicate that the DSW was employed by a municipality during the period she was employed by JABA. We obtained the DSW's personnel files from JABA and the municipality. Documents in the DSW's JABA personnel file indicate an address other than the recipient's address; however, all of the documents in the DSW's municipal personnel file, including tax forms, copies of payroll checks, and enrollment forms indicate that the DSW resides at the same address as the recipient.

Conclusion

During our audit we found several instances in which it appeared that the DSW lived in the same household as NOW waiver program recipients. According to the Louisiana Medicaid Program Provider Manual for the NOW waiver program, service may be provided by a member of the recipient's family, provided that the recipient does not live in the family member's residence and the family member is not the legally responsible relative. By allowing household members to provide services to NOW waiver program clients, JABA may have violated its provider agreements with LDH.

JABA Billed LDH for Medicaid Services without Prior Authorization

From January 2012 to June 2016, JABA submitted claims to Medicaid for services totaling \$1,325,807 without prior authorization and approval by the program. By submitting claims for services without prior authorization and approval, JABA may have violated its Medicaid provider agreements with LDH.

Prior authorization is the process to approve specific services for a Medicaid recipient by an enrolled Medicaid provider prior to service delivery and reimbursement. The purpose of prior authorization is to validate the service requested as medically necessary and that it meets criteria for reimbursement. Obtaining prior authorization does not guarantee payment for the service, as payment is contingent upon the passing of all edits contained within the claims payment process, the recipient's continued Medicaid eligibility, the provider's continued Medicaid eligibility, and the ongoing medical necessity for the service. Services provided without a current prior authorization are not eligible for reimbursement.

When Medicaid recipients are deemed to meet the requirements for NOW and LT-PCS^B services, a plan of care specifying the number of hours and the specific services to be provided must be approved by LDH. Approved plans of care are sent to Statistical Resources, Inc. (SRI), the Medicaid data contractor responsible for authorizing NOW and LT-PCS services. SRI enters the service codes and units specified from the approved plans of care into its LAST computer system (LAST) to create prior authorization numbers that are sent to the Medicaid providers electronically. Services can be performed once the prior authorization numbers are received by the Medicaid providers. The Medicaid providers are responsible for entering the services performed into LAST, which tracks the services performed for each recipient and ensures that the services provided comply with a recipient's plan of care. The service information entered by Medicaid providers must pass edit checks before SRI will release the services for the provider to bill Medicaid.

According to LDH records, JABA submitted 276,469 claims to Medicaid for services totaling \$18,723,070 from January 2012 to June 2016. During a review of these claims, we found that 52,120 claims (19% of claims) totaling \$2,664,220 were denied by LDH. Of this amount, 26,546 (51% of the denied claims) totaling \$1,325,807 were denied because of prior authorization issues. For example, 11,728 claims totaling \$640,439 were denied because they were submitted to Medicaid before JABA had a prior authorization number on file. Additional categories of denials included:

- 5,109 claims totaling \$309,239 were denied because the claims exceeded prior authorized limits;
- 3,032 claims totaling \$102,857 were for procedures that required prior authorization; and

^B The LT-PCS program is designed for Medicaid recipients who require assistance with the activities of daily living and are either in a nursing home or at imminent risk of nursing facility placement. The purpose of LT-PCS is to assist individuals with functional impairments with their daily living activities.

- 1,551 claims totaling \$85,705 indicated that the date on the claim was not covered by prior authorization.

Berwick Francis, Jr., JABA's registered agent and Medicaid billing manager, stated that he uses information from the DSW's time sheets and service logs to bill Medicaid. He explained that JABA provides services to new clients or continues to provide services to existing clients before receiving prior authorization because the company would lose business if it waited for authorization. Mr. Francis further stated that he knows the claim will be denied when he enters the billing information because he has not received prior authorization; however, the services were approved pursuant to LDH approving the plans of care. According to Mr. Francis, this process keeps billing information from stacking up on his desk. Mr. Francis also stated that on some occasions SRI does not provide the prior authorization numbers timely and, in other cases, JABA provided services past the client's eligibility date because JABA was unaware that the client was no longer eligible. By submitting claims for services without prior authorization and approval, JABA may have violated its Medicaid provider agreements with LDH.

Inadequate and/or Inaccurate Documentation of Services Provided

During our audit, we reviewed JABA client files with the highest dollar amount of Medicaid claims from January 2012 to June 2016 and found several instances in which the documentation included in service logs was inadequate and/or inaccurate. To be eligible for reimbursement for NOW and LT-PCS services, Medicaid requires providers to complete service logs documenting the services performed. By failing to properly document services performed, JABA may have been improperly reimbursed for ineligible services.

In order to be eligible for reimbursement for NOW and LT-PCS services, Medicaid requires that providers complete service logs documenting the services performed. Service logs for the NOW waiver program provide a chronological listing of contacts and services provided to a recipient. They reflect the services delivered and document the services billed. NOW service logs include the name of recipient; signature of the employee providing the service; date of service contact; start and stop time of service contact; place of service contact; purpose of service contact; and the content and outcome of service contact. There must be case record entries corresponding to each recorded support coordination and direct service provider activity which relates to one of the personal outcomes.

For LT-PCS services, providers are required to use a standardized service log which includes the following information:

- time the service began each day with his/her signed initials and the time service ended with his her signed initials;
- the task performed as indicated by the worker's signed initials on the day it was performed;
- total number of hours worked that day;

- documentation of any circumstance that would require a change in the recipient's plan of care;
- justification for not performing any task identified in the plan of care;
- location where the task was performed, if not performed in the recipient's home; and
- any observation the worker believes should be noted and reported to the supervisor.

The DSW's service logs are completed and signed by the DSW and either the recipient or the recipient's designated personal representative to certify that the DSW performed the services. During our audit, we reviewed JABA client files with the highest dollar amount of Medicaid claims from January 2012 to June 2016 and found several instances in which the service logs were inadequate and/or inaccurate. Examples of inadequate and/or inaccurate documentation are provided below.

- We identified one household that included two Medicaid recipients (mother and daughter) who received personal care services from JABA. JABA records indicate that the mother signed the DSW time sheets and service logs as the authorized representative for her daughter, and another member of the household signed the DSW time sheets and service logs on behalf of the mother. During a review of incarceration records, we found that the household member who signed as an authorized representative for the mother on June 12, 2016, and June 19, 2016, was incarcerated from June 1, 2016 to June 21, 2016. Because this individual was incarcerated, we question his ability to sign service logs to certify that services were provided within the household.
- Records indicate that JABA has provided personal care services to one client for 23 hours per day under the NOW waiver program for the past several years. According to documentation maintained by JABA, several DSWs have been used to provide these services, which included one DSW for a 16-hour shift and another for a seven-hour shift. We reviewed the DSW time sheets and service logs for this recipient and determined that it was a routine practice for one DSW to complete the weekly service logs for both shifts and have the other DSW sign the service logs.
- We found that several DSWs recorded the same activities each week for extended periods of time and simply changed the order (on a weekly basis) of the activities. These activities were very general and did not correspond to the daily tasks that were initialed by the DSWs. For example, one DSW regularly initialed that the following tasks were completed each day: Going to Church/Movie/ Outings; Health & Safety/Evacuation Training; and Accompany to Medical Appointment. Although the DSW initialed these activities on a daily basis, none of these activities were described on the daily notes. The daily notes included entries such as "watched TV," "listened to music," and "walked around the house."

We reviewed the service logs completed by this DSW from January 2015 to December 2015 and found that in addition to indicating that all tasks were completed on a daily basis, the DSW recorded the same daily entries every week for the entire year. For example, one day each week, the DSW recorded “walked with his walker and got tired...DSW touched his knee and he started to cry and his mother gave him some medicine and it stopped hurting.” Based on the service logs, this activity happened once per week, every week, for the entire year, on alternating days.

By failing to properly document services performed, JABA may have been improperly reimbursed for ineligible services.

JABA Not in Good Standing with State Agencies

Records obtained from the Louisiana Secretary of State and LWC indicate that JABA was not in good standing with these agencies for failure to file periodic reports and/or remit amounts owed. State law and rules for Louisiana Medicaid providers require providers to be in good standing with State agencies in order to participate in commercial business operations with the State. By failing to maintain good standing with State agencies, JABA may be in violation of its Medicaid provider agreements with LDH.

Louisiana Secretary of State

According to the Louisiana Secretary of State Corporations database, JABA is not in good standing for failure to file its annual report. According to the database, JABA last filed its annual report on August 10, 2016. Louisiana Revised Statute 12:1308.2(E) provides that each limited liability company that is not in good standing shall be prohibited from engaging in commercial business operations with the State or its boards, agencies, departments, or commissions. Any contract between the State or its boards, agencies, departments, or commissions and a limited liability company that is not in good standing may be declared null and void by the board, agency, department, commission, or the Division of Administration.

Louisiana Workforce Commission

Unemployment insurance is a program that provides temporary weekly benefits for workers who have lost their job through no fault of their own and are able, available, and seeking work in their usual occupations. Unemployment insurance is administered by LWC. According to State law, contributions made by the employer (not the employee) are based on wages paid to employees. Employers are required to file quarterly wage reports to LWC and pay contributions to the unemployment insurance fund based on reported wages. If an employer fails to report wages, LWC shall make an estimate of the information required from the employer and notify the employer by registered mail.

According to LWC, JABA has not reported wages since the fourth quarter of 2013 and that wages have been estimated since that time. LWC has attempted to contact JABA; however, all correspondence was returned. As a result, JABA may be subject to additional liabilities to LWC for failing to report wages and make contributions to the unemployment insurance fund.

By failing to file periodic reports and/or remit amounts owed to state agencies, JABA may be in violation of its Medicaid provider agreements with LDH.

Recommendations

We recommend that LDH consult with its legal counsel to determine the appropriate action to be taken, including the recovery of payments for services not provided.

In addition, LDH management should:

- (1) Require providers to implement detailed written policies and procedures to ensure that they appropriately bill for services provided. These policies and procedures should require supervisory review and approval of service logs and time sheets completed by DSWs;
- (2) Conduct periodic monitoring visits to ensure that DSWs are providing the services that are billed. Monitoring visits should determine if the services are being performed, are properly documented, and authorized in an approved plan of care;
- (3) Conduct periodic monitoring visits of service providers to ensure that the services billed are properly documented;
- (4) Investigate service providers who billed for services that are not properly documented to determine if fraud occurred;
- (5) Require providers to periodically update employee personnel files to ensure that they contain accurate information;
- (6) Run periodic reports to match DSW addresses to the addresses of the NOW waiver program recipients to ensure that DSWs and NOW program recipients do not live in the same household;
- (7) Require providers to implement detailed written policies and procedures to ensure receipt of prior authorization before services are provided and billed to Medicaid;
- (8) Investigate providers with excessive amounts of denied claims to determine if the claims were the result of errors or fraud. If LDH finds that excessive denied

claims are the result of errors, LDH should provide additional training to ensure that claims are properly submitted;

- (9) Require providers to sign an annual certification stating that the provider has reviewed and will comply with the provisions of the provider manuals; and
- (10) Monitor providers to ensure that they are in good standing with the Louisiana Secretary of State and other State agencies. Providers that are not in good standing with these State agencies should be prohibited from participating in the Medicaid program.

LEGAL PROVISIONS

¹ **Louisiana Revised Statute (La. R.S.) 14:67(A)** provides, in part, “Theft is the misappropriation or taking of anything of value which belongs to another, either without the consent of the other to the misappropriation or taking, or by means of fraudulent conduct, practices, or representations. An intent to deprive the other permanently of whatever may be the subject of the misappropriation or taking is essential.”

La. R.S. 14:70.1(A) provides, “The crime of Medicaid fraud is the act of any person who, with intent to defraud the state or any person or entity through any medical assistance program created under the federal Social Security Act and administered by the Louisiana Department of Health or any other state agency, does any of the following:

- (1) Presents for allowance or payment any false or fraudulent claim for furnishing services or merchandise.
- (2) Knowingly submits false information for the purpose of obtaining greater compensation than that to which he is legally entitled for furnishing services or merchandise.
- (3) Knowingly submits false information for the purpose of obtaining authorization for furnishing services or merchandise.”

La. R.S. 14:72(A) provides, “It shall be unlawful to forge, with intent to defraud, any signature to, or any part of, any writing purporting to have legal efficacy.”

APPENDIX A

Management's Responses



State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

February 9, 2018

Daryl G. Purpera, CPA, CFE
Legislative Auditor
P.O. Box 94397
Baton Rouge, Louisiana 70804-9397

Re: Investigative Audit on JABA Enterprises, LLC.

Dear Mr. Purpera,

Thank you for the opportunity to respond to the findings of your investigative audit report on JABA Enterprises, LLC (JABA). The Management of the Bureau of Health Services Financing (BHSF), which is responsible for the Medicaid program in Louisiana, is committed to monitoring claims to ensure that inappropriate claims are identified and follow up action is taken.

LDH concurs with the recommendations in the report and has processes in place in order to identify aberrant behaviors through its Program Integrity function. These processes involve analyzing claims data for suspicious patterns, performing records reviews to determine if an issue exists, and taking the appropriate action to recover any improper payments. In instances where a provider is suspected of committing fraud, LDH makes referrals to the state's Medicaid Fraud Control Unit for further review. In a June 2017 Department of Health and Human Services, Office of Inspector General report, Louisiana was cited as being compliant with the Social Security Act with respect to handling credible allegations of fraud by Medicaid providers.

As you are aware, JABA has been the subject of LDH Program Integrity reviews from October 2011 to present. Those reviews resulted in identified overpayments of approximately \$36,000, monetary penalties of \$5,000, and approximately 10 referrals or notices to the state's Medicaid Fraud Control Unit for additional reviews. These referrals and notices resulted in the arrests of seven JABA employees last summer. Recently, LDH Program Integrity took the additional action of excluding JABA from the Louisiana Medicaid program and terminating its provider agreement because of their prior audit history as well as a recent Medicaid Integrity Contractor audit that revealed several Medicaid policy and rule violations which resulted in an overpayment of \$198,161. Those violations include:

- Failure to conduct mandatory supervisory visits
- Inadequate documentation to support billing
- Incomplete, non-existent or unsigned service logs
- Failure to complete mandatory sanction checks
- Missing documentation of annual training requirements
- No evidence of annual evaluations of employees
- Performance of unapproved services

We appreciate the interest and recommendations made by the Legislative Auditor. For each of the recommendations, the Medicaid program already has the policies, procedures and requirements in place. In addition, recommendations to monitor and investigate providers are already a core function of our Program Integrity unit. Although the 10 recommendations made by the Legislative Auditor are already a part of our program, we have provided further details in our response to each recommendation as shown below.

Recommendation 1: Require providers to implement detailed written policies and procedures to ensure that they appropriately bill for services provided. These policies and procedures should require supervisory review and approval of service logs and timesheets completed by DSW's.

LDH Response: Providers are required to have policies and procedures of this nature.

Recommendation 2: Conduct periodic monitoring visits to ensure that DSW's are providing the services that are billed. Monitoring visits should determine if the services are being performed, are properly documented, and authorized in an approved plan of care.

LDH Response: LDH does conduct periodic monitoring visits through support coordinators to ensure that DSWs are providing the services that are billed.

Recommendation 3: Conduct periodic monitoring visits of service providers to ensure that the services billed are properly documented.

LDH Response: LDH Program Integrity routinely investigates providers who bill for services that are not properly documented. These investigations involve reviews of medical records to ensure that services are properly documented. In instances where services are not properly documented, LDH Program Integrity will recover any overpayments.

Recommendation 4: Investigate service providers who billed for services that are not properly documented to determine if fraud occurred.

LDH Response: As previously mentioned, LDH Program Integrity routinely investigates providers who bill for services that are not properly documented. In instances where LDH

believes fraud may have occurred, referrals are made to the state's Medicaid Fraud Control Unit for review.

Recommendation 5: Require providers to periodically update employee personnel files to ensure that they contain accurate information.

LDH Response: Providers are required to maintain accurate employee records.

Recommendation 6: Run periodic reports to match DSW addresses to the addresses of the NOW program recipients to ensure that DSW's and NOW program recipients do not live in the same household.

LDH Response: LDH is working with its vendor to begin doing periodic address matches to identify DSWs who might live in the same household as the members they serve.

Recommendation 7: Require providers to implement detailed written policies and procedures to ensure receipt of prior authorization before services are provided and billed to Medicaid.

LDH Response: The provider manual requires that prior authorization be obtained for these services. As pointed out by the audit, claims for this service that lack prior authorization or are for more units than were authorized are denied for payment.

Recommendation 8: Investigate providers with excessive amounts of denied claims to determine if the claims were the result of errors or fraud. If LDH finds that excessive denied claims are the result of errors, LDH should provide additional training to ensure that claims are properly submitted.

LDH Response: LDH does use information on denied claims reasons to determine where technical assistance can be provided. Routine meetings are held with providers where technical assistance is given on a variety of topics.

Recommendation 9: Require providers to sign an annual certification stating that the provider has reviewed and will comply with the provisions of the provider manuals.

LDH Response: When providers enroll with Medicaid, they agree to abide by all applicable federal and state laws in addition to Medicaid policies and provider manuals.

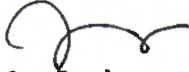
Recommendation 10: Monitor providers to ensure that they are in good standing with the Louisiana Secretary of State and other state agencies. Providers that are not in good standing with these state agencies should be prohibited from participating in the Medicaid program.

LDH Response: LDH Program Integrity will evaluate its options for adding requirements for providers to be in good standing with the Secretary of State.

Daryl G. Purpera
February 9, 2018
Page 4

You may contact Michael Boutte, Deputy Director, at (225) 342-0327 or via e-mail at Michael.Boutte@la.gov with any questions about this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Jen Steele". The signature is fluid and cursive, with a large initial "J" and a long horizontal stroke extending to the right.

Jen Steele,
Medicaid Director

JABA ENTERPRISES, LLC.
WRITTEN RESPONSES TO PRELIMINARY
OBSERVATIONS AND JUDGEMENTS

Written Responses to Preliminary Observations and Judgements

JABA Enterprises, LLC is a Home Community Base Services (HCBS) Provider that has provided Personal Care Attendant Services (PCA) for thirteen plus (13+) years. Our Agency's mission is to provide quality care to the elderly and disabled population at home in lieu of nursing care facility replacement. Our agency pride itself on dedicating its energies and resources to effect a more complete integration of its clients and the community for their mutual enrichment and quality of life.

JABA Enterprises, LLC, upon hire, provide the Direct Support Worker (DSW) with all necessary training(s) and resources to be an effective employee (DSW). Training includes, but not limited to the Employee's Duties and Responsibilities, Company's Policies and Procedures, Effective Communication, Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) Care, Abuse/Neglect/Misappropriation of Property, Staff Ethics and Confidentiality, Human and Civil Rights, Confidentiality and HIPAA, Person-Centered Planning/Personal Outcomes/Self-Determination Philosophy, Incident Documentation and Reporting, Documentation of Services, Environmental Emergency Procedures, and Infection Control/Universal Precautions. Direct Support Workers are also trained specifically of Recipient's Plan of Care and how the tasks and care are to be implemented to attain the recipient's satisfaction of services provided. Documentation of services is trained initially and periodically throughout the year to ensure quality assurance of services provided. Our agency requires that employees sign the following documents (see attached documents): Employment Application, Duties and Responsibilities, Orientation Training Documentation, Fraudulent Activity Policy, etc. This procedure is done to certify the training was obtained and the Direct Support Worker (DSW) is knowledgeable of the agency's policies and procedures and agree to adhere to those policies and procedures.

JABA Enterprises, LLC discuss and review the recipient's Plan of Care and Service Plan with the recipient and the duties and responsibilities of the Direct Support Worker (DSW). Each recipient is informed of the Direct Support Worker's duties and responsibilities, such as:

- DSW adhering to the time schedule of services to be provided
- DSW providing services obtained in the recipient's Plan of Care
- Recipient's request to deviate from the typical weekly schedule of services with justifiable reasons and certifying deviation form
- Typical weekly schedule with deviations on Justification Form (see attached)
- Emergency Back-Up Staff Documentation Form
- Fraudulent Activity Documentation Form
- Contacting Administration if dissatisfied with services rendered
- Documentation (Signing and Certifying true and accurate documentation)
- For recipients receiving Waiver services, discuss with Direct Support Worker companion care to be provided inside/outside of the recipient's home

- Contacting the Administrative Staff when the Direct Support Worker did not show, the Direct Support Worker is running late, or needs assistance with an issue

The agency to ensure Quality Assurance will monitor Personal Care Attendant Services after the first 30-60 days of care in the recipient's home, conduct quarterly home assessments via phone or by observation and asking questions to the recipients about his/her care. Recipients are required to sign documents evaluating his/her care (see attached documents).

JABA Enterprises, LLC has made and will continue to make additional efforts to ensure quality care and prevent fraudulent activity. The agency provide annual trainings and evaluations and invite a Representative from the Louisiana Medicaid Fraud Unit to give a presentation on Fraudulent Activity and the consequences that derive from committing a fraudulent act.

In regards to the matter in which the Direct Support Work was incarcerated, the Direct Support Worker was properly trained and provided all the necessary resources to be effective and provide quality care to the recipient. However, the agency was not made aware of the Direct Support Worker's incarceration for the acute length of time served. It is the Direct Support Worker's responsibility to notify the agency immediately of his/her absence from employment (see attached form). The Direct Support Worker's absence from employment was not identified by the recipient or the recipient's authorized representative to the agency. The decision to place Back-Up Staff and/or to select Back-Up Staff to provide New Opportunities Waiver (N.O.W.) services was that of the authorized representative and not a decision rendered by the provider. JABA Enterprises, LLC explores all avenues possible to be effective in true and accurate service delivery. Unfortunately, the acute time period of the Direct Support Worker incarceration was unidentified by the provider because it was during the time in which the agency did not have a monitoring session scheduled to evaluate services. The authorized representative did sign service log and time sheets certifying services were provided by the Direct Support Worker during the his time of incarceration. The agency with proper notification would have handled the matter in compliance with the company's policies and procedures for providing Emergency Back-Up Staff and eliminate the inappropriate behavior (lack of communication by authorized representative and Direct Support Worker with provider). The agency will identify additional precautionary measures to prevent billing claims with alternate employees, incarcerated employees, etc. (checking local newspapers, law enforcement websites for police reports).

Recipients eligible for Waiver services receive personal care attendant services and companion care services in which services are provided in and outside the recipient's home and in the community. Activities provided in the community are selected by the recipient and/or the recipient's authorized representative perhaps on a day to day basis. The direct service worker may request time off to take care of business and the recipient and/or authorized representative may request to attend community outing with direct service worker instead. A decision as such is rendered by the recipient and/or the recipient's authorized representative. Our agency will emphasize the importance of documenting community activities and the time community activities take place as provided to staff during orientation training and annual trainings as well. Our agency does believe that there was a miscommunication between the authorized

representative and staff in providing information to representatives of your agency. Our agency has provided personal care services for the recipient for multiple years and the authorized representative was always satisfied with the services provided as she participated in multiple assessments and monitoring of personal care attendant services. The authorized representative not only provided her satisfaction of the personal care services to our agency but also communicated satisfaction to the support coordinator services agency. The authorized representative also signed documentation certifying services were provided and that the direct service worker adhered to time allotted for services. This information was also provided to the support coordinating agency. The information provided in this finding was never communicated to the provider nor the support coordinating agency. Therefore, the agency continued to provide care with the direct service worker the authorized representative was satisfied with. Throughout the recipient's care, our agency has also provided back-up care when the primary direct service worker was unable to provide care for the recipient.

According to Medicaid recipient #4, the finding indicated the DSW had not been present at work at the time the auditors had arrived and the recipient indicated the direct service worker had not arrived yet and the direct service worker timesheet and service log reflected that she worked from 9:00am to 2:30pm. The direct service worker indicated she and the recipient had made plans for the direct service worker to shop for groceries and personal items prior to her attending the recipient's residence.

JABA Enterprises, LLC. upon hiring of staff and assessment of recipient during the intake process, to ensure the direct service worker and recipient do not reside in the same household the following measures are taken:

- 1) The recipient is required to fill out a client questionnaire document in which the recipient and/or recipient's authorized representative certifies by signature that the recipient and direct service worker do not live in the same household.
- 2) Performance evaluations are performed at the recipient's address.
- 3) A photocopy of the direct service workers driver's license is obtained upon hire and is required to update driver's license identification when expired. Our agency reviews the photocopy document to ensure the recipient and direct service worker do not reside in the same household. Due to cost restraints, our agency can not afford an extensive investigation or private investigator to ensure fraudulent activity, such as identifying false documents and, does not occur. This would have to be done for each employee. This preferred method of investigation would be a high priority of our agency but the expenditure is definitely not cost efficient.

According to finding of Medicaid recipient #6 that indicated the Direct Service Worker's municipal personnel file differed from the file obtained by the agency's file, our agency's file is updated annually, however the personnel files with the municipality may not have been updated. It is our agency's opinion that paperwork identified with the direct service worker having the same address as the recipient does not prove the direct service worker resides in the same household. It is possible that the direct service worker utilizes the same address for multiple reasons.

In accordance with finding indicating that JABA billed LDH for Medicaid services without prior authorization, the agency did not receive any reimbursement for services rendered. There are issues that arise from time to time in which recipients are granted an extension of services, but the prior authorization units are not computed correctly. As a result, our agency claims are denied. Another case in which our agency may bill for services rendered and the claim is denied is due to Medicaid ineligibility in which the provider is unaware when the recipient is deemed Medicaid ineligible. No communicated correspondence is provided to the provider or LDH in regard to the recipient no longer being eligible for Personal Care Attendant services due to Medicaid ineligibility. However, the prior authorization for the recipient displays the certification period. For example, a standard certification period is 18 months (January 1, 2018 to July 1, 2019), but once the recipient becomes Medicaid ineligible, the prior authorization remains the same and the provider continues to provide services until it is discovered after services are rendered that the claim was denied due to Medicaid ineligibility status. The provider is not reimbursed for services rendered; however, staff are compensated for services rendered which results in a monetary loss to the provider. Another error that occurs that results in billing overages is the initial intake of recipients the provider contacts SRI (Statistical Resources) for the beginning date of services and the provider is given a beginning date verbally. The provider begins services on the date provided by Affiliated Computer Services to begin services, but on several occasions the prior authorization submitted electronically displays services beginning at a later date resulting in monetary loss for the provider.

In regard to the findings of inadequate and/or inaccurate documentation for services rendered , the agency trained direct service workers on proper documentation during orientation and provided additional training through annual trainings. The agency heavily emphasizes to direct service workers to document services rendered inside and outside of the home indicating time and location of each activity. JABA Enterprises, LLC. prides itself on the fact that more than 90% of documentation by Direct Service Workers is adequate.

In reference to finding JABA not in Good standing with state agencies, the following action will be taken: The agency will review status with Louisiana Secretary of State and file report to update status and make current. The agency will make arrangements with Louisiana Workforce Commission to make current wages and reports due to the agency. Our agency experienced difficulty with Medicaid reimbursements deemed to our agency not received which placed our agency in financial strain and the agency had to meet payroll obligations. This issue existed for many months and the agency had to utilize other supplemental resources to meet monthly obligations causing a lack with others. Again, our agency will comply with Louisiana Workforce Commission requirements.

In conclusion, JABA Enterprises, LLC. would like to thank the Louisiana Legislative Auditor for conducting an investigation audit report. JABA Enterprises, LLC. is not a perfect agency, but we strive for excelling in providing quality personal care attendant services to the population and/or region we serve. Our agency prides itself on the fact that we provide over 90% efficiency of quality assurance of services rendered. Our agency is effective in implementing goals and objectives and attaining these goals and objectives with 95% efficiency. Our agency supplies staff (both direct service workers and administration) with all the necessary resources to make staff effective employees. JABA Enterprises, LLC. in all efforts is a team player and recognizes that each member of the team (provider, clients, administration, support coordinators, Affiliated Computer Services) plays a vital role in providing quality care to the recipients it serves. If one member of the team is insufficient, the whole team lacks. Therefore, it is vital for each member to carry its role and strive for 100% effectiveness. Our agency recognizes that there are some factors that are beyond our control but we try our best to decrease fraudulent activity as much as we possibly can through education and training. Conducting quarterly assessments on DSW performance and client satisfaction surveys are also useful methods of providing quality assurance. Our agency will continue to have effective communication with recipient, staff, support personnel and other entities in caring for recipients. Last, but not least, we thank God for giving us the opportunity to provide services to the community and surrounding communities and look forward to continuing to provide these services successfully with His guidance.

Documents to Support Written Responses

JABA ENTERPRISES, LLC

Employment Application (TYPE OR PRINT – BLACK INK ONLY)

APPLICANT INFORMATION

Last Name	First	M.I.	DOB
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain	
Do you have a second job?	YES <input type="checkbox"/> NO <input type="checkbox"/>	(IF YES, SUBMIT A COPY OF YOUR SCHEDULE TO JABA OFFICE)	

EDUCATION

High School	Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College	Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
GED	Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

REFERENCES (NO RELATIVES)

Please list three references.

Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

Revised 1/18

PREVIOUS EMPLOYMENT

Company Phone
Address Supervisor
Job Title Starting Salary \$ Ending Salary \$
Responsibilities
From To Reason for Leaving
May we contact your previous supervisor for a reference? YES NO

Company Phone
Address Supervisor
Job Title Starting Salary \$ Ending Salary \$
Responsibilities
From To Reason for Leaving
May we contact your previous supervisor for a reference? YES NO

Company Phone
Address Supervisor
Job Title Starting Salary \$ Ending Salary \$
Responsibilities
From To Reason for Leaving
May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE (OPTIONAL)

Branch From To
Rank at Discharge Type of Discharge
If other than honorable, explain

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature Date

*****OFFICE USE ONLY*****

INTERVIEWER QUESTIONNAIRE:

- | | | |
|--|------------------------------|-----------------------------|
| 1. HAVE YOU RECEIVED PERSONAL CARE SERVICES TRAINING?
*IF YES, YOU MUST PROVIDE PROOF OF TRAINING. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 2. HAVE YOU RECEIVED CPR/1 ST AID TRAINING?
*IF YES, YOU MUST PROVIDE PROOF OF CPR/1 ST AID TRAINING. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 3. DO YOU HAVE YOUR OWN TRANSPORTATION?
*IF YES, PLEASE PROVIDE DRIVER'S LICENSE, PROOF OF INSURANCE, REGISTRATION INFORMATION. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 4. ARE YOU RELATED TO THE RECIPIENT?
*IF YES, HOW ARE YOU RELATED?
*ARE YOU LIVING WITH THE RECIPIENT?
*IF NO, PLEASE PROVIDE PROOF OF RESIDENT? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 5. HAVE YOU REVIEWED THE JOB DESCRIPTION AND RESPONSIBILITIES?
*IF YES, PLEASE SIGN THE FORM.
*IF NO, PLEASE REVIEW AND SIGN. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 6. DO YOU HAVE A SECOND JOB?
IF YES, HAVE YOU SUBMITTED A COPY OF YOUR SCHEDULE TO OUR OFFICE?
IF NO, PLEASE SUBMIT A COPY OF YOUR SCHEDULE AS SOON AS POSSIBLE. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

INTERVIEWER COMMENTS: _____

JOB ASSIGNMENT: _____

SALARY: _____ **STARTING DATE:** _____

DIRECT SUPPORT WORKER SIGNATURE

DATE

INTERVIEWER'S SIGNATURE

DATE

JABA ENTERPRISES, INC.

DIRECT SERVICE WORKER DUTIES AND RESPONSIBILITIES

Direct Service Worker is those personnel whose responsibility is to manage, support, and provide Personal Care Services to individuals in PCS care. The individual must have a high school diploma, GED, or must be working toward a GED and/or certified as a nursing assistant with at least one year experience. The CSC will evaluate the PCA twice a year. The DSW staff will provide management, support, and personal care services based on individuals' daily needs. Activities of daily living (bathing, dressing, feeding, toileting, recreation and reinforcement of active treatment objectives) and/or instrumental activities of daily living are identified in the individual's Plan of Care. DSW staff will be expected to be competent in the principles of active treatment through in-service training.

Personal Care Services (PCS) are defined as:

- **Tasks that are medically necessary as they pertain to a recipient's physical requirements when physical limitations are due to illness or injury and necessitate assistance with eating, bathing, dressing, personal hygiene, bladder or bowel incontinence, ambulation, and transferring.**
- **Those services which prevent institutionalization and enable the recipient to be treated on an outpatient basis rather than an inpatient basis to an extent that services on an outpatient bases are projected to be more cost effective that services provided on an inpatient basis.(2007 Louisiana Medicaid Personal Care Services Manual)**

Personal Care Services that will be provided eligibles (recipients such as the elderly and the disabled) includes:

- **Basic personal care, toileting and grooming activities, including bathing, care of the hair and assistance with dressing, and assistance with ambulation.**
- **Assistance with bladder and/or bowel requirements or problems, including helping client to and from the bathroom or assisting the client with bedpan routines, but excluding catheterization.**
- **Assistance with eating and food, nutrition and diet activities, including preparation of meals (for the recipient only).**
- **Accompanying the recipient to and from his/her physician and/or medical facility for necessary medical services.**

- **Performance of incidental household services, for the recipient only, not the entire household, which are essential to the recipient's health and comfort in his/her home. Examples are:**
 - **Changing and washing the recipient's bed linen**
 - **Rearranging furniture to enable the client to move about more easily in his/her own room**
 - **Clean up of meal preparation(for the recipient only)**
- **Companionship when granted through the program.**

Direct Services Worker is also responsible for:

- **Legible documentation for services provided (Black or Blue ink only)**
- **Submitting documentation in a timely manner (Late documentation will be subjected to penalty.**
- **Adhere to work time schedule.**
- **Reporting to office all incidents pertaining to clients and absences from work (forms are provided).**
- **Accuracy of services provided (No fraudulent activity)**
- **Proper attire**
- **Confidentiality of client personal and medical information**
- **Maintenance of client's binder of services provided**
-

I, _____, understand the duties and responsibilities of the Direct Service Worker and agree to follow the duties and responsibilities as stated by JABA Enterprises , Inc.

Employee Signature

Date

Witness

Date

JABA ENTERPRISES, LLC.

P. O. Box 227
Franklin, Louisiana 70538

Region III Office
1803 Main Street
Franklin, Louisiana 70538
Phone: (337)413-1717 Fax:(337)413-1718

Region IV Office
1416 Main Street
Jeanerette, Louisiana 70544
Phone:(337)276-5248 Fax: (337)276-34579

DIRECT SERVICE WORKER (DSW) ORIENTATION TRAINING 32-HOUR SERVICE CURRICULUM

Trainee Name: _____ Trainer Name: _____

Date Training Began: _____ Date Training Ended: _____

Location of Training _____ Hours of Training: _____

Registration/Overview/Introduction.....

CURRICULA:

HOURS

- | | |
|--|-------|
| 1. Company's Policies and Procedures..... | _____ |
| 2. Employee Duties and Responsibilities..... | _____ |
| 3. Effective Communication..... | _____ |
| 4. ADLs and IADLs Care..... | _____ |
| 5. Abuse/Neglect/Misappropriation of Property..... | _____ |
| 6. Staff Ethics..... | _____ |
| 7. Human and Civil Rights..... | _____ |
| 8. Confidentiality and HIPAA..... | _____ |
| 9. Person-Centered Planning/Personal Outcomes/Self-Determination Philosophy..... | _____ |
| 10. Incident Documentation and Reporting..... | _____ |
| 11. Documentation of Services..... | _____ |
| 12. Environmental Emergency Procedures..... | _____ |
| 13. Infection Control/Universal Precautions..... | _____ |
| 14. Ethics and Confidentiality..... | _____ |

REVIEW OF TOPICS..... 1

TESTING..... 2

TEST SCORES: TEST 1 _____ TEST 2 _____ RESULTS: _____ PASSED _____ FAILED

Trainee Signature _____

Date _____

Evaluator Signature _____

Date _____

JABA ENTERPRISES, LLC.

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Phone:(337)276-5248 Fax: (337)276-34579

**DIRECT SERVICE WORKER (DSW)
ORIENTATION TRAINING
8-HOUR SERVICE CURRICULUM**

Trainee Name: _____ Trainer Name: Jacqueline Francis/Antigone Anthony

Date Training Began: _____ Date Training Ended: _____

Location of Training _____ Hours of Training: _____

Registration/Overview/Introduction.....

CURRICULA:

1. Company's Policies and Procedures.....
2. Employee Duties and Responsibilities.....
3. Effective Communication.....
4. ADLs and IADLs Care.....
5. Abuse/Neglect/Misappropriation of Property.....
6. Staff Ethics.....
7. Human and Civil Rights.....
8. Confidentiality and HIPAA.....
9. Person-Centered Planning/Personal Outcomes/Self-Determination Philosophy.....
10. Incident Documentation and Reporting.....
11. Documentation of Services.....
12. Environmental Emergency Procedures.....
13. Infection Control/Universal Precautions.....
14. Ethics and Confidentiality.....

REVIEW OF TOPICS.....

Trainee Signature _____

Date _____

Evaluator Signature _____

Date _____

JABA ENTERPRISES, LLC

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808 Main Street
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Phone:(337)276-5248 Fax:(337)276-3457

JABA ENTERPRISES, LLC FRAUDULENT ACTIVITY POLICY

I, _____ have been explained the policy of JABA Enterprises, LLC regarding fraudulent activity. The agency has ZERO tolerance for fraudulent activity and documentation. I fully understand that if I engage in a fraudulent act, I am subject to termination, a fine (contingent upon the amount of money owed) and/or jail time (depending upon how severe the act). Fraudulent act(s) include:

1. Not completing assigned tasks as identified on the log sheets (Ex. If you initial a task and have not done it).
2. Leaving your recipient alone during services hours and not completing a Leave of Absence Form.
3. Working with multiple recipients at the same time-different locations, and not reporting a second job status to JABA offices.
4. Leaving the job site before the shift is completed.

(Remember: CLIENTS DO NOT HAVE THE AUTHORITY TO END YOUR SHIFT.)

Employee Signature

Date

JABA Authorized Personnel

Date

JABA ENTERPRISES, LLC.
JUSTIFICATION OF NON-SERVICE FORM

RECIPIENT NAME: _____ **RECIPIENT #** _____

TYPE OF SERVICE: _____ **DATE OF REQUEST:** _____

TIME ALLOTTED: _____

REASONS: _____

CLIENT/FAMILY SIGNATURE

DATE

JABA REPRESENTATIVE SIGNATURE

DATE

AUTHORIZED REPRESENTATIVE SIGNATURE

DATE

JABA ENTERPRISES, LLC.

P. O. Box 227
Franklin, Louisiana 70538

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Jeanerette, Louisiana 70544
Phone:337)276-5248 Fax: (337)276-3457

JABA ENTERPRISES, INC. JUSTIFICATION OF SCHEDULE CHANGE IN SERVICE FORM

Recipient Name:	Recipient ID#:
Service(s) Provided:	Date of Request:
Time Allotted: (Identify day or weekly hours)	

Reason(s):
(See Schedule Below)

SCHEDULE CHANGE		
DAY	TIME	TOTAL HOURS /DAY
M		
Tu		
W		
Th		
F		
Sa		
Su		
Total Weekly Hours = _____		

JABA Representative Signature

Date

Recipient Signature

Date

Direct Support Worker Signature

Date

Revised: 01/12/2016

JABA ENTERPRISES, LLC.

P. O. Box 227
Franklin, Louisiana 70538

Region III Office

1803 Main Street
Franklin, Louisiana 70538
Phone: (337)413-1717 Fax:337)413-1718

Region IV Office

1416 Main Street
Jeanerette, Louisiana 70544
Phone:337)276-5248 Fax: (337)276-3457

**JABA ENTERPRISES LLC
LEAVE OF ABSENCE REQUEST FORM**

EMPLOYEE NAME: _____

DATE(S) REQUESTED: _____

CLIENT NAME _____

SERVICE: EPSDT LTPC N.O.W. SUPPORT WAIVER

COMMUNITY CHOICE (PAS) CHILDREN'S CHOICE (CC)

REASON FOR LEAVE: MEDICAL EMERGENCY VACATION PERSONAL

DATE RETURNING TO WORK: _____

SERVICES PROVIDED: SUBSTITUTE NATURAL SUPPORT

(IF SUBSTITUTE IS REQUESTED, GIVE INSTRUCTIONS: _____

_____.

EMPLOYEE SIGNATURE _____ **DATE:** _____

EMPLOYER USE ONLY

LEAVE REQUEST APPROVED DENIED

APPROVAL INFORMATION/COMMENTS: _____

_____.

EMPLOYER SIGNATURE: _____ **DATE** _____

Revised: 6/18/2014

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DIRECT SUPPORT WORKER PERFORMANCE EVALUATION FORM

CLIENT NAME: _____
EVALUATOR(S): _____

DATE: _____
DSW: _____
OTHER(s): _____ (Family)
_____ (Family)
_____ (SC)

RATE THE SERVICES: 4=Excellent 3=Good 2=Fair 1=Poor

I. **DUTIES AND RESPONSIBILITIES**

Skills	Rating	Comments (Optional)
Client/family is pleased with the services provided	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	
DSW performs all duties and responsibilities required	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	
DSW follows daily schedule: report to work on time, report/calls recipient if late, adjust daily schedule if late	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	
DSW adheres to service plan identified in the Plan of Care Completes Justification Form if changes occur	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	
Good rapport is observed (during evaluation) and is witnessed by others	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	
DSW has a positive attitude toward recipient and duties	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	
DSW appearance during work hours	<input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	

II. **CLIENT BINDER & PAPERWORK**

Skills	Rating	Comments (Optional)
Recipient's Binder was present in the home	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Recipient's Binder was up-to-date	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Recipient's documents were signed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Recipient is aware of where the binder is stored in the home	<input type="checkbox"/> Yes <input type="checkbox"/> No	

III. DOCUMENTATION

Skills	Rating	Comments (Optional)
Recipient/Personal Representative is signing weekly log notes/time sheets (Personal Representative is identified on Plan of Care)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
DSW is utilizing the sample copy when doing the paperwork	<input type="checkbox"/> Yes <input type="checkbox"/> No	
DSW is filling in time (arrival/departure) accurately and in a timely manner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
DSW is filling out the hospitalization form and reporting ER and hospital visits immediately. A copy of the discharge paper w/instructions is brought to the office upon release.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
DSW is reporting all incidents and filling out an Incident Report Form in a timely manner (WAIVER ONLY)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
DSW is reporting all changes in Recipient's medical diagnosis and reporting revisions needed in the POC/ISP.		

IV. EVALUATOR'S RATING AND RECOMMENDATIONS

The performance rating is: Satisfactory Unsatisfactory

Recommendation(s); _____

The information obtained by this evaluator was compiled on this _____ (day) of the month _____ in the year _____ in the Parish of _____, Region _____ of the State of Louisiana.

 Evaluator JABA Enterprises, LLC

 Date

 Recipient

 Date

 Witness/Other in Attendance

 Date

Revised:10/17

April Foulcard

April Foulcard

1/16/18

Date

Berwick Francis

Berwick Francis

1/16/18

Date

Jacqueline Francis

Jacqueline Francis

1/16/18

Date

Antigone Anthony

Antigone Anthony

1/16/18

Date