

## **CAPA Public Policy on IHSS Fraud**

The California In-Home Supportive Services (IHSS) Program was designed for people of all ages who need assistance to live safely in their own homes and to be independent in their chosen communities, thereby delaying and/or preventing them from being placed in an institution in order to receive services. The IHSS program is accomplishing these goals for the 440,000 individuals who have now been authorized to use its services. Both IHSS consumers and workers acclaim the program and attest to its positive effect on the quality of their lives and those of their family members. The number of people living in California nursing homes is steadily decreasing, largely as a result of this community-based assistance.

Program regulations and practices are meant to assure that only those who need IHSS are authorized to receive service hours. Regulatory provisions include: physician verification of physical or mental disability, a social worker's initial in-home assessment and ongoing reassessments, social worker training to identify malingering and possible fraud, guidelines to achieve consistency in authorization of IHSS hours based on each consumer's need for assistance with specified tasks, consumer and worker education regarding fraud prevention, and procedures to report suspicious conduct. Because of these provisions and the fact that, on the whole, both consumers and workers are honest Californians, the incidence of suspected fraud in IHSS is low. Even officials pursuing isolated cases note that fraud is not rampant within IHSS and realize that exaggerations of its incidence could harm innocent consumers and their committed home care workers.

No program designed by human beings – private or public – is 100% free of problems. In all practicality, neither IHSS nor any other publicly funded program can be devoid of all fraud. The suggestion that, simply because this is a large government program, people will take advantage of it is demeaning to the vast majority of the 760,000 IHSS consumers and workers now directly participating in this program. Nonetheless, CAPA fully agrees that any purposeful behavior that damages the integrity of the IHSS Program – such as feigning a disability, or submitting timesheets either for hours not worked or for an individual after their death - cannot be tolerated.

Whenever allegations of fraud are ignored, all stakeholders in the IHSS program suffer. However, shifting limited resources for the investigation or prosecution of exaggerated claims about IHSS fraud has the potential to harm the IHSS Program by reducing needed funding for its direct services.

While CAPA supports concerted efforts to investigate and eliminate fraud, we also exhort the public and the Legislature to remember that IHSS is a very large and highly successful program. Through the course of 2009, it will directly affect the lives of over 1,000,000 Californians and their family members. It is a model for the rest of the nation, as we consider how to improve long term care and put in place improved long term services and support programs. The idea that IHSS is "lax" and provides too great an "opportunity for fraud" negates the fundamental fact that even when given an opportunity to commit a crime, most people will not do so. This fact is especially true for the IHSS consumer who stands to lose services when there is a misperception that IHSS is a public program that people can too easily scam.

CAPA opposes changes that do not build on the strengths of IHSS, but merely add paperwork or procedures that create the illusion of increased accountability and do nothing to improve the quality or integrity of the IHSS program. California needs and CAPA will support solutions that reflect an understanding of how this successful model works and that do not create unnecessary burdens on all involved in delivering IHSS while siphoning funds away from its critically needed direct services.

*Approved by the CAPA Board of Directors*

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