



## PENINSULA RSN

### ADMINISTRATION POLICIES AND PROCEDURES

**Policy Name:** MANAGEMENT ATTESTATION OF ACCURACY OF FISCAL REPORTS

**Policy Number:** 8.04

**Reference:** 42 CFR 438; DSHS Contract

**Effective Date:** 10/2005

**Revision Date(s):** 12/2007

**Approved by:** PRSN Executive Board

#### CROSS REFERENCES

- Policy: Corrective Action Plan

#### PURPOSE

To ensure that required Fiscal reports submitted by the Peninsula Regional Support Network (PRSN) to the Department are complete and accurate.

#### PROCEDURE

##### Certification Requirements

1. The Peninsula Regional Support Network (PRSN) must submit a completed certification form with each Revenue and Expenditure report submitted to the Department.
  - The form is completed and signed by the PRSN Administrator
2. The PRSN must submit a completed certification form with each Revenue and Expenditure report submitted to Department which certifies the availability of local match that was utilized to draw down additional Federal Medicaid funds.
  - The form is completed and signed by the PRSN Administrator

##### Management Review

Fiscal reports developed by the PRSN are reviewed for accuracy and completeness prior to submission to the Department.

1. Fiscal data is gathered by the PRSN administrator from network providers
2. Data regarding availability of local match is gathered from network providers
  - Providers each certify the availability of local match claimed.

#### Reporting Procedure

1. The PRSN Administrator compiles information necessary to complete the Revenue and Expenditure report from information gathered from network providers
2. The Administrator includes information regarding PRSN Administrative expenses and expenditures to non-network providers
3. Completed report is reviewed for accuracy and provided to state along with required certification.

#### **MONITORING**

This policy is a mandate by statute and contract.

1. This policy will be monitored through use of PRSN:
  - Semi-annual Provider Revenue and Expense Report
  - Reports are tracked over time for consistency, with significant variances followed up on by the PRSN Administrator.
2. If a provider performs below expected standards, a Corrective Action Plan will be required for PRSN approval. Reference PRSN Corrective Action Plan Policy