

Self-Determination Program (SDP) Financial Management Service (FMS) Provider Review Tool

**Part 1: To be completed by entity applying for SDP FMS vendorization**

Name of Entity Applying for SDP FMS Vendorization:				
Date of Review:		Reviewing Regional Center:		
Requirement	Page Number in Attached Document(s)			Comments
	Policy	Procedure	Internal Control	
<i>Example Requirement</i>	<i>Page 10</i>	<i>Page 10</i>	<i>Page 11</i>	<i>Comments related to requirement, location in attached document(s), etc.</i>
<b>Documentation that the entity is not on any state or federal ineligibility list:</b>				
Not on the list of U.S. Department of Health and Human Services Office of Inspectors' General (OIG) List of Excluded Individuals/Entities.				
Not on the Department of Health Care Services (DHCS) Medical Suspended and Ineligible Provider List of persons.				
Does not contain the exclusion criteria identified in Title 17, Section 54311(a)(6).				
<b>Documentation of minimum staff qualifications:</b>				
Entity contains a certified payroll professional, a certified public accountant or an individual with a bachelor's degree in accounting that has experience processing payroll, withholding, filing and payment of applicable federal, state and local employment related taxes and insurance.				
Entity has previous professional experience working within the human services delivery system.				

<b>Documentation of fiscal solvency requirements:</b>				
Entity demonstrates initial financial solvency as evidenced by documentation of an available line of credit or a cash or capital reserve of at least \$500,000.				
Entity provides documentation of liability insurance policies against losses including fraud, theft, errors and omission, and business interruption with coverage limits required by the regional center.				
Entity provides a copy of their policy, procedure and internal control demonstrating the methodology for determining their fiscal ability to meet continued financial solvency for at least 6 payroll cycles.				
<b>Additional FMS policy requirements:</b>				
Establishes a customer service policy that includes timelines for receiving, tracking, and responding to calls, emails, mail, and other correspondence.				
Monitors and implements changes in accordance with regulations, statutes, and guidance from state and federal agencies.				
Educates participant-employers about the employer's responsibilities regarding hiring, managing and terminating staff.				
Verifies that all goods and services in the spending plan are allowable under federal Medicaid criteria and the <a href="#">SDP Waiver</a> .				
Verifies provider qualifications specific to the type of service being provided as defined by the <a href="#">SDP Waiver</a> .				

<p>Follows the employer burden requirements and approval process as detailed in the <a href="#">April 2024 Employer Burden &amp; Other Employment Related Costs Directive</a> and bill in accordance with the Department approved employer burden costs and provides detailed description of other employment related costs.</p>				
<p>Verifies accuracy of receipts and invoices as described in SDP billing directives, including: <a href="#">April 2024 Billing Requirements Directive</a>, <a href="#">January 2024 Updated Billing Requirements for Services Directive</a>, and <a href="#">December 2023 Billing Requirements for Services Directive</a>, as well as compliance with the participant's individual program, spending plan and SDP program rules.</p>				
<p>Makes purchases and submits invoices for only those services and supports identified in the participant's individual program plan and spending plan.</p>				
<p>Processes payroll, withholding, filing and payment of applicable federal, state and local employment related taxes and insurance in accordance with applicable California labor laws.</p>				
<p>Submits monthly expenditure reports on behalf of the participant to both the participant and regional center by the 15th of each month.</p>				
<p>Identifies and reports all suspected incidents of abuse, neglect or financial exploitation to the appropriate authority which may include, but is not limited to: <a href="#">Adult Protective Services (APS)</a> or <a href="#">Child Protective Services (CPS)</a>.</p>				
<p>Identifies and reports all suspected incidents of fraud, waste, and abuse to the appropriate authority in accordance with the <a href="#">CMS guidelines</a>.</p>				
<p>Establishes and maintains a formal disaster recovery and business continuity plan that describes how business operations, including vendor payments and payroll will continue in the event of a natural disaster, severe weather, or unexpected event.</p>				

**Part 2: To be completed by vendor regional center**

Name of Entity Applying for SDP FMS Vendorization:				
Date of Review:		Reviewing Regional Center:		
Requirement	<b>Reviewing Criteria</b> (+) = satisfactory (-) = unsatisfactory (N/A) = not applicable			Comments
	Policy	Procedure	Internal Control	
<i>Example requirement</i>	+	-	N/A	<i>Comments related to reasoning behind +, -, N/A and the requirement</i>
<b>Documentation that the entity is not on any state or federal ineligibility list:</b>				
Not on the list of U.S. Department of Health and Human Services Office of Inspectors' General (OIG) List of Excluded Individuals/Entities.				
Not on the Department of Health Care Services (DHCS) Medical Suspended and Ineligible Provider List of persons.				
Does not contain the exclusion criteria identified in Title 17, Section 54311(a)(6).				
<b>Documentation of minimum staff qualifications:</b>				
Entity contains a certified payroll professional, a certified public accountant or an individual with a bachelor's degree in accounting that has experience processing payroll, withholding, filing and payment of applicable federal, state and local employment related taxes and insurance.				
Entity has previous professional experience working within the human services delivery system.				

<b>Documentation of fiscal solvency requirements:</b>				
Entity demonstrates initial financial solvency as evidenced by documentation of an available line of credit or a cash or capital reserve of at least \$500,000.				
Entity provides documentation of liability insurance policies against losses including fraud, theft, errors and omission, and business interruption with coverage limits required by the regional center.				
Entity provides a copy of their policy, procedure and internal control demonstrating the methodology for determining their fiscal ability to meet continued financial solvency for at least 6 payroll cycles.				
<b>Additional FMS policy requirements:</b>				
Establishes a customer service policy that includes timelines for receiving, tracking, and responding to calls, emails, mail, and other correspondence.				
Monitors and implements changes in accordance with regulations, statutes, and guidance from state and federal agencies.				
Educates participant-employers about the employer's responsibilities regarding hiring, managing and terminating staff.				
Verifies that all goods and services in the spending plan are allowable under federal Medicaid criteria and the <a href="#">SDP Waiver</a> .				
Verifies provider qualifications specific to the type of service being provided as defined by the <a href="#">SDP Waiver</a> .				
Follows the employer burden requirements and approval process as detailed in the <a href="#">April 2024 Employer Burden &amp; Other Employment Related Costs Directive</a> and bill in accordance with				

the Department approved employer burden costs and provides detailed description of other employment related costs.				
Verifies accuracy of receipts and invoices as described in SDP billing directives, including: <a href="#">April 2024 Billing Requirements Directive</a> , <a href="#">January 2024 Updated Billing Requirements for Services Directive</a> , and <a href="#">December 2023 Billing Requirements for Services Directive</a> , as well as compliance with the participant's individual program, spending plan and SDP program rules.				
Makes purchases and submits invoices for only those services and supports identified in the participant's individual program plan and spending plan.				
Processes payroll, withholding, filing and payment of applicable federal, state and local employment related taxes and insurance in accordance with applicable California labor laws.				
Submits monthly expenditure reports on behalf of the participant to both the participant and regional center by the 15th of each month.				
Identifies and reports all suspected incidents of abuse, neglect or financial exploitation to the appropriate authority which may include but is not limited to: <a href="#">Adult Protective Services (APS)</a> or <a href="#">Child Protective Services (CPS)</a> .				
Identifies and reports all suspected incidents of fraud, waste, and abuse to the appropriate authority in accordance with the <a href="#">CMS guidelines</a> .				
Establishes and maintains a formal disaster recovery and business continuity plan that describes how business operations, including vendor payments and payroll will continue in the event of a natural disaster, severe weather, or unexpected event.				