



**AUDIT OF THE  
WESTSIDE REGIONAL CENTER  
FOR FISCAL YEARS 2014-15 AND 2015-16**

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**Department of Developmental Services**

**May 17, 2019**

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# EXECUTIVE SUMMARY

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The Department of Developmental Services (DDS) conducted a fiscal compliance audit of Westside Regional Center (WRC) to ensure WRC is compliant with the requirements set forth in the Lanterman Developmental Disabilities Services Act and Related Laws/Welfare and Institutions (W&I) Code; the Home and Community-Based Services (HCBS) Waiver for the Developmentally Disabled; California Code of Regulations (CCR), Title 17; Federal Office of Management and Budget (OMB) Circulars A-122 and A-133; and the contract with DDS. Overall, the audit indicated that WRC maintains accounting records and supporting documentation for transactions in an organized manner.

The audit period was July 1, 2014, through June 30, 2016, with follow-up, as needed, into prior and subsequent periods. This report identifies some areas where WRC's administrative and operational controls could be strengthened, but none of the findings were of a nature that would indicate systemic issues or constitute major concerns regarding WRC's operations. A follow-up review was performed to ensure WRC has taken corrective action to resolve the findings identified in the prior DDS audit report.

## **Findings that need to be addressed.**

### **Finding 1: Over/Understated Claims**

The review of the operational indicator reports revealed WRC made duplicate and incorrect payment adjustments to three vendors related to the July 1, 2014, minimum wage increase. This resulted in over- and under-payments totaling \$51,300.74 and \$826.03 respectively. In addition, the sample review of 122 POS vendor files revealed WRC reimbursed two vendors at incorrect rates. This resulted in overpayments totaling \$89,698.33.

The total over- and under-stated claims are \$173,106.21 and \$826.03 respectively. This is not in compliance with CCR, Title 17, Sections 54326(a)(12) and 57300(c)(2).

WRC provided additional documentation with its response which resolved and/or modified the over- and under-stated totals. WRC remains with over- and under-payments totaling \$48,493.46 and \$1,748.69, respectively.

### **Finding 2: Unsupported Credit Card Expenditures**

The review of WRC's operational expenditures revealed 38 credit card transactions totaling \$7,284.45 that were missing receipts and five credit card transactions totaling \$199.29 that did not have detailed receipts for the

purchased items. This resulted in a total of \$7,483.74 in unsupported credit card expenditures. This is not in compliance with WRC's Credit Card Policy.

**Finding 3: Family Cost Participation Program**

**A. Overstated Share of Cost**

The sample review of 21 FCPP consumer files revealed that WRC has been paying the cost of services for two consumers that are the responsibility of their families. WRC paid above its share of cost for respite services to two vendors, resulting in overpayments totaling \$383.29. This is not in compliance with CCR, Title 17, Section 50255(a).

**B. Late Assessments (Repeat)**

The sample review of 21 Family Cost Participation Program (FCPP) consumer files revealed 15 instances where WRC did not assess the parent's share of cost participation as part of the consumer's Individual Program Plan (IPP) or Individualized Family Service Plan (IFSP) review. The assessments were completed 20 days or more after the signing of the IPP or IFPS. This issue was identified in the prior audit report. This is not in compliance with W&I Code, Section 4783(g)(1)(A)(B)(C)

**C. Late Notification**

The sample review of 21 FCPP consumer files revealed four families were not notified of their assessed share of cost within 10 days of receiving the income documentation. This is not in compliance with W&I Code, Section 4783(g)(3).

**Finding 4: Equipment Inventory**

**A. Physical Inventory**

WRC was unable to provide documentation support that a comprehensive inventory of its equipment was conducted within the last three years. This is not in compliance with the State's Equipment Management Guidelines, Section III and the State Administrative Manual (SAM) 8652.

**B. Missing Equipment**

A sample of 43 items selected for testing from WRC's equipment inventory list revealed two items (portable cooler, state tag number 00370111, and iPad, state tag number 00370144) could not be located. This is not in compliance with State Contract, Article IV, Section 4(a) and the State's Equipment Management System Guidelines, Section III (E).

### **C. Gifting of State Property**

The review of WRC's equipment list of disposed items revealed WRC gifted an iPad with a retail value of \$729.99 to a Board member at the request of the Executive Director. WRC then surveyed out the iPad using disposition code 4 on the Property Survey Report that indicates the item was either lost, stolen, or destroyed. This is not in compliance with the California Constitution, Article 16, Section 6.

#### **Finding 5: Improper Allocation of Community Placement Plan Funds**

The review of the Community Placement Plan (CPP) claims revealed that WRC improperly allocated CPP funds to 39 consumers who did not move from the Developmental Centers to the community in Fiscal Years (FYs) 2014-15 and 2015-16. This resulted in an improper allocation of CPP funds totaling \$1,680,621.18. In addition, WRC provided services to seven CPP consumers beyond their initial fiscal year of placement totaling \$762,634.65.

The total improper allocation of CPP funds totaled \$2,443,255.83. This is not in compliance with W&I Code, Section 4418.25(d) and (e), State Contract, Exhibit E, and the DDS Guidelines for Regional Center Community Placement Plan (III)(A).

#### **Finding 6: Annual Family Program Fee**

The review of the Annual Family Program Fee (AFPF) revealed that WRC did not conduct any AFPF assessments in FYs 2014-15 and 2015-16. This is not in compliance with W&I Code, Section 4785 (a)(1) and the DDS AFPF Program Fee Procedures II.B.

#### **Finding 7: The Achievable Foundation - In-Kind Services (Repeat)**

The review of WRC's in-kind services agreement with The Achievable Foundation revealed that three WRC employees provided administrative services to The Achievable Foundation; however, WRC had no records to support what type of in-kind services were received as payment for the administrative services provided to the Achievable Foundation. This issue was noted in the prior audit report. This is not in compliance with the State Contract, Article III, Section 13(b).

## BACKGROUND

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DDS is responsible, under the W&I Code, for ensuring that persons with developmental disabilities (DD) receive the services and supports they need to lead more independent, productive, and integrated lives. To ensure that these services and supports are available, DDS contracts with 21 private, nonprofit community agencies/corporations that provide fixed points of contact in the community for serving eligible individuals with DD and their families in California. These fixed points of contact are referred to as regional centers (RCs). The RCs are responsible under State law to help ensure that such persons receive access to the programs and services that are best suited to them throughout their lifetime.

DDS is also responsible for providing assurance to the Department of Health & Human Services, Centers for Medicare and Medicaid Services (CMS), that services billed under California's HCBS Waiver program are provided and that criteria set forth for receiving funds have been met. As part of DDS' program for providing this assurance, the Audit Section conducts fiscal compliance audits of each RC no less than every two years, and completes follow-up reviews in alternate years. Also, DDS requires RCs to contract with independent Certified Public Accountants (CPAs) to conduct an annual financial statement audit. The DDS audit is designed to wrap around the independent CPA's audit to ensure comprehensive financial accountability.

In addition to the fiscal compliance audit, each RC will also be monitored by the DDS Federal Programs Operations Section to assess overall programmatic compliance with HCBS Waiver requirements. The HCBS Waiver compliance monitoring review has its own criteria and processes. These audits and program reviews are an essential part of an overall DDS monitoring system that provides information on RCs' fiscal, administrative, and program operations.

DDS and Coastal Developmental Services Foundation, Inc. (CDSFI) entered into State Contract HD099003, effective July 1, 2014, through June 30, 2021. This contract specifies that CDSFI will operate an agency known as WRC to provide services to individuals with DD and their families in the Inglewood and Santa Monica West County Health Districts. The contract is funded by state and federal funds that are dependent upon WRC performing certain tasks, providing services to eligible consumers, and submitting billings to DDS.

This audit was conducted at WRC from July 25, 2016, through August 25, 2016, by the Audit Section of DDS.

## **AUTHORITY**

The audit was conducted under the authority of the W&I Code, Section 4780.5 and Article IV, Section 3 of the State Contract between DDS and WRC.

## **CRITERIA**

The following criteria were used for this audit:

- W&I Code,
- “Approved Application for the HCBS Waiver for the Developmentally Disabled,”
- CCR, Title 17,
- OMB Circulars A-122 and A-133, and
- The State Contract between DDS and WRC, effective July 1, 2009.

## **AUDIT PERIOD**

The audit period was July 1, 2014, through June 30, 2016, with follow-up, as needed, into prior and subsequent periods.



## OBJECTIVES, SCOPE, AND METHODOLOGY

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This audit was conducted as part of the overall DDS monitoring system that provides information on RCs' fiscal, administrative, and program operations. The objectives of this audit were:

- To determine compliance with the W&I Code,
- To determine compliance with the provisions of the HCBS Waiver Program for the Developmentally Disabled,
- To determine compliance with CCR, Title 17 regulations,
- To determine compliance with OMB Circulars A-122 and A-133, and
- To determine that costs claimed were in compliance with the provisions of the State Contract between DDS and WRC.

The audit was conducted in accordance with the Generally Accepted Government Auditing Standards issued by the Comptroller General of the United States. However, the procedures do not constitute an audit of WRC's financial statements. DDS limited the scope to planning and performing audit procedures necessary to obtain reasonable assurance that WRC was in compliance with the objectives identified above. Accordingly, DDS examined transactions on a test basis to determine whether WRC was in compliance with the W&I Code; the HCBS Waiver for the Developmentally Disabled; CCR, Title 17; OMB Circulars A-122 and A-133; and the State Contract between DDS and WRC.

DDS' review of WRC's internal control structure was conducted to gain an understanding of the transaction flow and the policies and procedures, as necessary, to develop appropriate auditing procedures.

DDS reviewed the audit report that was conducted by an independent CPA firm for FY 2014-15, issued on March 31, 2016. It was noted that no management letter was issued for WRC. This review was performed to determine the impact, if any, upon the DDS audit and, as necessary, develop appropriate audit procedures.

The audit procedures performed included the following:

**I. Purchase of Service**

DDS selected a sample of POS claims billed to DDS. The sample included consumer services and vendor rates. The sample also included consumers who were eligible for the HCBS Waiver Program. For POS claims, the following procedures were performed:

- DDS tested the sample items to determine if the payments made to service providers were properly claimed and could be supported by appropriate documentation.
- DDS selected a sample of invoices for service providers with daily and hourly rates, standard monthly rates, and mileage rates to determine if supporting attendance documentation was maintained by WRC. The rates charged for the services provided to individual consumers were reviewed to ensure compliance with the provision of the W&I Code; the HCBS Waiver for the Developmentally Disabled; CCR, Title 17, OMB Circulars A-122 and A-133; and the State Contract between DDS and WRC.
- DDS selected a sample of individual Consumer Trust Accounts to determine if there were any unusual activities and whether any account balances exceeded \$2,000, as prohibited by the Social Security Administration. In addition, DDS determined if any retroactive Social Security benefit payments received exceeded the \$2,000 resource limit for longer than nine months. DDS also reviewed these accounts to ensure that the interest earnings were distributed quarterly, personal and incidental funds were paid before the 10th of each month, and proper documentation for expenditures was maintained.
- The Client Trust Holding Account, an account used to hold unidentified consumer trust funds, was tested to determine whether funds received were properly identified to a consumer or returned to the Social Security Administration in a timely manner. An interview with WRC staff revealed that WRC has procedures in place to determine the correct recipient of unidentified consumer trust funds. If the correct recipient cannot be determined, the funds are returned to the Social Security Administration or other sources in a timely manner.
- DDS selected a sample of Uniform Fiscal Systems (UFS) reconciliations to determine if any accounts were out of balance or if there were any outstanding items that were not reconciled.
- DDS analyzed all of WRC's bank accounts to determine whether DDS had signatory authority, as required by the State Contract with DDS.

- DDS selected a sample of bank reconciliations for Operations (OPS) accounts and Consumer Trust bank accounts to determine if the reconciliations were properly completed on a monthly basis.

## **II. Regional Center Operations**

DDS selected a sample of OPS claims billed to DDS to determine compliance with the State Contract. The sample included various expenditures claimed for administration that were reviewed to ensure WRC's accounting staff properly input data, transactions were recorded on a timely basis, and expenditures charged to various operating areas were valid and reasonable. The following procedures were performed:

- A sample of the personnel files, timesheets, payroll ledgers, and other support documents were selected to determine if there were any overpayments or errors in the payroll or the payroll deductions.
- A sample of OPS expenses, including, but not limited to, purchases of office supplies, consultant contracts, insurance expenses, and lease agreements were tested to determine compliance with CCR, Title 17, and the State Contract.
- A sample of equipment was selected and physically inspected to determine compliance with requirements of the State Contract.
- DDS reviewed WRC's policies and procedures for compliance with the DDS Conflict of Interest regulations, and DDS selected a sample of personnel files to determine if the policies and procedures were followed.

## **III. Targeted Case Management (TCM) and Regional Center Rate Study**

The TCM Rate Study determines the DDS rate of reimbursement from the federal government. The following procedures were performed upon the study:

- Reviewed applicable TCM records and WRC's Rate Study. DDS examined the months of April 2015 and April 2016 and traced the reported information to source documents.
- Reviewed WRC's TCM Time Study. DDS selected a sample of payroll timesheets for this review and compared timesheets to the Case Management Time Study Forms (DS 1916) to ensure that the forms were properly completed and supported.

#### **IV. Service Coordinator Caseload Survey**

Under W&I Code, Section 4640.6(e), RCs are required to provide service coordinator caseload data to DDS. The following average service coordinator-to-consumer ratios apply per W&I Code Section 4640.6(c):

- “(c) Contracts between the department and regional centers shall require regional centers to have service coordinator-to-consumer ratios, as follows:
- (1) An average service coordinator-to-consumer ratio of 1 to 62 for all consumers who have not moved from the developmental centers to the community since April 14, 1993. In no case shall a service coordinator for these consumers have an assigned caseload in excess of 79 consumers for more than 60 days.
  - (2) An average service coordinator-to-consumer ratio of 1 to 45 for all consumers who have moved from a developmental center to the community since April 14, 1993. In no case shall a service coordinator for these consumers have an assigned caseload in excess of 59 consumers for more than 60 days.
  - (3) Commencing January 1, 2004, the following coordinator-to-consumer ratios shall apply:
    - (A) All consumers three years of age and younger and for consumers enrolled in the Home and Community-based Services Waiver program coordinator-to-consumer ratio of 1 to 62.
    - (B) All consumers who have moved from a developmental center to the community since April 14, 1993, and have lived continuously in the community for at least 12 months, an average service coordinator-to-consumer ratio of 1 to 62.
    - (C) (C) All consumers who have not moved from the developmental centers to the community since April 14, 1993, and who are not described in sub paragraph (A), an average service coordinator-to-consumer ratio of 1 to 66.”

DDS also reviewed the Service Coordinator Caseload Survey methodology used to calculate the caseload ratios to determine reasonableness and that supporting documentation is maintained to support the survey and the ratios as required by W&I Code, Section 4640.6(e).

#### **V. Early Intervention Program (EIP; Part C Funding)**

For the audit of the EIP, there are several sections contained in the Early Start Plan. However, only the Part C section was applicable for this review.

For this program, DDS reviewed the EIP, including the Early Start Plan and Federal Part C funding, to determine if the funds were properly accounted for in WRC's accounting records.

## **VI. Family Cost Participation Program (FCPP)**

The FCPP was created for the purpose of assessing consumer costs to parents based on income level and dependents. The family cost participation assessments are only applied to respite, day care, and camping services that are included in the child's Individual Program Plan (IPP)/Individualized Family Services Plan (IFSP). To determine whether WRC was in compliance with CCR, Title 17, and the W&I Code, DDS performed the following procedures during the audit review:

- Reviewed the list of consumers who received respite, day care, and camping services, for ages 0 through 17 years who live with their parents and are not Medi-Cal eligible, to determine their contribution for the FCPP.
- Reviewed the parents' income documentation to verify their level of participation based on the FCPP Schedule.
- Reviewed copies of the notification letters to verify that the parents were notified of their assessed cost participation within 10 working days of receipt of the parents' income documentation.
- Reviewed vendor payments to verify that WRC was paying for only its assessed share of cost.

## **VII. Annual Family Program Fee**

The AFPF was created for the purpose of assessing an annual fee of up to \$200 based on the income level of families with children between the ages of 0 through 17 years receiving qualifying services through the RC. The AFPF fee shall not be assessed or collected if the child receives only respite, day care, or camping services from the RC and a cost for participation was assessed to the parents under FCPP. To determine whether WRC was in compliance with the W&I Code, Section 4785, DDS requested a list of AFPF assessments and verified the following:

- The adjusted gross family income is at or above 400 percent of the federal poverty level based upon family size.
- The child has a DD or is eligible for services under the California Early Intervention Services Act.
- The child is less than 18 years of age and lives with his or her parent.
- The child or family receives services beyond eligibility determination, needs assessment, and service coordination.
- The child does not receive services through the Medi-Cal program.
- Documentation was maintained by the RC to support reduced assessments.

## **VIII. Parental Fee Program (PFP)**

The PFP was created for the purpose of prescribing financial responsibility to parents of children under the age of 18 years who are receiving 24-hour out-of-home care services through a RC or who are residents of a state hospital or on leave from a state hospital. Parents shall be required to pay a fee depending upon their ability to pay, but not to exceed (1) the cost of caring for a child without DD at home, as determined by the Director of DDS, or (2) the cost of services provided, whichever is less. To determine whether WRC is in compliance with the W&I Code, Section 4782, DDS requested a list of PFP assessments and verified the following:

- Identified all children with DD who are receiving the following services:
  - (a) All 24-hour out-of-home community care received through an RC for children under the age of 18 years;
  - (b) 24-hour care for such minor children in state hospitals. Provided, however, that no ability to pay determination shall be made for services required by state or federal law, or both, to be provided to children without charge to their parents.
- Provided DDS with a listing of new placements, terminated cases, and client deaths for those clients. Such listings shall be provided not later than the 20th day of the month following the month of such occurrence.
- Informed parents of children who will be receiving services that DDS is required to determine parents' ability to pay and to assess, bill, and collect parental fees.
- Within 10 working days after placement of a minor child, provide the parents a package containing an informational letter, a Family Financial Statement (FFS), and a return envelope.
- A copy of each informational letter given or sent to parents, indicating the addressee and the date given or mailed, shall be submitted to DDS.

## **IX. Procurement**

The Request for Proposal (RFP) process was implemented to ensure RCs outline the vendor selection process when using the RFP process to address consumer service needs. As of January 1, 2011, DDS requires RCs to document their contracting practices, as well as how particular vendors are selected to provide consumer services. By implementing a procurement process, RCs will ensure that the most cost-effective service providers, amongst comparable service providers, are selected, as required by the Lanterman Act and the State Contract. To determine whether WRC implemented the required RFP process, DDS performed the following procedures during the audit review:

- Reviewed the WRC contracting process to ensure the existence of a Board-approved procurement policy and to verify that the RFP process ensures competitive bidding, as required by Article II of the State Contract, as amended.
- Reviewed the RFP contracting policy to determine whether the protocols in place included applicable dollar thresholds and comply with Article II of the State Contract, as amended.
- Reviewed the RFP notification process to verify that it is open to the public and clearly communicated to all vendors. All submitted proposals are evaluated by a team of individuals to determine whether proposals are properly documented, recorded, and authorized by appropriate officials at WRC. The process was reviewed to ensure that the vendor selection process is transparent and impartial and avoids the appearance of favoritism. Additionally, DDS verified that supporting documentation is retained for the selection process and, in instances where a vendor with a higher bid is selected, written documentation is retained as justification for such a selection.

DDS performed the following procedures to determine compliance with Article II of the State Contract for contracts in place as of January 1, 2011:

- Selected a sample of Operations, Community Placement Plan (CPP), and negotiated POS contracts subject to competitive bidding to ensure WRC notified the vendor community and the public of contracting opportunities available.
- Reviewed the contracts to ensure that WRC has adequate and detailed documentation for the selection and evaluation process of vendor proposals and written justification for final vendor selection decisions and that those contracts were properly signed and executed by both parties to the contract.

In addition, DDS performed the following procedures:

- To determine compliance with the W&I Code, Section 4625.5 for contracts in place as of March 24, 2011: Reviewed to ensure WRC has a written policy requiring the Board to review and approve any of its contracts of two hundred fifty thousand dollars (\$250,000) or more before entering into a contract with the vendor.
- Reviewed WRC Board-approved Operations, Start-Up, and POS vendor contracts of \$250,000 or more, to ensure the inclusion of a provision for fair and equitable recoupment of funds for vendors that cease to provide services to consumers; verified that the funds provided were specifically

used to establish new or additional services to consumers, the usage of funds is of direct benefit to consumers, and the contracts are supported with sufficiently detailed and measurable performance expectations and results.

The process above was conducted in order to assess WRC's current RFP process and Board approval for contracts of \$250,000 or more, as well as to determine whether the process in place satisfies the W&I Code and WRC's State Contract requirements, as amended.

#### **X. Statewide/Regional Center Median Rates**

The Statewide and RC Median Rates were implemented on July 1, 2008, and amended on December 15, 2011, to ensure that RCs are not negotiating rates higher than the set median rates for services. Despite the median rate requirement, rate increases could be obtained from DDS under health and safety exemptions where RCs demonstrate the exemption is necessary for the health and safety of the consumers.

To determine whether WRC was in compliance with the Lanterman Act, DDS performed the following procedures during the audit review:

- Reviewed sample vendor files to determine whether WRC is using appropriately vendorized service providers and correct service codes, and that WRC is paying authorized contract rates and complying with the median rate requirements of W&I Code, Section 4691.9.
- Reviewed vendor contracts to ensure that WRC is reimbursing vendors using authorized contract median rates and verified that rates paid represented the lower of the statewide or RC median rate set after June 30, 2008. Additionally, DDS verified that providers vendorized before June 30, 2008, did not receive any unauthorized rate increases, except in situations where required by regulation, or health and safety exemptions were granted by DDS.
- Reviewed vendor contracts to ensure that WRC did not negotiate rates with new service providers for services which are higher than the RC's median rate for the same service code and unit of service, or the statewide median rate for the same service code and unit of service, whichever is lower. DDS also ensured that units of service designations conformed with existing RC designations or, if none exists, ensured that units of service conformed to a designation used to calculate the statewide median rate for the same service code.



## **XI. Other Sources of Funding from DDS**

RCs may receive other sources of funding from DDS. DDS performed sample tests on identified sources of funds from DDS to ensure WRC's accounting staff were inputting data properly, and that transactions were properly recorded and claimed. In addition, tests were performed to determine if the expenditures were reasonable and supported by documentation. The sources of funding from DDS identified in this audit are:

- CPP;
- Part C – Early Start Program;
- Family Resource Center; and
- Mental Health Services Act.

## **XII. Follow-up Review on Prior DDS Audit Findings**

As an essential part of the overall DDS monitoring system, a follow-up review of the prior DDS' audit findings was conducted. DDS identified prior audit findings that were reported to WRC and reviewed supporting documentation to determine the degree of completeness of WRC's implementation of corrective actions.

## CONCLUSIONS

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Based upon the audit procedures performed, DDS has determined that, except for the items identified in the Findings and Recommendations section, WRC was in compliance with applicable sections of the W&I Code; the HCBS Waiver for the Developmentally Disabled; CCR, Title 17; OMB Circulars A-122 and A-133; and the State Contract between DDS and WRC for the audit period, July 1, 2014, through June 30, 2016.

The costs claimed during the audit period were for program purposes and adequately supported.

From the review of prior audit issues, it was determined that WRC has taken appropriate corrective action to resolve five out of the seven prior audit issues.

## **VIEWS OF RESPONSIBLE OFFICIALS**

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DDS issued the draft audit report on July 12, 2018. The findings in the draft audit report were discussed at a formal exit conference with WRC on July 16, 2018. The views of WRC's responsible officials are included in this final audit report.

## **RESTRICTED USE**

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This audit report is solely for the information and use of DDS, CMS, Department of Health Care Services and WRC. This restriction does not limit distribution of this audit report, which is a matter of public record.

## FINDINGS AND RECOMMENDATIONS

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### Findings that need to be addressed.

#### Finding 1: Over/Understated Claims

The review of the operational indicator reports revealed WRC made duplicate payments and incorrect payment adjustments for three vendors, 24Hr HomeCare, Vendor Number HH1371, Service Code 862; 24Hr HomeCare, Vendor Number PW5817, Service Code 028; and Maxim HealthCare Services, Vendor Number PW5042, Service Code 028, when the minimum wage increase went into effect on July 1, 2014. This resulted in over- and under-payments totaling \$51,300.74 and \$826.03 from July 2014 through June 2015, respectively.

Furthermore, the sample review of 122 POS vendor files revealed WRC reimbursed two vendors at an incorrect rate. Specialized Health Services, Vendor Number H19312, Service Code 515, was reimbursed at a rate of \$81.40 per day instead of \$79.34 per day, resulting in overpayments totaling \$32,107.14 from July 2012 through April 2016, and Another Beginning, Inc., Vendor Number HW0580, Service Code 515, was reimbursed at a rate of \$86.71 per day instead of \$72.42 per day, resulting in overpayments of \$89,698.33 from March 2015 through November 2015.

The total over- and under-stated claims are \$173,106.21 and \$826.03, respectively. (See Attachment A)

WRC provided additional documentation with its response which resolved and/or modified the over- and under-stated claims. WRC remains with over and underpayments totaling \$48,493.46 and \$1,748.69, respectively.

CCR, Title 17, Section 54326 (a) (12) states in part:

“(a) All vendors shall...

(12) Agree to accept the rate established, revised or adjusted by the Department as payment in full for all authorized services provided to consumers.”

CCR, Title 17, Section 57300 (c) (2) states in part:

“(c) Regional centers shall not reimburse vendors:...

(2) For services in an amount greater than the rate established pursuant to these regulations.”

**Recommendation:**

WRC must reimburse to DDS the overpayment totaling \$48,493.46 and reimburse \$1,748.69 in underpayments to Vendor Number PW5042. In addition, WRC must ensure its staff monitors the payment invoices, rate letters and operational indicator reports for errors that may have occurred in the course of doing business with its vendors.

**Finding 2: Unsupported Credit Card Expenditures**

The review of WRC's operational expenditures revealed the receipts for 38 credit card transactions totaling \$7,284.45 were missing and five credit card transactions totaling \$199.29 did not have detailed receipts for the purchased items. This resulted in a total of \$7,483.74 in unsupported credit card expenditures.

WRC provided receipts with its response to resolve \$5,851.59. WRC must reimburse DDS \$1,632.15 for the remaining unsupported expenditures.

State Contract, Article IV, Section 3(a) states:

“Records Maintenance

In accordance with Welf. & Inst. Code section 4631 (b), Contractor shall be held strictly accountable for reporting all revenues and expenditures, and the effectiveness of the Contractor in carrying out of its programs and fiscal responsibilities. Contractor shall keep records, as follows:

- a. The Contractor shall maintain books, records, documents, case files, and other evidence pertaining to the budget, revenues, expenditures, and consumers served under this contract (hereinafter collectively called the "records") to the extent and in such detail as will properly reflect net costs (direct and indirect) of labor, materials, equipment, supplies and services, overhead and other costs and expenses of whatever nature for which reimbursement is claimed under the provisions of this contract in accordance with mutually agreed to procedures and generally accepted accounting principles.”

WRC's Credit Card Policy states:

“All detailed receipts must be retained and attached to the credit card statements. In the case of meals, each receipt must include the names of all persons involved in purchase, and a brief description of the business purpose of the meal. Purchase of office supplies or equipment must have a signed P.O. attached.”

**Recommendation:**

WRC must reimburse DDS a total of \$7,483.74 for the unsupported expenditures and reinforce to credit card holders its credit card policy of requiring detailed receipts for all transactions. In addition, WRC should update its credit card policy regarding how it handles situations where receipts are lost, since its current policy does not address this issue.

**Finding 3: Family Cost Participation Program**

**A. Overstated Share of Cost**

The sample review of 21 FCPP consumer files revealed that WRC overstated its share of cost totaling \$383.29 for two consumers. WRC paid the share of cost for two consumers receiving respite services that were the responsibility of the families.

CCR, Title 17, Section 50255(a) states in part:

“The parents of a child who meet the definition under Section 4783(a) (1) of the Welfare and Institutions Code shall be jointly and severally responsible for the assessed amount of family cost participation.”

**Recommendation:**

WRC must reimburse to DDS a total of \$383.29 in overpayments that resulted from WRC paying above the share of cost. In addition, WRC should ensure any changes to a consumer’s authorization are updated timely so it does not pay for the families’ share of cost.

**B. Late Assessments (Repeat)**

The sample review of 21 FCPP consumer files revealed 15 instances when WRC did not assess the parent’s share of cost participation as part of the consumer’s IPP or IFSP review. The assessments were completed 20 days or more after the signing of the IPP or IFPS. This issue was identified in the prior audit report. In its response, WRC agreed with the recommendation to ensure that assessments are completed as part of the consumer’s IPP or IFSP, but WRC continues to be noncompliant with the FCPP requirements. WRC stated that the issue was due to the service coordinators not sending documentation to the FCPP coordinator in a timely matter.

W&I Code, Section 4783(g)(1) states:

“(g) Family cost participation assessments or reassessments shall be conducted as follows:

- (1)(A) A regional center shall assess the cost participation for all parents of current consumers who meet the criteria specified in this section. A regional center shall use the most recent individual program plan or individualized family service plan for this purpose.
- (B) A regional center shall assess the cost participation for parents of newly identified consumers at the time of the initial individual program plan or the individualized family service plan.
- (C) Reassessments for cost participation shall be conducted as part of the individual program plan or individual family service plan review pursuant to subdivision (b) of Section 4646 of this code or subdivision (f) of Section 95020 of the Government Code.”

**Recommendation:**

WRC must develop and implement new procedures to ensure consumer FCPP assessments are completed as part of the consumers' IPP or IFSP review.

**C. Late Notification**

The sample review of 21 FCPP consumer files revealed four families were not notified of their assessed share of cost within 10 days of receiving the income documentation.

W&I Code, Section 4783(g)(3) states:

- “(3) A regional center shall notify parents of the parents' assessed cost participation within 10 working days of receipt of the parents' complete income documentation.”

**Recommendation:**

WRC must develop and implement new procedures to ensure consumer FCPP assessments are completed as part of the consumers' IPP or IFSP review and to ensure that parents are notified of their assessed cost participation within 10 days of receipt of the parents' income documentation.



**Finding 4: Equipment Inventory**

**A. Physical Inventory**

WRC was unable to provide documentation to support that it had conducted a comprehensive inventory of its equipment within the last three years. It was noted in the prior audit that WRC's last physical inventory review was conducted in March 7, 2013. WRC indicated that it has not conducted an inventory review due to the vacancy of the facilities manager position.

State's Equipment Management Guidelines Section III (F), dated February 1, 2003, states in part:

“Each RC shall conduct a comprehensive physical inventory of all state-owned, nonexpendable equipment and sensitive equipment, as defined in Attachment A, at least once every three years. The inventory will be conducted per State Administrative Manual (SAM) Section 8652.”

State Administrative Manual (SAM) 8652 states in part:

“Departments will make a physical count of all property and reconcile the count with accounting records at least once every three years.

Departments are responsible for developing and carrying out an inventory plan which include:

2 (b) Worksheets used to take inventory will be retained for audit and will show the date of inventory and the name of the inventory taker.”

**Recommendation:**

WRC must adhere to the State's Equipment Management Guidelines and SAM requiring that a physical inventory is conducted at least once every three years. In addition, WRC should designate a back-up person who is trained to conduct a physical inventory when the Facilities Manager is unable to do so. This will ensure compliance with the State's Equipment Management Guidelines and SAM.

**B. Missing Equipment**

A sample of 43 items was selected for testing from WRC's equipment inventory list. The testing revealed two items (portable cooler, state tag number 00370111, and iPad, state tag number 00370144) that could not be located, but remained on WRC's equipment inventory list.

State Contract, Article IV, Section 4(a) states in part:

“Contractor shall maintain and administer, in accordance with sound business practice, a program for the utilization, care, maintenance, protection and preservation of State of California property so as to assure its full availability and usefulness for the performance of this contract. Contractor shall comply with the State's Equipment Management System Guidelines for regional center equipment and appropriate directions and instructions which the State may prescribe as reasonably necessary for the protection of State of California property.”

State's Equipment Management System Guidelines, Section III (c) states:

“All State-owned equipment must be promptly and clearly tagged as State of California, DDS' property. The RC Property Custodian will order supplies of appropriate tags as described below by the Customer Support Section (CSS).”

**Recommendation:**

WRC must ensure it adheres to all of the requirements set forth in the State's Equipment Management System Guidelines and the State Contract regarding the safeguarding of State property. WRC must also ensure missing items are reported to the proper authorities in a timely manner and that a survey form is completed to remove the items from the inventory list.

**C. Gift of State Property**

The review of WRC's equipment list of disposed items revealed WRC gifted an iPad (State Tag #00370151) with a retail value of \$729.99 to a Board member. WRC then surveyed out the iPad using disposition code 4 on the Property Survey Report that indicates the item was lost, stolen, or destroyed. An email from WRC's Facilities Manager to the Administrative Assistant dated February 2, 2015 stated the iPad was removed from the inventory and gifted to a Board member under the direction of the prior Executive Director.

In addition, by using disposition code 4, the prior Executive Director exempted WRC from the DGS' review requirement for equipment disposal. Disposal of items in this manner required that WRC notify the California Highway Patrol of the lost or stolen item, which WRC failed to do.

Furthermore, the Property Survey Report requires a minimum of two approving names for items to be disposed; however, only one signature was on the Property Survey Report.

California Constitution, Article 16, Section 6 states:

“The Legislature shall have no power to give or to lend, or to authorize the giving or lending, of the credit of the State, or of any county, city and county, city, township or other political corporation or subdivision of the State now existing...nor shall it have the power to make any gift or authorize the making of any gift, of any public money or thing of value to any individual, municipal or other corporation...”

State’s Equipment Management System Guidelines, Section III (E), states:

(E) “RCs will conform to the following guidelines for any state-owned equipment that is junked, recycled, lost, stolen, donated, destroyed, traded-in, transferred to, or otherwise removed from the control of the RC.

RCs shall work directly with their regional Department of General Services’ (DGS) office to properly dispose of State-owned equipment. RCs will complete a Property Survey Report (Std. 152) for all State-owned equipment subject to disposal.”

**Recommendation:**

WRC must adhere to the State’s Equipment Management System Guidelines, Section III (E) to ensure equipment disposal is properly surveyed and approved by DGS.

**Finding 5: Improper Allocation of Community Placement Plan Funds**

The review of the CPP claims revealed that WRC included expenses for 39 consumers that did not move from the Developmental Centers to the community in FYs 2014-15 and 2015-16. This resulted in an improper allocation of CPP funds totaling \$1,680,621.18.

In addition, WRC provided services totaling \$762,634.65 to seven CPP consumers beyond their initial fiscal year of placement. WRC stated this occurred because their service coordinators were not properly trained to use the regional center’s rate table sub-code key to classify CPP consumers.

The improper allocation of CPP funds totaled \$2,443,255.83.  
(See Attachment B)

W&I Code, Section 4418.25(e), states in part:

“(e) Funds allocated by the department to a regional center for a community placement plan developed under this section shall be controlled through the regional center contract to ensure that the funds are expended for the purposes allocated...”

State Contract, Exhibit E, states in part:

“2. Dedicated Funding

Contractor shall use funds allocated for the regional center’s approved Community Placement Plan only for the purposes allocated and in compliance with the State’s Community Placement Plan and Housing Guidelines...”

DDS Guidelines for Regional Center Community Placement Plan (III)(A) states in part:

“Placement funding will be allocated based on claims associated with reconciled CPP placements that occur during each FY...”

**Recommendation:**

WRC must reclassify the \$2,443,255.83 of improper CPP allocations to the General POS fund. In addition, WRC must properly train its service coordinators to use the regional center’s rate table sub-code key to classify CPP consumers. This will ensure WRC allocates consumers’ expenditures to the proper funding sources before claims are submitted to DDS.

**Finding 6: Annual Family Program Fee**

The review of the AFPF revealed that WRC did not conduct any AFPF assessments in FYs 2014-15 and 2015-16. WRC indicated that it did not conduct assessments due to a staffing shortage.

W&I Code, Section 4785 (a)(1) states:

“(a) (1) Effective July 1, 2011, a regional center shall assess an annual family program fee, as described in subdivision (b), from parents whose adjusted gross family income is at or above 400 percent of the federal poverty level based upon family size and who have a child to whom all of the following apply:...”

DDS AFPF Program Fee Procedures II.B. states:

“Required Program Components for Regional Centers

B. Regional center shall complete the APF registration form with parents at the time of the consumer’s individual program plan (IPP) or individualized family services plan (IFSP).”

**Recommendation:**

WRC must implement the AFPF to comply with the AFPF procedures developed by DDS to ensure compliance with W&I Code, Section 4785 (a)(1).

**Finding 7: The Achievable Foundation - In-Kind Services (Repeat)**

The review of WRC’s in-kind services agreement with The Achievable Foundation revealed that three WRC employees provided administrative services to The Achievable Foundation; however, WRC had no records to show what type of in-kind services were received as payment for the administrative services provided to The Achievable Foundation. This issue was identified in the prior audit report and WRC stated it would maintain documentation for the in-kind services provided to and received from The Achievable Foundation.

State Contract, Article III, Section 13(b) states:

“Through a written agreement between the Contractor and a foundation, or similar entity, Contractor may provide in-kind administrative services to a foundation, or similar entity, provided such agreement requires reimbursement from the foundation to the Contractor for any services performed by the Contractor or its employees on behalf of the foundation or similar entity. In-kind reimbursement shall be in the form of specifically identifiable, non-monetary benefits for persons with developmental disabilities.”

**Recommendation:**

WRC must maintain documentation for the in-kind services provided by The Achievable Foundation and ensure the in-kind reimbursement provided by The Achievable Foundation is equivalent to the cost of the services provided by WRC.

## EVALUATION OF RESPONSE

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As part of the audit report process, WRC was provided with a draft audit report and requested to provide a response to the findings. WRC's response dated September 4, 2018, is provided as Appendix A.

DDS' Audit Section has evaluated WRC's response and will confirm the appropriate corrective actions have been taken during the next scheduled audit.

### **Finding 1: Over/Understated Claims**

WRC stated that it was in partial agreement with the findings for the four vendors.

For the first vendor, 24Hr HomeCare, Vendor Number HH1371, WRC did not agree with the overpayment amounts identified in the finding and provided supporting documentation with its response indicating it identified an additional \$1,018.40 in overpayments and \$222.45 in underpayments, which increased the overpayment from \$22,569.28 in the original finding to \$23,365.23.

In addition, WRC did not agree with the overpayment amounts for 24Hr HomeCare, Vendor Number PW5817. WRC indicated the overpayment should have been \$22,834.60 rather than the \$24,675.86 identified in the finding, a decrease of \$1,841.26. However, WRC did not provide sufficient documentation to justify the reduction. The overpayment for the vendor number PW5817 is \$24,675.86.

Therefore, the total overpayment for both Vendor Numbers HH1371 and PW5817 is \$48,041.09. WRC stated that it received a \$44,548.57 check from 24Hr HomeCare, which was remitted to DDS on March 9, 2018 and recovered \$1,571.61 from 24Hr HomeCare by offsetting payments due to the vendor for a total of \$46,120.18 in recoveries. WRC also agreed with the \$79.65 in underpayments for Vendor Number PW5042. The net outstanding overpayment for 24Hr HomeCare is \$1,841.26.

For the second vendor, Maxim HealthCare Services, Vendor Number PW5042, WRC did not agree with the overpayment amounts identified in the finding and provided documentation with its response indicating it identified additional overpayments of \$10,625.46 and underpayments of \$1,197.47. As a result, the overpayment to Maxim HealthCare Services increased from \$4,055.60 to \$14,681.06 and the underpayments increased from \$605.20 to \$1,802.67.

However, a review of the documents provided revealed that WRC double-counted the over- and under-payments for November 2014, which overstated the over- and under-payments by \$135.00 and \$53.98, respectively. The revised total over- and under-payments to Maxim HealthCare Services are \$14,545.06 and \$1,748.69, respectively. WRC stated that it will recover the overpaid amounts by deducting monthly service payments due to the vendor for the current fiscal year. WRC will remit the payment once all of the overpayments have been collected.

For the third vendor, Specialized Health Services, Vendor Number H19312, WRC agreed with the overpayment totaling \$32,107.14 and stated it will recover the overpaid amounts over a five-year period by deducting monthly service payments due to the vendor. WRC will remit the collected overpayments periodically to DDS.

Finally, WRC disagreed with the finding for Another Beginning, Inc., Vendor Number HW0580 and provided additional supporting documentation with its response which resolved the overpayments totaling \$89,698.33.

The total outstanding over- and under-payments for the four vendors are \$48,493.46 and \$1,748.69, respectively.

**Finding 2: Unsupported Credit Card Expenditures**

WRC agreed with the finding and provided receipts for seven out of 38 credit card expenditures. These receipts resolved \$5,851.59 out of the \$7,483.74 identified in the audit report, with \$1,632.15 still remaining. WRC must reimburse DDS the overpayment totaling \$1,632.15.

One receipt provided with the response included \$1,120.00 for alcohol purchases. This amount was not reported as an unallowable expense in Attachment B of the WRC's 2016 TCM Rate Study. Failure to report unallowable operating expenses could result in an incorrect calculation of the TCM rate.

**Finding 3: Family Cost Participation Program**

**A. Overstated Share of Cost**

WRC agreed with the finding and stated that it will reimburse DDS \$383.29 that resulted from WRC paying above the share of cost. In addition, WRC stated that it will ensure any changes to a consumer's authorization are updated timely to avoid paying for the parents' share of cost.

**B. Late Assessments (Repeat)**

WRC agreed with the finding and indicated it will comply with the recommendation. In addition, WRC stated that it will develop and implement new procedures to ensure consumers' FCPP assessments are completed as part of the consumers' IPP or IFSP review.

This issue was identified in the prior audit report. In its response, WRC agreed with the recommendation to ensure that assessments are completed as part of the consumer's IPP or IFSP, but WRC continues to be noncompliant with the FCPP requirements. DDS will conduct a follow-up during the next schedule to ensure WRC has implemented and follows the new procedures.

**C. Late Notification**

WRC agreed with this finding and indicated it will comply with the recommendation. WRC stated that it will develop and implement new procedures to ensure consumer FCPP assessments are completed as part of the consumers' IPP or IFSP review. This will ensure that parents are notified of their assessed cost participation within 10 days of receipt of the parents' income documentation.

**Finding 4: Equipment Inventory**

**A. Physical Inventory**

WRC agreed with this finding and stated that it will comply with the recommendation to conduct a physical inventory at least once every three years.

**B. Missing Equipment**

WRC agreed with this finding and stated it will follow the State's Equipment Management System Guidelines to safeguard State property. In addition, WRC stated that it will properly survey items that are not located.

**D. Gifting of State Property**

WRC agreed with this finding and stated that it will comply with the recommendation to properly dispose of State property. However, WRC did not provide details or policies and procedures indicating how this issue will be resolved. DDS will conduct a follow-up during the next scheduled audit to ensure that the issue is resolved.



**Finding 5: Improper Allocation of Community Placement Plan Funds**

WRC agreed with this finding and provided supporting documentation with its response indicating \$1,505,836.42 in improper CPP allocations were reclassified to the General POS fund. WRC stated that it was unable to reclassify the remaining \$937,419.41 in improper allocations since the fiscal years had closed. In addition, WRC stated it would develop a system to accurately monitor the activities of CPP consumers.

**Finding 6: Annual Family Program Fee**

WRC agreed with this finding and indicated it will follow DDS' recommendation and implement the AFPF program procedures to comply with the regulations.

**Finding 7: The Achievable Foundation - In-Kind Services (Repeat)**

WRC stated that it no longer provides in-kind support to the Achievable Foundation. However, WRC did not provide any records to support what type of in-kind services were received as payment for the administrative services provided to the Achievable Foundation during the prior audit.

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
1		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Dec 14	\$ 97.11	\$ (97.11)	\$ -
2		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 114.66	\$ (114.66)	\$ -
3		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 192.47	\$ (192.47)	\$ -
4		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Nov 14	\$ 29.25	\$ (29.25)	\$ -
5		HH1371	24HR HomeCare	862	V1SR		Jan 15	\$ 17.55	\$ (17.55)	\$ -
6		HH1371	24HR HomeCare	862	V1SR		Feb 15	\$ 11.70	\$ (11.70)	\$ -
7		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Feb 15	\$ 32.76	\$ (32.76)	\$ -
8		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 288.99	\$ (288.99)	\$ -
9		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 196.56	\$ (196.56)	\$ -
10		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 188.96	\$ (188.96)	\$ -
11		HH1371	24HR HomeCare	862	V1SR		Aug 14	\$ 9.94	\$ (9.94)	\$ -
12		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 294.84	\$ (294.84)	\$ -
13		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 37.73	\$ (37.73)	\$ -
14		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Jan 15	\$ 122.85	\$ (122.85)	\$ -
15		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 196.56	\$ (196.56)	\$ -
16		HH1371	24HR HomeCare	862	V1SR		Jul 14	\$ 16.38	\$ (16.38)	\$ -
17		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Apr 15	\$ 58.15	\$ (58.15)	\$ -
18		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 421.20	\$ (421.20)	\$ -
19		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Aug 14	\$ 16.38	\$ (16.38)	\$ -
20		HH1371	24HR HomeCare	862	V1SR		Nov 14 - Jun 15	\$ 60.84	\$ (60.84)	\$ -
21		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 267.35	\$ (267.35)	\$ -
22		HH1371	24HR HomeCare	862	V1SR		Jul 14 - May 15	\$ 72.53	\$ (72.53)	\$ -
23		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 91.26	\$ (91.26)	\$ -
24		HH1371	24HR HomeCare	862	V1SR		Nov 14 - Jun 15	\$ 178.44	\$ (178.44)	\$ -
25		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 270.27	\$ (270.27)	\$ -
26		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Apr 15	\$ 139.82	\$ (139.82)	\$ -
27		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 292.50	\$ (292.50)	\$ -
28		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Jun 15	\$ 132.21	\$ (132.21)	\$ -
29		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 270.27	\$ (270.27)	\$ -
30		HH1371	24HR HomeCare	862	V1SR		Nov 14	\$ 3.51	\$ (3.51)	\$ -
31		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 196.56	\$ (196.56)	\$ -
32		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 394.00	\$ (394.00)	\$ -

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
33		HH1371	24HR HomeCare	862	V1SR		Mar 15	\$ 31.59	\$ (31.59)	\$ -
34		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Jun 15	\$ 240.73	\$ (240.73)	\$ -
35		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Sep 14	\$ 16.38	\$ (16.38)	\$ -
36		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 49.14	\$ (49.14)	\$ -
37		HH1371	24HR HomeCare	862	V1SR		Oct 14	\$ 15.21	\$ (15.21)	\$ -
38		HH1371	24HR HomeCare	862	V1SR		Mar 15	\$ 16.38	\$ (16.38)	\$ -
39		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 143.33	\$ (143.33)	\$ -
40		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 66.68	\$ (66.68)	\$ -
41		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 369.72	\$ (369.72)	\$ -
42		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Mar 15	\$ 427.64	\$ (427.64)	\$ -
43		HH1371	24HR HomeCare	862	V1SR		Apr 15 - May 15	\$ 9.36	\$ (9.36)	\$ -
44		HH1371	24HR HomeCare	862	V1SR		Apr 15 - Jun 15	\$ 73.71	\$ (73.71)	\$ -
45		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 207.97	\$ (207.97)	\$ -
46		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Dec 14	\$ 52.07	\$ (52.07)	\$ -
47		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 128.12	\$ (128.12)	\$ -
48		HH1371	24HR HomeCare	862	V1SR		Mar 15 - Jun 15	\$ 31.00	\$ (31.00)	\$ -
49		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 420.03	\$ (420.03)	\$ -
50		HH1371	24HR HomeCare	862	V1SR		Aug 14 - May 15	\$ 206.89	\$ (206.89)	\$ -
51		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 202.99	\$ (202.99)	\$ -
52		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 24.57	\$ (24.57)	\$ -
53		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 105.30	\$ (105.30)	\$ -
54		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 275.53	\$ (275.53)	\$ -
55		HH1371	24HR HomeCare	862	V1SR		May 15 - Jun 15	\$ 42.12	\$ (42.12)	\$ -
56		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Mar 15	\$ 95.65	\$ (95.65)	\$ -
57		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 186.03	\$ (186.03)	\$ -
58		HH1371	24HR HomeCare	862	V1SR		Jul 14	\$ 16.38	\$ (16.38)	\$ -
59		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 131.04	\$ (131.04)	\$ -
60		HH1371	24HR HomeCare	862	V1SR		Feb 15 - Jun 15	\$ 35.11	\$ (35.11)	\$ -
61		HH1371	24HR HomeCare	862	V1SR		Sep 14 - May 15	\$ 280.80	\$ (280.80)	\$ -
62		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 212.06	\$ (212.06)	\$ -
63		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 140.98	\$ (140.98)	\$ -
64		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Feb 15	\$ 45.63	\$ (45.63)	\$ -

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
65		HH1371	24HR HomeCare	862	V1SR		Apr 15	\$ 16.38	\$ (16.38)	\$ -
66		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 196.56	\$ (196.56)	\$ -
67		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 84.24	\$ (84.24)	\$ -
68		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 263.85	\$ (263.85)	\$ -
69		HH1371	24HR HomeCare	862	V1SR		Jul 14 - May 15	\$ 212.07	\$ (212.07)	\$ -
70		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 184.87	\$ (184.87)	\$ -
71		HH1371	24HR HomeCare	862	V1SR		Apr 14 - Jun 15	\$ 49.14	\$ (49.14)	\$ -
72		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Feb 15	\$ 29.25	\$ (29.25)	\$ -
73		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 239.85	\$ (239.85)	\$ -
74		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 98.28	\$ (98.28)	\$ -
75		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 77.22	\$ (77.22)	\$ -
76		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Feb 15	\$ 21.06	\$ (21.06)	\$ -
77		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 94.77	\$ (94.77)	\$ -
78		HH1371	24HR HomeCare	862	V1SR		Feb 15	\$ 4.09	\$ (4.09)	\$ -
79		HH1371	24HR HomeCare	862	V1SR		May 15	\$ 19.89	\$ (19.89)	\$ -
80		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 233.42	\$ (233.42)	\$ -
81		HH1371	24HR HomeCare	862	V1SR		Apr 15	\$ 8.19	\$ (8.19)	\$ -
82		HH1371	24HR HomeCare	862	V1SR		Dec 14	\$ 3.51	\$ (3.51)	\$ -
83		HH1371	24HR HomeCare	862	V1SR		Apr 15	\$ 4.68	\$ (4.68)	\$ -
84		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 177.84	\$ (177.84)	\$ -
85		HH1371	24HR HomeCare	862	V1SR		Jan 15 - May 15	\$ 21.06	\$ (21.06)	\$ -
86		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 3.51	\$ (3.51)	\$ -
87		HH1371	24HR HomeCare	862	V1SR		Aug 14	\$ 5.85	\$ (5.85)	\$ -
88		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 153.27	\$ (153.27)	\$ -
89		HH1371	24HR HomeCare	862	V1SR		Nov 14	\$ 7.02	\$ (7.02)	\$ -
90		HH1371	24HR HomeCare	862	V1SR		Jan 15 - May 15	\$ 72.54	\$ (72.54)	\$ -
91		HH1371	24HR HomeCare	862	V1SR		Jan 15 - May 15	\$ 57.92	\$ (57.92)	\$ -
92		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Dec 14	\$ 57.33	\$ (57.33)	\$ -
93		HH1371	24HR HomeCare	862	V1SR		Apr 15 -Jun 15	\$ 39.78	\$ (39.78)	\$ -
94		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 294.84	\$ (294.84)	\$ -
95		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 162.63	\$ (162.63)	\$ -
96		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Oct 14	\$ 23.40	\$ (23.40)	\$ -

**Westside Regional Center  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
97		HH1371	24HR HomeCare	862	V1SR		Jan 15	\$ 5.85	\$ (5.85)	\$ -
98		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 267.35	\$ (267.35)	\$ -
99		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Jun 15	\$ 221.13	\$ (221.13)	\$ -
100		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Feb 15	\$ 8.19	\$ (8.19)	\$ -
101		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 386.10	\$ (386.10)	\$ -
102		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 218.79	\$ (218.79)	\$ -
103		HH1371	24HR HomeCare	862	V1SR		May 15 - Jun 15	\$ 44.46	\$ (44.46)	\$ -
104		HH1371	24HR HomeCare	862	V1SR		Apr 15	\$ 8.19	\$ (8.19)	\$ -
105		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 97.69	\$ (97.69)	\$ -
106		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 180.18	\$ (180.18)	\$ -
107		HH1371	24HR HomeCare	862	V1SR		May 15	\$ 3.51	\$ (3.51)	\$ -
108		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 190.72	\$ (190.72)	\$ -
109		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 98.28	\$ (98.28)	\$ -
110		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 97.11	\$ (97.11)	\$ -
111		HH1371	24HR HomeCare	862	V1SR		Jul 14 - May 15	\$ 162.05	\$ (162.05)	\$ -
112		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Jun 15	\$ 81.90	\$ (81.90)	\$ -
113		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Sep 14	\$ 75.47	\$ (75.47)	\$ -
114		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Feb 15	\$ 16.38	\$ (16.38)	\$ -
115		HH1371	24HR HomeCare	862	V1SR		Jan 15	\$ 26.03	\$ (26.03)	\$ -
116		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 245.71	\$ (245.71)	\$ -
117		HH1371	24HR HomeCare	862	V1SR		Jul 14	\$ 12.29	\$ (12.29)	\$ -
118		HH1371	24HR HomeCare	862	V1SR		Jan 15 - May 15	\$ 54.71	\$ (54.71)	\$ -
119		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Jun 15	\$ 156.20	\$ (156.20)	\$ -
120		HH1371	24HR HomeCare	862	V1SR		Feb 15	\$ 14.04	\$ (14.04)	\$ -
121		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 196.56	\$ (196.56)	\$ -
122		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 11.70	\$ (11.70)	\$ -
123		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Mar 15	\$ 55.58	\$ (55.58)	\$ -
124		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Sep 14	\$ 14.62	\$ (14.62)	\$ -
125		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Feb 15	\$ 14.33	\$ (14.33)	\$ -
126		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 257.40	\$ (257.40)	\$ -
127		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 10.24	\$ (10.24)	\$ -
128		HH1371	24HR HomeCare	862	V1SR		Jul 14 - May 15	\$ 149.76	\$ (149.76)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
129		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 86.58	\$ (86.58)	\$ -
130		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 196.56	\$ (196.56)	\$ -
131		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 163.80	\$ (163.80)	\$ -
132		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Aug 14	\$ 32.76	\$ (32.76)	\$ -
133		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Oct 14	\$ 58.50	\$ (58.50)	\$ -
134		HH1371	24HR HomeCare	862	V1SR		Feb 15	\$ 4.09	\$ (4.09)	\$ -
135		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 78.39	\$ (78.39)	\$ -
136		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 187.79	\$ (187.79)	\$ -
137		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 424.71	\$ (424.71)	\$ -
138		HH1371	24HR HomeCare	862	V1SR		Jul 14	\$ 24.57	\$ (24.57)	\$ -
139		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Oct 14	\$ 26.32	\$ (26.32)	\$ -
140		HH1371	24HR HomeCare	862	V1SR		Apr 15 - Jun 15	\$ 39.49	\$ (39.49)	\$ -
141		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Apr 15	\$ 57.33	\$ (57.33)	\$ -
142		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Jan 15	\$ 7.02	\$ (7.02)	\$ -
143		HH1371	24HR HomeCare	862	V1SR		May 15 - Jun 15	\$ 10.53	\$ (10.53)	\$ -
144		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 98.28	\$ (98.28)	\$ -
145		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Dec 14	\$ 58.50	\$ (58.50)	\$ -
146		HH1371	24HR HomeCare	862	V1SR		Nov 14 - Feb 15	\$ 51.48	\$ (51.48)	\$ -
147		HH1371	24HR HomeCare	862	V1SR		Oct 14	\$ 3.51	\$ (3.51)	\$ -
148		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Oct 14	\$ 17.55	\$ (17.55)	\$ -
149		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 64.35	\$ (64.35)	\$ -
150		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 187.80	\$ (187.80)	\$ -
151		HH1371	24HR HomeCare	862	V1SR		Nov 14 - Feb 15	\$ 18.72	\$ (18.72)	\$ -
152		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 208.56	\$ (208.56)	\$ -
153		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Nov 14	\$ 81.90	\$ (81.90)	\$ -
154		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Nov 14	\$ 150.66	\$ (150.66)	\$ -
155		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Mar 15	\$ 29.54	\$ (29.54)	\$ -
156		HH1371	24HR HomeCare	862	V1SR		Jul 14	\$ 8.19	\$ (8.19)	\$ -
157		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 93.01	\$ (93.01)	\$ -
158		HH1371	24HR HomeCare	862	V1SR		Jul 14 - May 15	\$ 112.90	\$ (112.90)	\$ -
159		HH1371	24HR HomeCare	862	V1SR		Dec 14 - May 15	\$ 47.97	\$ (47.97)	\$ -
160		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Sep 14	\$ 37.44	\$ (37.44)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
161		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 16.38	\$ (16.38)	\$ -
162		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Jun 15	\$ 127.54	\$ (127.54)	\$ -
163		HH1371	24HR HomeCare	862	V1SR		Nov 14 - Jun 15	\$ 65.52	\$ (65.52)	\$ -
164		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Jun 15	\$ 113.49	\$ (113.49)	\$ -
165		HH1371	24HR HomeCare	862	V1SR		Jan 15	\$ 3.51	\$ (3.51)	\$ -
166		HH1371	24HR HomeCare	862	V1SR		Apr 15 - Jun 15	\$ 24.57	\$ (24.57)	\$ -
167		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Sep 14	\$ 91.26	\$ (91.26)	\$ -
168		HH1371	24HR HomeCare	862	V1SR		Apr 15 - Jun 15	\$ 77.51	\$ (77.51)	\$ -
169		HH1371	24HR HomeCare	862	V1SR		Oct 14 - Jun 15	\$ 190.14	\$ (190.14)	\$ -
170		HH1371	24HR HomeCare	862	V1SR		Feb 15 - Jun 15	\$ 17.55	\$ (17.55)	\$ -
171		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Aug 14	\$ 16.38	\$ (16.38)	\$ -
172		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Jan 15	\$ 5.85	\$ (5.85)	\$ -
173		HH1371	24HR HomeCare	862	V1SR		May 15 - Jun 15	\$ 12.87	\$ (12.87)	\$ -
174		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jan 15	\$ 84.24	\$ (84.24)	\$ -
175		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Dec 14	\$ 27.49	\$ (27.49)	\$ -
176		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Oct 14	\$ 29.25	\$ (29.25)	\$ -
177		HH1371	24HR HomeCare	862	V1SR		Oct 14	\$ (222.45)	\$ 222.45	\$ -
177		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 89.50	\$ (89.50)	\$ -
178		HH1371	24HR HomeCare	862	V1SR		Aug 14	\$ 14.04	\$ (14.04)	\$ -
179		HH1371	24HR HomeCare	862	V1SR		Oct 14	\$ 11.41	\$ (11.41)	\$ -
180		HH1371	24HR HomeCare	862	V1SR		May 15 - Jun 15	\$ 32.76	\$ (32.76)	\$ -
181		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Oct 14	\$ 88.92	\$ (88.92)	\$ -
182		HH1371	24HR HomeCare	862	V1SR		Nov 14	\$ 24.57	\$ (24.57)	\$ -
183		HH1371	24HR HomeCare	862	V1SR		Nov 14 - Dec 14	\$ 16.38	\$ (16.38)	\$ -
184		HH1371	24HR HomeCare	862	V1SR		Mar 15 - Jun 15	\$ 32.76	\$ (32.76)	\$ -
185		HH1371	24HR HomeCare	862	V1SR		May 15 - Jun 15	\$ 32.76	\$ (32.76)	\$ -
186		HH1371	24HR HomeCare	862	V1SR		Nov 14	\$ 4.68	\$ (4.68)	\$ -
187		HH1371	24HR HomeCare	862	V1SR		Apr 15 - Jun 15	\$ 49.14	\$ (49.14)	\$ -
188		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 8.19	\$ (8.19)	\$ -
189		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Aug 14	\$ 70.20	\$ (70.20)	\$ -
190		HH1371	24HR HomeCare	862	V1SR		Jan 15 - Feb 15	\$ 70.20	\$ (70.20)	\$ -
191		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 35.10	\$ (35.10)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
192		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 280.80	\$ (280.80)	\$ -
193		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 278.46	\$ (278.46)	\$ -
194		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 294.84	\$ (294.84)	\$ -
195		HH1371	24HR HomeCare	862	V1SR		Feb 15	\$ 23.40	\$ (23.40)	\$ -
196		HH1371	24HR HomeCare	862	V1SR		Apr 15	\$ 24.57	\$ (24.57)	\$ -
197		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 125.18	\$ (125.18)	\$ -
198		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 421.20	\$ (421.20)	\$ -
199		HH1371	24HR HomeCare	862	V1SR		Jan 15	\$ 7.02	\$ (7.02)	\$ -
200		HH1371	24HR HomeCare	862	V1SR		Mar 15	\$ 7.02	\$ (7.02)	\$ -
201		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 260.91	\$ (260.91)	\$ -
202		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 113.49	\$ (113.49)	\$ -
203		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 200.07	\$ (200.07)	\$ -
204		HH1371	24HR HomeCare	862	V1SR		Sep 14 - Feb 15	\$ 157.95	\$ (157.95)	\$ -
205		HH1371	24HR HomeCare	862	V1SR		Sep 14 - May 15	\$ 146.25	\$ (146.25)	\$ -
206		HH1371	24HR HomeCare	862	V1SR		Apr 15 - Jun 15	\$ 21.06	\$ (21.06)	\$ -
207		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 420.61	\$ (420.61)	\$ -
208		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 287.24	\$ (287.24)	\$ -
209		HH1371	24HR HomeCare	862	V1SR		Dec 14 - May 15	\$ 101.79	\$ (101.79)	\$ -
210		HH1371	24HR HomeCare	862	V1SR		Feb 15 - Jun 15	\$ 64.35	\$ (64.35)	\$ -
211		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 321.76	\$ (321.76)	\$ -
212		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jun 15	\$ 169.06	\$ (169.06)	\$ -
213		HH1371	24HR HomeCare	862	V1SR		Jul 14 - Jan 15	\$ 245.70	\$ (245.70)	\$ -
214		HH1371	24HR HomeCare	862	V1SR		Jun 15	\$ 9.36	\$ (9.36)	\$ -
215		HH1371	24HR HomeCare	862	V1SR		Aug 14 - Jun 15	\$ 80.14	\$ (80.14)	\$ -
216		HH1371	24HR HomeCare	862	V1SR		Dec 14 - Apr 15	\$ 57.92	\$ (57.92)	\$ -
<b>Total Overpayment for Vendor Number HH1371</b>								<b>\$ 23,365.23</b>	<b>\$ (23,365.23)</b>	<b>\$ -</b>
217		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 236.00	\$ (236.00)	\$ -
218		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 199.15	\$ (199.15)	\$ -
219		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 73.75	\$ (39.53)	\$ 34.22
220		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 122.13	\$ (77.88)	\$ 44.25
221		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 27.14	\$ (2.36)	\$ 24.78



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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
222		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
223		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 47.79	\$ (47.79)	\$ -
224		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 38.96	\$ (38.96)	\$ -
225		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 31.86	\$ (31.86)	\$ -
226		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 536.90	\$ (536.90)	\$ -
227		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 122.13	\$ (54.28)	\$ 67.85
228		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
229		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 7.67	\$ (7.67)	\$ -
230		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Oct 14	\$ 94.40	\$ (94.40)	\$ -
231		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 148.68	\$ (148.68)	\$ -
232		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 38.94	\$ (38.94)	\$ -
233		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
234		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 83.78	\$ (60.18)	\$ 23.60
235		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 271.40	\$ (271.40)	\$ -
236		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
237		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 182.31	\$ (182.31)	\$ -
238		PW5817	24HR HomeCare	28	GN1R		Nov 14	\$ 61.36	\$ (61.36)	\$ -
239		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
240		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 73.75	\$ (64.31)	\$ 9.44
241		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
242		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
243		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 9.74	\$ (9.74)	\$ -
244		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
245		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 109.16	\$ (68.74)	\$ 40.42
246		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 58.41	\$ (58.41)	\$ -
247		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 9.74	\$ (9.74)	\$ -
248		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
249		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
250		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 113.87	\$ (74.93)	\$ 38.94
251		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 37.32	\$ (37.32)	\$ -
252		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 239.54	\$ (239.54)	\$ -
253		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Oct 14	\$ 35.40	\$ (35.40)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
254		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 23.45	\$ (23.45)	\$ -
255		PW5817	24HR HomeCare	28	GN1R		Jul 14	\$ 1.77	\$ (1.77)	\$ -
256		PW5817	24HR HomeCare	28	GN1R		Oct 14 - Nov 14	\$ 38.94	\$ (38.94)	\$ -
257		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 162.84	\$ (162.84)	\$ -
258		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 130.54	\$ (14.31)	\$ 116.23
259		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 127.44	\$ (127.44)	\$ -
260		PW5817	24HR HomeCare	28	GNXR		Aug 14	\$ 10.62	\$ (10.62)	\$ -
261		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 89.68	\$ (89.68)	\$ -
262		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
263		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
264		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 194.70	\$ (194.70)	\$ -
265		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 73.75	\$ (59.00)	\$ 14.75
266		PW5817	24HR HomeCare	28	GNXR		Nov 14	\$ 9.44	\$ (9.44)	\$ -
267		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.24	\$ (198.24)	\$ -
268		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
269		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
270		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 185.85	\$ (185.85)	\$ -
271		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 210.34	\$ (210.34)	\$ -
272		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
273		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 57.82	\$ (57.82)	\$ -
274		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 57.82	\$ (38.35)	\$ 19.47
275		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 48.70	\$ (48.70)	\$ -
276		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.09	\$ (198.09)	\$ -
277		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Oct 14	\$ 40.71	\$ (40.71)	\$ -
278		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 67.85	\$ (67.85)	\$ -
279		PW5817	24HR HomeCare	28	GN1R		Oct 14	\$ 39.53	\$ (39.53)	\$ -
280		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 141.60	\$ (141.60)	\$ -
281		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 48.70	\$ (48.70)	\$ -
282		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 56.06	\$ (3.25)	\$ 52.81
283		PW5817	24HR HomeCare	28	GNXR		Nov 14	\$ 7.08	\$ (7.08)	\$ -
284		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 247.80	\$ (247.80)	\$ -
285		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -

**Westside Regional Center  
Over and Understated Claims  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
286		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
287		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 70.80	\$ (46.02)	\$ 24.78
288		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 59.00	\$ (59.00)	\$ -
289		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 103.84	\$ (103.84)	\$ -
290		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 61.95	\$ (61.95)	\$ -
291		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 198.24	\$ (198.24)	\$ -
292		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 164.61	\$ (164.61)	\$ -
293		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 138.95	\$ (27.73)	\$ 111.22
294		PW5817	24HR HomeCare	28	GN1R		Jul 14	\$ 25.96	\$ (25.96)	\$ -
295		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 115.64	\$ (115.64)	\$ -
296		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Oct 14	\$ 203.55	\$ (203.55)	\$ -
297		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
298		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 67.85	\$ (61.95)	\$ 5.90
299		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
300		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 53.10	\$ (53.10)	\$ -
301		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 79.65	\$ (38.35)	\$ 41.30
302		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
303		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 61.36	\$ (61.36)	\$ -
304		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 14.16	\$ (14.16)	\$ -
305		PW5817	24HR HomeCare	28	GNXR		Aug 14	\$ 36.58	\$ (36.58)	\$ -
306		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 118.00	\$ (59.00)	\$ 59.00
307		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
308		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
309		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 62.54	\$ (62.54)	\$ -
310		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 109.74	\$ (109.74)	\$ -
311		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
312		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 70.21	\$ (70.21)	\$ -
313		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 79.65	\$ (53.10)	\$ 26.55
314		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 31.86	\$ (31.86)	\$ -
315		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 106.20	\$ (106.20)	\$ -
316		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
317		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 102.07	\$ (47.20)	\$ 54.87

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
318		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
319		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
320		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 31.86	\$ (31.86)	\$ -
321		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
322		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 2.07	\$ (2.07)	\$ -
323		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
324		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 47.79	\$ (47.79)	\$ -
325		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Oct 14	\$ 31.86	\$ (31.86)	\$ -
326		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 149.86	\$ (103.84)	\$ 46.02
327		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Oct 14	\$ 47.79	\$ (47.79)	\$ -
328		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
329		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 97.94	\$ (97.94)	\$ -
330		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
331		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 44.25	\$ (44.25)	\$ -
332		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 88.50	\$ (34.81)	\$ 53.69
333		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 47.79	\$ (47.79)	\$ -
334		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 47.79	\$ (47.79)	\$ -
335		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 33.04	\$ (33.04)	\$ -
336		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
337		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
338		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
339		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.24	\$ (198.24)	\$ -
340		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 185.85	\$ (185.85)	\$ -
341		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
342		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
343		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
344		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
345		PW5817	24HR HomeCare	28	GN1R		Oct 14 - Nov 14	\$ 31.86	\$ (31.86)	\$ -
346		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 77.88	\$ (77.88)	\$ -
347		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
348		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 59.00	\$ (59.00)	\$ -
349		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
350		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 59.00	\$ (59.00)	\$ -
351		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
352		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
353		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 139.68	\$ (71.39)	\$ 68.29
354		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
355		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 71.98	\$ (42.48)	\$ 29.50
356		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
357		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
358		PW5817	24HR HomeCare	28	GN1R		Oct 14 - Nov 14	\$ 31.86	\$ (31.86)	\$ -
359		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
360		PW5817	24HR HomeCare	28	GN1R		Nov 14	\$ 38.94	\$ (38.94)	\$ -
361		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 33.04	\$ (33.04)	\$ -
362		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 49.56	\$ (49.56)	\$ -
363		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Oct 14	\$ 31.86	\$ (31.86)	\$ -
364		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 77.88	\$ (77.88)	\$ -
365		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 17.70	\$ (17.70)	\$ -
366		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
367		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 47.79	\$ (47.79)	\$ -
368		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 47.79	\$ (47.79)	\$ -
369		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 31.86	\$ (31.86)	\$ -
370		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 36.01	\$ (36.01)	\$ -
371		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 59.01	\$ (43.37)	\$ 15.64
372		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
373		PW5817	24HR HomeCare	28	GN1R		Jul 14	\$ 10.62	\$ (10.62)	\$ -
374		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
375		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
376		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 70.80	\$ (23.60)	\$ 47.20
377		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
378		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 118.00	\$ (118.00)	\$ -
379		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
380		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 29.99	\$ (14.06)	\$ 15.93
381		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 96.62	\$ (42.19)	\$ 54.43

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
382		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 47.79	\$ (47.79)	\$ -
383		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 38.94	\$ (38.94)	\$ -
384		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 61.36	\$ (61.36)	\$ -
385		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Sep 14	\$ 98.53	\$ (98.53)	\$ -
386		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 61.07	\$ (61.07)	\$ -
387		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 36.88	\$ (36.88)	\$ -
388		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
389		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 118.00	\$ (47.20)	\$ 70.80
390		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 77.29	\$ (77.29)	\$ -
391		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 25.96	\$ (25.96)	\$ -
392		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
393		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
394		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
395		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
396		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
397		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 56.79	\$ (56.79)	\$ -
398		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 58.41	\$ (58.41)	\$ -
399		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 87.32	\$ (87.32)	\$ -
400		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
401		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
402		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
403		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 63.72	\$ (63.72)	\$ -
404		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
405		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 118.00	\$ (118.00)	\$ -
406		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 63.13	\$ (63.13)	\$ -
407		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 113.28	\$ (113.28)	\$ -
408		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
409		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 68.15	\$ (68.15)	\$ -
410		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
411		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
412		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 58.41	\$ (58.41)	\$ -
413		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
414		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
415		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 102.07	\$ (63.72)	\$ 38.35
416		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
417		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
418		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 89.68	\$ (67.26)	\$ 22.42
419		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
420		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.24	\$ (198.24)	\$ -
421		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 197.65	\$ (197.65)	\$ -
422		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
423		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 82.60	\$ (53.10)	\$ 29.50
424		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
425		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 118.00	\$ (31.86)	\$ 86.14
426		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
427		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 247.80	\$ (247.80)	\$ -
428		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 37.76	\$ (37.76)	\$ -
429		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 63.72	\$ (63.72)	\$ -
430		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
431		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
432		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
433		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 29.50	\$ (29.50)	\$ -
434		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 86.73	\$ (86.73)	\$ -
435		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
436		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 62.54	\$ (62.54)	\$ -
437		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 106.20	\$ (53.10)	\$ 53.10
438		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 47.79	\$ (47.79)	\$ -
439		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 97.35	\$ (97.35)	\$ -
440		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Nov 14	\$ 77.88	\$ (77.88)	\$ -
441		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.06	\$ (79.06)	\$ -
442		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 80.24	\$ (46.61)	\$ 33.63
443		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
444		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 31.86	\$ (31.86)	\$ -
445		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
446		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
447		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 70.21	\$ (70.21)	\$ -
448		PW5817	24HR HomeCare	28	GN1R		Jul 14	\$ 38.94	\$ (38.94)	\$ -
449		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Oct 14	\$ 47.79	\$ (47.79)	\$ -
450		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 77.88	\$ (77.88)	\$ -
451		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 63.72	\$ (63.72)	\$ -
452		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 57.82	\$ (57.82)	\$ -
453		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 38.94	\$ (10.62)	\$ 28.32
454		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 58.41	\$ (58.41)	\$ -
455		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
456		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 31.86	\$ (31.86)	\$ -
457		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
458		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Sep 14	\$ 200.60	\$ (200.60)	\$ -
459		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 132.16	\$ (45.43)	\$ 86.73
460		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 28.32	\$ (28.32)	\$ -
461		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 216.85	\$ (216.85)	\$ -
462		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 188.80	\$ (188.80)	\$ -
463		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 216.85	\$ (216.85)	\$ -
464		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 94.40	\$ (94.40)	\$ -
465		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 88.50	\$ (88.50)	\$ -
466		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 11.21	\$ (11.21)	\$ -
467		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 47.20	\$ (47.20)	\$ -
468		PW5817	24HR HomeCare	28	GN1R		Sep 14 - Nov 14	\$ 84.96	\$ (84.96)	\$ -
469		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 217.12	\$ (217.12)	\$ -
470		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.24	\$ (198.24)	\$ -
471		PW5817	24HR HomeCare	28	GNXR		Jul 14	\$ 151.04	\$ (151.04)	\$ -
472		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.24	\$ (198.24)	\$ -
473		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 140.86	\$ (46.02)	\$ 94.84
474		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Aug 14	\$ 99.12	\$ (99.12)	\$ -
475		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 157.53	\$ (48.97)	\$ 108.56
476		PW5817	24HR HomeCare	28	GN1R		Jul 14	\$ 44.84	\$ (44.84)	\$ -
477		PW5817	24HR HomeCare	28	GN1R		Aug 14 - Sep 14	\$ 99.12	\$ (99.12)	\$ -



**Westside Regional Center  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
478		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 150.45	\$ (106.20)	\$ 44.25
479		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 198.24	\$ (198.24)	\$ -
480		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 206.50	\$ (206.50)	\$ -
481		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
482		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 85.55	\$ (85.55)	\$ -
483		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Oct 14	\$ 47.20	\$ (47.20)	\$ -
484		PW5817	24HR HomeCare	28	GN1R		Jul 14	\$ 17.11	\$ (17.11)	\$ -
485		PW5817	24HR HomeCare	28	GN1R		Aug 14	\$ 20.21	\$ (20.21)	\$ -
486		PW5817	24HR HomeCare	28	GNXR		Jul 14 - Aug 14	\$ 70.80	\$ (67.26)	\$ 3.54
487		PW5817	24HR HomeCare	28	GN1R		Jul 14 - Nov 14	\$ 79.65	\$ (79.65)	\$ -
<b>Total Overpayment for Vendor Number PW5817</b>								<b>\$ 24,675.86</b>	<b>\$ (22,834.60)</b>	<b>\$ 1,841.26</b>
488		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14	\$ 64.05	\$ -	\$ 64.05
489		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 151.89	\$ -	\$ 151.89
490		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 234.24	\$ -	\$ 234.24
491		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 151.28	\$ -	\$ 151.28
492		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14	\$ 22.57	\$ -	\$ 22.57
493		PW5042	Maxim HealthCare Services	28	GNXR		Dec 14 - Jan 15	\$ 7.91	\$ -	\$ 7.91
494		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 157.38	\$ -	\$ 157.38
495		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 90.28	\$ -	\$ 90.28
496		PW5042	Maxim HealthCare Services	28	V11R		Jul 14	\$ 0.31	\$ -	\$ 0.31
497		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 153.72	\$ -	\$ 153.72
498		PW5042	Maxim HealthCare Services	28	V11R		Dec 14	\$ 0.23	\$ -	\$ 0.23
499		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 123.83	\$ -	\$ 123.83
500		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 150.37	\$ -	\$ 150.37
501		PW5042	Maxim HealthCare Services	28	GN1R		Sep 14	\$ 51.24	\$ -	\$ 51.24
502		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Jun 15	\$ 158.60	\$ -	\$ 158.60
503		PW5042	Maxim HealthCare Services	28	V11R		Feb 15 - Jun 15	\$ 103.09	\$ -	\$ 103.09
504		PW5042	Maxim HealthCare Services	28	V11R		Sep 14 - Apr 15	\$ 450.90	\$ -	\$ 450.90
505		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 78.69	\$ -	\$ 78.69
506		PW5042	Maxim HealthCare Services	28	GNXR		Dec 14	\$ 12.14	\$ -	\$ 12.14
507		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 102.48	\$ -	\$ 102.48

**Westside Regional Center  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
508		PW5042	Maxim HealthCare Services	28	V11R		Oct 14 - Jun 15	\$ 86.63	\$ -	\$ 86.63
509		PW5042	Maxim HealthCare Services	28	V11R		Oct 14	\$ 2.75	\$ -	\$ 2.75
510		PW5042	Maxim HealthCare Services	28	V11R		May 15 - Jun 15	\$ 54.90	\$ -	\$ 54.90
511		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Aug 14	\$ 30.50	\$ -	\$ 30.50
512		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Jun 15	\$ 79.62	\$ -	\$ 79.62
513		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 61.00	\$ -	\$ 61.00
514		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Aug 14	\$ 139.08	\$ -	\$ 139.08
515		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 97.60	\$ -	\$ 97.60
516		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Sep 14	\$ 31.42	\$ -	\$ 31.42
517		PW5042	Maxim HealthCare Services	28	V11R		Jan 15	\$ 2.14	\$ -	\$ 2.14
518		PW5042	Maxim HealthCare Services	28	V11R		Apr 15 - Jun 15	\$ 81.14	\$ -	\$ 81.14
519		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 48.19	\$ -	\$ 48.19
520		PW5042	Maxim HealthCare Services	28	V11R		Jan 15	\$ 61.00	\$ -	\$ 61.00
521		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 192.15	\$ -	\$ 192.15
522		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 117.43	\$ -	\$ 117.43
523		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 102.48	\$ -	\$ 102.48
524		PW5042	Maxim HealthCare Services	28	V11R		Jan 15 - Jun 15	\$ 68.32	\$ -	\$ 68.32
525		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 117.12	\$ -	\$ 117.12
526		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 152.50	\$ -	\$ 152.50
527		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 49.41	\$ -	\$ 49.41
528		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 163.48	\$ -	\$ 163.48
529		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 181.78	\$ -	\$ 181.78
530		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 158.60	\$ -	\$ 158.60
531		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 153.72	\$ -	\$ 153.72
532		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 153.72	\$ -	\$ 153.72
533		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 153.72	\$ -	\$ 153.72
534		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 191.54	\$ -	\$ 191.54
535		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 109.80	\$ -	\$ 109.80
536		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 109.80	\$ -	\$ 109.80
537		PW5042	Maxim HealthCare Services	28	V11R		Jan 15 - Jun 15	\$ 208.01	\$ -	\$ 208.01
538		PW5042	Maxim HealthCare Services	28	V11R		Aug 14	\$ 25.01	\$ -	\$ 25.01
539		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 49.41	\$ -	\$ 49.41

**Westside Regional Center  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
540		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 153.42	\$ -	\$ 153.42
541		PW5042	Maxim HealthCare Services	28	V11R		Sep 14 - Jun 15	\$ 49.41	\$ -	\$ 49.41
542		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 72.30	\$ -	\$ 72.30
543		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 53.07	\$ -	\$ 53.07
544		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 116.51	\$ -	\$ 116.51
545		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 106.14	\$ -	\$ 106.14
546		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 197.03	\$ -	\$ 197.03
547		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 43.31	\$ -	\$ 43.31
548		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 49.41	\$ -	\$ 49.41
549		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 90.28	\$ -	\$ 90.28
550		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 60.39	\$ -	\$ 60.39
551		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 204.96	\$ -	\$ 204.96
552		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 152.50	\$ -	\$ 152.50
553		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 147.62	\$ -	\$ 147.62
554		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 49.41	\$ -	\$ 49.41
555		PW5042	Maxim HealthCare Services	28	GNXR		Jul 14 - Jun 15	\$ 49.41	\$ -	\$ 49.41
556		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 62.83	\$ -	\$ 62.83
557		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14	\$ 12.88	\$ -	\$ 12.88
558		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 60.39	\$ -	\$ 60.39
559		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 28.89	\$ -	\$ 28.89
560		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 49.41	\$ -	\$ 49.41
561		PW5042	Maxim HealthCare Services	28	V11R		Apr 15 - Jun 15	\$ 33.55	\$ -	\$ 33.55
562		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 32.94	\$ -	\$ 32.94
563		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Aug 14	\$ 81.74	\$ -	\$ 81.74
564		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 107.97	\$ -	\$ 107.97
565		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 150.67	\$ -	\$ 150.67
566		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 234.85	\$ -	\$ 234.85
567		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Jun 15	\$ 70.11	\$ -	\$ 70.11
568		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 96.99	\$ -	\$ 96.99
569		PW5042	Maxim HealthCare Services	28	V11R		Dec 14 - Jun 15	\$ 139.72	\$ -	\$ 139.72
570		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 122.00	\$ -	\$ 122.00
571		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 204.96	\$ -	\$ 204.96

**Westside Regional Center  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
572		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 152.50	\$ -	\$ 152.50
573		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 73.20	\$ -	\$ 73.20
574		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 146.40	\$ -	\$ 146.40
575		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 102.48	\$ -	\$ 102.48
576		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 131.16	\$ -	\$ 131.16
577		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Oct 14	\$ 187.27	\$ -	\$ 187.27
578		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 153.11	\$ -	\$ 153.11
579		PW5042	Maxim HealthCare Services	28	V11R		Jan 15 - Jun 15	\$ 72.59	\$ -	\$ 72.59
580		PW5042	Maxim HealthCare Services	28	V11R		Jul 14 - Jun 15	\$ 201.30	\$ -	\$ 201.30
581		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 204.96	\$ -	\$ 204.96
582		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 204.96	\$ -	\$ 204.96
583		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Jun 15	\$ 123.83	\$ -	\$ 123.83
584		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 161.04	\$ -	\$ 161.04
585		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 136.64	\$ -	\$ 136.64
586		PW5042	Maxim HealthCare Services	28	V11R		Jan 15	\$ 1.53	\$ -	\$ 1.53
587		PW5042	Maxim HealthCare Services	28	V11R		May 15 - Jun 15	\$ 82.36	\$ -	\$ 82.36
588		PW5042	Maxim HealthCare Services	28	GNXR		Dec 14	\$ 0.23	\$ -	\$ 0.23
589		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 117.12	\$ -	\$ 117.12
590		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 102.48	\$ -	\$ 102.48
591		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 151.28	\$ -	\$ 151.28
592		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 175.07	\$ -	\$ 175.07
593		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 96.99	\$ -	\$ 96.99
594		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 143.05	\$ -	\$ 143.05
595		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 195.20	\$ -	\$ 195.20
596		PW5042	Maxim HealthCare Services	28	GNXR		Jul 14	\$ 1,353.60	\$ -	\$ 1,353.60
597		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 49.41	\$ -	\$ 49.41
598		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Jun 15	\$ 123.83	\$ -	\$ 123.83
599		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 136.64	\$ -	\$ 136.64
600		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 195.20	\$ -	\$ 195.20
601		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 59.17	\$ -	\$ 59.17
602		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 45.14	\$ -	\$ 45.14
603		PW5042	Maxim HealthCare Services	28	V11R		Sep 14 - Jun 15	\$ 106.14	\$ -	\$ 106.14

**Westside Regional Center  
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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
604		PW5042	Maxim HealthCare Services	28	V11R		Jan 15 - Jun 15	\$ 150.48	\$ -	\$ 150.48
605		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 199.17	\$ -	\$ 199.17
606		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 200.08	\$ -	\$ 200.08
607		PW5042	Maxim HealthCare Services	28	GN1R		Aug 14 - Sep 14	\$ 70.15	\$ -	\$ 70.15
608		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Sep 14	\$ 75.03	\$ -	\$ 75.03
609		PW5042	Maxim HealthCare Services	28	GN1R		Jul 14 - Oct 14	\$ 80.03	\$ -	\$ 80.03
<b>Total Overpayment for Vendor Number PW5042</b>								<b>\$ 14,545.06</b>	<b>\$ -</b>	<b>\$ 14,545.06</b>
610		H19312	Specialized Health Services	515			May 14	\$ 10.30	\$ -	\$ 10.30
611		H19312	Specialized Health Services	515			Jan 13	\$ 51.85	\$ -	\$ 51.85
612		H19312	Specialized Health Services	515			Feb 13	\$ 30.50	\$ -	\$ 30.50
613		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 643.55	\$ -	\$ 643.55
614		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 442.90	\$ -	\$ 442.90
615		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 457.32	\$ -	\$ 457.32
616		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 360.50	\$ -	\$ 360.50
617		H19312	Specialized Health Services	515			Jul 12 - Aug 12	\$ 54.90	\$ -	\$ 54.90
618		H19312	Specialized Health Services	515			Nov 12 - Apr 13	\$ 149.45	\$ -	\$ 149.45
619		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 405.65	\$ -	\$ 405.65
620		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 269.86	\$ -	\$ 269.86
621		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 214.24	\$ -	\$ 214.24
622		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 191.58	\$ -	\$ 191.58
623		H19312	Specialized Health Services	515			Jul 12 - Nov 12	\$ 262.30	\$ -	\$ 262.30
624		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 134.20	\$ -	\$ 134.20
625		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 94.76	\$ -	\$ 94.76
626		H19312	Specialized Health Services	515			Jul 14 - Mar 15	\$ 74.16	\$ -	\$ 74.16
627		H19312	Specialized Health Services	515			Jan 16 - Mar 16	\$ 22.66	\$ -	\$ 22.66
628		H19312	Specialized Health Services	515			Jul 12 - Sep 12	\$ 186.05	\$ -	\$ 186.05
629		H19312	Specialized Health Services	515			Oct 12 - Jun 13	\$ 533.75	\$ -	\$ 533.75
630		H19312	Specialized Health Services	515			Jul 13 - Sep 13	\$ 129.78	\$ -	\$ 129.78
631		H19312	Specialized Health Services	515			Oct 13 - Jun 14	\$ 362.56	\$ -	\$ 362.56
632		H19312	Specialized Health Services	515			Jul 14 - Sep 14	\$ 131.84	\$ -	\$ 131.84
633		H19312	Specialized Health Services	515			Oct14 - Jun 15	\$ 364.62	\$ -	\$ 364.62

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No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
634		H19312	Specialized Health Services	515			Jul 15 - Sep 15	\$ 131.84	\$ -	\$ 131.84
635		H19312	Specialized Health Services	515			Oct 15 - Apr 16	\$ 288.40	\$ -	\$ 288.40
636		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 305.00	\$ -	\$ 305.00
637		H19312	Specialized Health Services	515			Jul 13 - May 14	\$ 183.34	\$ -	\$ 183.34
638		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 228.66	\$ -	\$ 228.66
639		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 212.18	\$ -	\$ 212.18
640		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 393.46	\$ -	\$ 393.46
641		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 664.90	\$ -	\$ 664.90
642		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 463.50	\$ -	\$ 463.50
643		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 389.34	\$ -	\$ 389.34
644		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 716.75	\$ -	\$ 716.75
645		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 477.92	\$ -	\$ 477.92
646		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 500.58	\$ -	\$ 500.58
647		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 422.30	\$ -	\$ 422.30
648		H19312	Specialized Health Services	515			Aug 13 - Jun 14	\$ 387.28	\$ -	\$ 387.28
649		H19312	Specialized Health Services	515			Jul 14 - May 14	\$ 436.72	\$ -	\$ 436.72
650		H19312	Specialized Health Services	515			Aug 15 - Apr 16	\$ 331.66	\$ -	\$ 331.66
651		H19312	Specialized Health Services	515			Jul 12 - Aug 12	\$ 67.10	\$ -	\$ 67.10
652		H19312	Specialized Health Services	515			Aug 12 - Jun 13	\$ 664.90	\$ -	\$ 664.90
653		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 486.16	\$ -	\$ 486.16
654		H19312	Specialized Health Services	515			Jul 14 - Jan 15	\$ 280.16	\$ -	\$ 280.16
655		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 628.30	\$ -	\$ 628.30
656		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 473.80	\$ -	\$ 473.80
657		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 463.50	\$ -	\$ 463.50
658		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 383.16	\$ -	\$ 383.16
659		H19312	Specialized Health Services	515			Jul 12	\$ 64.05	\$ -	\$ 64.05
660		H19312	Specialized Health Services	515			Aug 12 - Jun 13	\$ 671.00	\$ -	\$ 671.00
661		H19312	Specialized Health Services	515			Jul 13	\$ 43.26	\$ -	\$ 43.26
662		H19312	Specialized Health Services	515			Aug 13 - Jun 14	\$ 442.90	\$ -	\$ 442.90
663		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 500.58	\$ -	\$ 500.58
664		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 420.24	\$ -	\$ 420.24
665		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 524.60	\$ -	\$ 524.60

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
666		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 374.92	\$ -	\$ 374.92
667		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 416.12	\$ -	\$ 416.12
668		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 395.52	\$ -	\$ 395.52
669		H19312	Specialized Health Services	515			Jul 12	\$ 54.90	\$ -	\$ 54.90
670		H19312	Specialized Health Services	515			Aug 12 - Oct 12	\$ 134.20	\$ -	\$ 134.20
671		H19312	Specialized Health Services	515			Nov 12 - Feb 13	\$ 161.65	\$ -	\$ 161.65
672		H19312	Specialized Health Services	515			Mar 13 - Jun 13	\$ 216.55	\$ -	\$ 216.55
673		H19312	Specialized Health Services	515			Jul 13 - Oct 13	\$ 113.30	\$ -	\$ 113.30
674		H19312	Specialized Health Services	515			Feb 13 - Jun 13	\$ 183.00	\$ -	\$ 183.00
675		H19312	Specialized Health Services	515			Jul 13 - Oct 13	\$ 78.28	\$ -	\$ 78.28
676		H19312	Specialized Health Services	515			Jul 12 - Sep 12	\$ 186.05	\$ -	\$ 186.05
677		H19312	Specialized Health Services	515			Oct 12 - Jun 13	\$ 539.85	\$ -	\$ 539.85
678		H19312	Specialized Health Services	515			Jul 13 - Sep 13	\$ 129.78	\$ -	\$ 129.78
679		H19312	Specialized Health Services	515			Oct 13 - Jun 14	\$ 331.66	\$ -	\$ 331.66
680		H19312	Specialized Health Services	515			Jul 14 - Sep 14	\$ 129.78	\$ -	\$ 129.78
681		H19312	Specialized Health Services	515			Oct 14 - Jun 15	\$ 356.38	\$ -	\$ 356.38
682		H19312	Specialized Health Services	515			Jul 15 - Dec 15	\$ 247.20	\$ -	\$ 247.20
683		H19312	Specialized Health Services	515			Jan 16 - Apr 16	\$ 166.86	\$ -	\$ 166.86
684		H19312	Specialized Health Services	515			Oct 12 - Jun 13	\$ 491.05	\$ -	\$ 491.05
685		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 477.92	\$ -	\$ 477.92
686		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 370.80	\$ -	\$ 370.80
687		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 405.82	\$ -	\$ 405.82
688		H19312	Specialized Health Services	515			Jul 12 - Apr 13	\$ 579.50	\$ -	\$ 579.50
689		H19312	Specialized Health Services	515			May 13 - Jun 13	\$ 118.95	\$ -	\$ 118.95
690		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 455.26	\$ -	\$ 455.26
691		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 451.14	\$ -	\$ 451.14
692		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 387.28	\$ -	\$ 387.28
693		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 716.75	\$ -	\$ 716.75
694		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 482.04	\$ -	\$ 482.04
695		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 486.16	\$ -	\$ 486.16
696		H19312	Specialized Health Services	515			Jul 15 - Dec 15	\$ 226.60	\$ -	\$ 226.60
697		H19312	Specialized Health Services	515			Aug 13 - Jun 14	\$ 424.36	\$ -	\$ 424.36

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
698		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 490.28	\$ -	\$ 490.28
699		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 397.58	\$ -	\$ 397.58
700		H19312	Specialized Health Services	515			Oct14 - Jun 15	\$ 360.50	\$ -	\$ 360.50
701		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 381.10	\$ -	\$ 381.10
702		H19312	Specialized Health Services	515			Jul 12 - Jun 13	\$ 698.45	\$ -	\$ 698.45
703		H19312	Specialized Health Services	515			Jul 13 - Jun 14	\$ 428.48	\$ -	\$ 428.48
704		H19312	Specialized Health Services	515			Jul 14 - Jun 15	\$ 451.14	\$ -	\$ 451.14
705		H19312	Specialized Health Services	515			Jul 15 - Apr 16	\$ 383.16	\$ -	\$ 383.16
<b>Total Overpayment for Vendor Number H19312</b>								<b>\$ 32,107.14</b>	<b>\$ -</b>	<b>\$ 32,107.14</b>
706		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,186.07	\$ (1,186.07)	\$ -
707		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
708		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
709		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,386.13	\$ (1,386.13)	\$ -
710		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,128.91	\$ (1,128.91)	\$ -
711		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,257.52	\$ (1,257.52)	\$ -
712		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,128.91	\$ (1,128.91)	\$ -
713		HW0580	Another Beginning Inc.	515			Jul 15 - Sep 15	\$ 828.82	\$ (828.82)	\$ -
714		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
715		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
716		HW0580	Another Beginning Inc.	515			Jul 15 - Oct 15	\$ 1,200.36	\$ (1,200.36)	\$ -
717		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
718		HW0580	Another Beginning Inc.	515			Jul 15- Sep 15	\$ 914.56	\$ (914.56)	\$ -
719		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
720		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
721		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,086.04	\$ (1,086.04)	\$ -
722		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
723		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
724		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 571.60	\$ (571.60)	\$ -
725		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 971.72	\$ (971.72)	\$ -
726		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
727		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,214.65	\$ (1,214.65)	\$ -



**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
728		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
729		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,157.49	\$ (1,157.49)	\$ -
730		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,186.07	\$ (1,186.07)	\$ -
731		HW0580	Another Beginning Inc.	515			Jul 15- Sep 15	\$ 871.69	\$ (871.69)	\$ -
732		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,186.07	\$ (1,186.07)	\$ -
733		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,114.62	\$ (1,114.62)	\$ -
734		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
735		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,486.16	\$ (1,486.16)	\$ -
736		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
737		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,486.16	\$ (1,486.16)	\$ -
738		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
739		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,214.65	\$ (1,214.65)	\$ -
740		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
741		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
742		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
743		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,500.45	\$ (1,500.45)	\$ -
744		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,186.07	\$ (1,186.07)	\$ -
745		HW0580	Another Beginning Inc.	515			Jul 15- Sep 15	\$ 914.56	\$ (914.56)	\$ -
746		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
747		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,429.00	\$ (1,429.00)	\$ -
748		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,114.62	\$ (1,114.62)	\$ -
749		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 457.28	\$ (457.28)	\$ -
750		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,157.49	\$ (1,157.49)	\$ -
751		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 600.18	\$ (600.18)	\$ -
752		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
753		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,471.87	\$ (1,471.87)	\$ -
754		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
755		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,071.75	\$ (1,071.75)	\$ -
756		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
757		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
758		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
759		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
760		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
761		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,471.87	\$ (1,471.87)	\$ -
762		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
763		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,500.45	\$ (1,500.45)	\$ -
764		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
765		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,457.58	\$ (1,457.58)	\$ -
766		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
767		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,157.49	\$ (1,157.49)	\$ -
768		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,471.87	\$ (1,471.87)	\$ -
769		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
770		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,429.00	\$ (1,429.00)	\$ -
771		HW0580	Another Beginning Inc.	515			Jul 15 - Sep 15	\$ 914.56	\$ (914.56)	\$ -
772		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,214.65	\$ (1,214.65)	\$ -
773		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 600.18	\$ (600.18)	\$ -
774		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,200.36	\$ (1,200.36)	\$ -
775		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,214.65	\$ (1,214.65)	\$ -
776		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,143.20	\$ (1,143.20)	\$ -
777		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,171.78	\$ (1,171.78)	\$ -
778		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,114.62	\$ (1,114.62)	\$ -
779		HW0580	Another Beginning Inc.	515			Jul 15- Nov 15	\$ 1,443.29	\$ (1,443.29)	\$ -
780		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,171.78	\$ (1,171.78)	\$ -
781		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,214.65	\$ (1,214.65)	\$ -
782		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
783		HW0580	Another Beginning Inc.	515			Jul 15- Oct 15	\$ 1,200.36	\$ (1,200.36)	\$ -
784		HW0580	Another Beginning Inc.	515			Mar 15 - Jun 15	\$ 1,228.94	\$ (1,228.94)	\$ -
785		HW0580	Another Beginning Inc.	515			Jul 15 - Aug 15	\$ 614.47	\$ (614.47)	\$ -
<b>Total Overpayment for Vendor Number H19312</b>								<b>\$ 89,698.33</b>	<b>\$ (89,698.33)</b>	<b>\$ -</b>
<b>Total Overstated Claims</b>								<b>\$ 279,084.91</b>	<b>\$ (182,097.99)</b>	<b>\$ 48,493.46</b>

**Westside Regional Center  
Over and Understated Claims  
Fiscal Years 2014-15 and 2015-16**

No.	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Over/Under- Stated Claims	Resolved	Balance
1		PW5042	Maxim HealthCare Services	28	GNXR		Jul 14	\$ (4.88)	\$ -	\$ (4.88)
2		PW5042	Maxim HealthCare Services	28	V11R		Aug 14	\$ (63.75)	\$ -	\$ (63.75)
3		PW5042	Maxim HealthCare Services	28	V11R		Jan 15	\$ (0.31)	\$ -	\$ (0.31)
4		PW5042	Maxim HealthCare Services	28	V11R		Feb 15 - Mar 15	\$ (57.95)	\$ -	\$ (57.95)
5		PW5042	Maxim HealthCare Services	28	V11R		Aug 14	\$ (4.27)	\$ -	\$ (4.27)
6		PW5042	Maxim HealthCare Services	28	V11R		Mar 15	\$ (51.24)	\$ -	\$ (51.24)
7		PW5042	Maxim HealthCare Services	28	V11R		Apr 15	\$ (0.30)	\$ -	\$ (0.30)
8		PW5042	Maxim HealthCare Services	28	V11R		Apr 15	\$ (2.74)	\$ -	\$ (2.74)
9		PW5042	Maxim HealthCare Services	28	V11R		Feb 15	\$ (21.96)	\$ -	\$ (21.96)
10		PW5042	Maxim HealthCare Services	28	V11R		Apr 15	\$ (1.52)	\$ -	\$ (1.52)
11		PW5042	Maxim HealthCare Services	28	V11R		Dec 14 - Jun 15	\$ (76.91)	\$ -	\$ (76.91)
12		PW5042	Maxim HealthCare Services	28	V11R		Oct 14	\$ (10.37)	\$ -	\$ (10.37)
13		PW5042	Maxim HealthCare Services	28	V11R		Sep 14 - Oct 14	\$ (34.77)	\$ -	\$ (34.77)
14		PW5042	Maxim HealthCare Services	28	GNXR		Dec 14	\$ (15.25)	\$ -	\$ (15.25)
15		PW5042	Maxim HealthCare Services	28	GNXR		Jul 14	\$ (6.10)	\$ -	\$ (6.10)
16		PW5042	Maxim HealthCare Services	28	GNXR		Aug 14	\$ (32.36)	\$ -	\$ (32.36)
17		PW5042	Maxim HealthCare Services	28	V11R		Aug 14 - Feb 15	\$ (639.26)	\$ -	\$ (639.26)
18		PW5042	Maxim HealthCare Services	28	GNXR		Dec 14	\$ (52.46)	\$ -	\$ (52.46)
19		PW5042	Maxim HealthCare Services	28	V11R		Feb 15	\$ (9.15)	\$ -	\$ (9.15)
20		PW5042	Maxim HealthCare Services	28	V11R		Oct 14	\$ (0.61)	\$ -	\$ (0.61)
21		PW5042	Maxim HealthCare Services	28	V11R		Mar 15	\$ (26.23)	\$ -	\$ (26.23)
22		PW5042	Maxim HealthCare Services	28	V11R		Jan 15 - Apr 15	\$ (100.65)	\$ -	\$ (100.65)
23		PW5042	Maxim HealthCare Services	28	V11R		Feb 15 - Mar 15	\$ (45.14)	\$ -	\$ (45.14)
24		PW5042	Maxim HealthCare Services	28	V11R		Jul 14 - Feb 15	\$ (299.58)	\$ -	\$ (299.58)
25		PW5042	Maxim HealthCare Services	28	V11R		Mar 15	\$ (51.24)	\$ -	\$ (51.24)
26		PW5042	Maxim HealthCare Services	28	V11R		Feb 15 - Apr 15	\$ (21.96)	\$ -	\$ (21.96)
27		PW5042	Maxim HealthCare Services	28	V11R		Mar 15 - Apr 15	\$ (54.90)	\$ -	\$ (54.90)
28		PW5042	Maxim HealthCare Services	28	GNXR		Jul 14	\$ (62.83)	\$ -	\$ (62.83)
<b>Total Understated Claims</b>								<b>\$ (1,748.69)</b>	<b>\$ -</b>	<b>\$ (1,748.69)</b>

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
<b>CPP Funds Allocated to Consumers Not on the DC Movers List</b>								
1		H17166	Superior Mobility, Inc.	725	G1SRC		201509	\$1,986.30
2		H89090	Brilliant Corners	104	CCGRC		201410	\$10,688.70
3		H89090	Brilliant Corners	104	CCGRC		201411	\$2,200.00
4		H89090	Brilliant Corners	104	CCGRC		201412	\$4,310.00
5		H89090	Brilliant Corners	104	CCGRC		201412	\$6,704.50
6		HJ0018	Quality Home Health	854	G1SRC		201407	\$10,061.36
7		HJ0018	Quality Home Health	854	G1SRC		201408	\$9,736.80
8		HJ0018	Quality Home Health	854	G1SRC		201409	\$9,736.80
9		HJ0018	Quality Home Health	854	G1SRC		201410	\$7,140.32
10		HW0501	Diverse Journeys Inc.	904	VN3AC		201603	\$5,533.76
11		HW0501	Diverse Journeys Inc.	904	VN3AC		201603	\$4,994.24
12		HW0501	Diverse Journeys Inc.	904	VN3AC		201604	\$10,528.00
13		HW0502	Easter Seals So. Cal.	515	C3SRC		201509	\$1,448.40
14		HW0502	Easter Seals So. Cal.	515	C3SRC		201510	\$1,375.98
15		HW0502	Easter Seals So. Cal.	515	C3SRC		201511	\$869.04
16		HW0502	Easter Seals So. Cal.	515	C3SRC		201512	\$1,303.56
17		HW0502	Easter Seals So. Cal.	515	C3SRC		201601	\$1,231.14
18		HW0502	Easter Seals So. Cal.	515	C3SRC		201602	\$1,303.56
19		HW0502	Easter Seals So. Cal.	515	C3SRC		201603	\$1,665.66
20		HW0502	Easter Seals So. Cal.	515	C3SRC		201604	\$1,375.98
21		P66263	Home Ownership Made Eas	101	VN4AC		201507	\$8.75
22		PD0494	Waterson & Huth, LLP	610	CCGRC		201501	\$337.50
23		PD0494	Waterson & Huth, LLP	610	CCGRC		201509	\$180.00
24		PD0494	Waterson & Huth, LLP	610	CCGRC		201510	\$720.00
25		PD0494	Waterson & Huth, LLP	610	CCGRC		201511	\$315.00
26		PM1777	Unipharma, Inc.	765	VCORC		201408	\$77.62

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
27		PM1777	Unipharma, Inc.	765	VCORC		201409	\$75.03
28		PM1777	Unipharma, Inc.	765	VCORC		201410	\$119.74
29		PW0220		890	TZARC		201407	\$129.78
30		PW0220		890	TZARC		201408	\$129.78
31		PW0220		890	TZARC		201409	\$129.78
32		PW0220		890	TZARC		201410	\$135.96
33		PW0220		890	TZARC		201411	\$105.06
34		PW0220		890	TZARC		201412	\$123.60
35		PW0220		890	TZARC		201501	\$123.60
36		PW0220		890	TZARC		201502	\$117.42
37		PW0220		890	TZARC		201503	\$129.78
38		PW0220		890	TZARC		201504	\$135.96
39		PW0220		890	TZARC		201505	\$123.60
40		PW0220		890	TZARC		201506	\$135.96
41		PW0220		890	TZARC		201507	\$135.96
42		PW0220		890	TZARC		201508	\$129.78
43		PW0220		890	TZARC		201509	\$129.78
44		PW0220		890	TZARC		201510	\$129.78
45		PW0220		890	TZARC		201511	\$117.42
46		PW0220		890	TZARC		201512	\$129.78
47		PW0220		890	TZARC		201601	\$117.42
48		PW0220		890	TZARC		201602	\$123.60
49		PW0220		890	TZARC		201603	\$142.14
50		PW0220		890	TZARC		201604	\$129.78
51		PW0264		890	TZARC		201407	\$111.24
52		PW0264		890	TZARC		201408	\$74.16
53		PW0264		890	TZARC		201409	\$105.06

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
54		PW0264		890	TZARC		201410	\$117.42
55		PW0264		890	TZARC		201411	\$49.44
56		PW0264		890	TZARC		201412	\$80.34
57		PW0264		890	TZARC		201501	\$67.98
58		PW0264		890	TZARC		201502	\$74.16
59		PW0264		890	TZARC		201503	\$98.88
60		PW0264		890	TZARC		201504	\$98.88
61		PW0264		890	TZARC		201505	\$92.70
62		PW0264		890	TZARC		201506	\$98.88
63		PW0264		890	TZARC		201507	\$74.16
64		PW0264		890	TZARC		201508	\$86.52
65		PW0264		890	TZARC		201509	\$86.52
66		PW0264		890	TZARC		201510	\$111.24
67		PW0264		890	TZARC		201511	\$67.98
68		PW0264		890	TZARC		201512	\$86.52
69		PW0264		890	TZARC		201601	\$92.70
70		PW0264		890	TZARC		201602	\$67.98
71		PW0264		890	TZARC		201603	\$98.88
72		PW0264		890	TZARC		201604	\$105.06
73		PW2147	Stephanie Young Consultant	056	VAGRC		201509	\$2,250.00
74		PW2147	Stephanie Young Consultant	056	VAGRC		201510	\$2,250.00
75		PW5096		890	TZARC		201407	\$135.96
76		PW5096		890	TZARC		201408	\$129.78
77		PW5096		890	TZARC		201409	\$129.78
78		PW5096		890	TZARC		201410	\$135.96
79		PW5096		890	TZARC		201411	\$105.06
80		PW5096		890	TZARC		201412	\$117.42

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
81		PW5096		890	TZARC		201501	\$117.42
82		PW5096		890	TZARC		201502	\$117.42
83		PW5096		890	TZARC		201503	\$129.78
84		PW5096		890	TZARC		201504	\$135.96
85		PW5096		890	TZARC		201505	\$117.42
86		PW5096		890	TZARC		201506	\$135.96
87		PW5096		890	TZARC		201507	\$135.96
88		PW5096		890	TZARC		201508	\$129.78
89		PW5096		890	TZARC		201509	\$129.78
90		PW5096		890	TZARC		201510	\$484.00
91		PW5096		890	TZARC		201601	\$117.42
92		PW5096		890	TZARC		201602	\$129.78
93		PW5096		890	TZARC		201603	\$284.28
94		PW5096		890	TZARC		201604	\$123.60
95		PW5818	New Leaf	034	G1SRC		201503	\$100.00
96		PW5818	New Leaf	034	G1SRC		201504	\$100.00
97		PW5818	New Leaf	034	G1SRC		201505	\$100.00
98		PW5818	New Leaf	034	G1SRC		201506	\$100.00
99		PW5818	New Leaf	034	G1SRC		201407	\$100.00
100		PW5818	New Leaf	034	G1SRC		201408	\$100.00
101		PW5818	New Leaf	034	G1SRC		201409	\$100.00
102		PW5818	New Leaf	034	G1SRC		201410	\$100.00
103		PW5818	New Leaf	034	G1SRC		201411	\$100.00
104		PW5818	New Leaf	034	G1SRC		201412	\$100.00
105		PW5818	New Leaf	034	G1SRC		201501	\$100.00
106		PW5818	New Leaf	034	G1SRC		201502	\$100.00
107		PW5818	New Leaf	034	G1SRC		201503	\$100.00

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
108		PW5818	New Leaf	034	G1SRC		201504	\$100.00
109		PW5818	New Leaf	034	G1SRC		201505	\$100.00
110		PW5818	New Leaf	034	G1SRC		201506	\$100.00
111		PW5818	New Leaf	034	G1SRC		201507	\$100.00
112		PW5818	New Leaf	034	G1SRC		201508	\$100.00
113		PW5818	New Leaf	034	G1SRC		201509	\$100.00
114		PW5818	New Leaf	034	G1SRC		201510	\$100.00
115		PW5818	New Leaf	034	G1SRC		201511	\$100.00
116		PW5818	New Leaf	034	G1SRC		201512	\$100.00
117		PW5818	New Leaf	034	G1SRC		201601	\$100.00
118		PW5818	New Leaf	034	G1SRC		201602	\$100.00
119		PW6274		055	VN1RC		201407	\$1,133.00
120		PW6274		055	VN1RC		201408	\$1,081.50
121		PW6274		055	VN1RC		201409	\$1,081.50
122		PW6274		055	VN1RC		201410	\$1,133.00
123		PW6274		055	VN1RC		201411	\$875.50
124		PW6274		055	VN1RC		201412	\$1,030.00
125		PW6274		055	VN1RC		201501	\$1,030.00
126		PW6274		055	VN1RC		201504	\$1,133.00
127		PW6274		055	VN1RC		201505	\$1,081.50
128		PW6274		055	VN1RC		201506	\$1,133.00
129		PW6274		055	VN1RC		201507	\$1,184.50
130		PW6274		055	VN1RC		201508	\$1,081.50
131		PW6274		055	VN1RC		201509	\$1,133.00
132		PW6274		055	VN1RC		201510	\$1,133.00
133		PW6274		055	VN1RC		201511	\$1,081.50
134		PW6274		055	VN1RC		201512	\$1,184.50



**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
135		PW6274		055	VN1RC		201601	\$1,081.50
136		PW6274		055	VN1RC		201602	\$1,081.50
137		PW6274		055	VN1RC		201603	\$1,184.50
138		PW6274		055	VN1RC		201604	\$1,081.50
139		PW6289	Easter Seals of So. Cal	111	C3SRC		201603	\$256.60
140		PW6289	Easter Seals of So. Cal	111	C3SRC		201604	\$269.43
141		PW6289	Easter Seals of So. Cal	111	C3SRC		201407	\$179.62
142		PW6289	Easter Seals of So. Cal	111	C3SRC		201408	\$205.28
143		PW6289	Easter Seals of So. Cal	111	C3SRC		201409	\$256.60
144		PW6289	Easter Seals of So. Cal	111	C3SRC		201410	\$269.43
145		PW6289	Easter Seals of So. Cal	111	C3SRC		201411	\$218.11
146		PW6289	Easter Seals of So. Cal	111	C3SRC		201412	\$179.62
147		PW6289	Easter Seals of So. Cal	111	C3SRC		201501	\$243.77
148		PW6289	Easter Seals of So. Cal	111	C3SRC		201502	\$243.77
149		PW6289	Easter Seals of So. Cal	111	C3SRC		201503	\$269.43
150		PW6289	Easter Seals of So. Cal	111	C3SRC		201504	\$256.60
151		PW6289	Easter Seals of So. Cal	111	C3SRC		201505	\$256.60
152		PW6289	Easter Seals of So. Cal	111	C3SRC		201506	\$282.26
153		PW6289	Easter Seals of So. Cal	111	C3SRC		201507	\$282.26
154		PW6289	Easter Seals of So. Cal	111	C3SRC		201508	\$256.60
155		PW6289	Easter Seals of So. Cal	111	C3SRC		201509	\$256.60
156		PW6289	Easter Seals of So. Cal	111	C3SRC		201510	\$269.43
157		PW6289	Easter Seals of So. Cal	111	C3SRC		201511	\$205.28
158		PW6289	Easter Seals of So. Cal	111	C3SRC		201512	\$192.45
159		PW6289	Easter Seals of So. Cal	111	C3SRC		201601	\$205.28
160		PW6289	Easter Seals of So. Cal	111	C3SRC		201602	\$256.60
161		PW6289	Easter Seals of So. Cal	111	C3SRC		201603	\$295.09

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
162		PW6289	Easter Seals of So. Cal	111	C3SRC		201604	\$256.60
163		PW6289	Easter Seals of So. Cal	111	C3SRC		201509	\$256.60
164		PW6289	Easter Seals of So. Cal	111	C3SRC		201510	\$243.77
165		PW6289	Easter Seals of So. Cal	111	C3SRC		201511	\$153.96
166		PW6289	Easter Seals of So. Cal	111	C3SRC		201512	\$230.94
167		PW6289	Easter Seals of So. Cal	111	C3SRC		201601	\$218.11
168		PW6289	Easter Seals of So. Cal	111	C3SRC		201602	\$230.94
169		PW6289	Easter Seals of So. Cal	111	C3SRC		201603	\$295.09
170		PW6289	Easter Seals of So. Cal	111	C3SRC		201604	\$243.77
171		PW6289	Easter Seals of So. Cal	111	C3SRC		201412	\$153.96
172		PW6289	Easter Seals of So. Cal	111	C3SRC		201501	\$51.32
173		PW6289	Easter Seals of So. Cal	111	C3SRC		201502	\$89.81
174		PW6289	Easter Seals of So. Cal	111	C3SRC		201503	\$166.79
175		PW6289	Easter Seals of So. Cal	111	C3SRC		201504	\$166.79
176		PW6289	Easter Seals of So. Cal	111	C3SRC		201505	\$141.13
177		PW6289	Easter Seals of So. Cal	111	C3SRC		201506	\$166.79
178		PW6289	Easter Seals of So. Cal	111	C3SRC		201507	\$192.45
179		PW6289	Easter Seals of So. Cal	111	C3SRC		201508	\$243.77
180		PW6289	Easter Seals of So. Cal	111	C3SRC		201509	\$243.77
181		PW6289	Easter Seals of So. Cal	111	C3SRC		201510	\$256.60
182		PW6289	Easter Seals of So. Cal	111	C3SRC		201511	\$230.94
183		PW6289	Easter Seals of So. Cal	111	C3SRC		201512	\$243.77
184		PW6289	Easter Seals of So. Cal	111	C3SRC		201601	\$205.28
185		PW6289	Easter Seals of So. Cal	111	C3SRC		201602	\$243.77
186		PW6289	Easter Seals of So. Cal	111	C3SRC		201603	\$269.43
187		PW6289	Easter Seals of So. Cal	111	C3SRC		201604	\$269.43
188		PW6289	Easter Seals of So. Cal	111	C3SRC		201603	\$12.83

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
189		PW6289	Easter Seals of So. Cal	111	C3SRC		201604	\$243.77
190		PW6611	Community Integrated Work	102	CN1RC		201409	\$400.00
191		PW6708	Easter Seals of So. Cal	111	C3SRC		201407	\$179.62
192		PW6708	Easter Seals of So. Cal	111	C3SRC		201408	\$269.43
193		PW6708	Easter Seals of So. Cal	111	C3SRC		201409	\$256.60
194		PW6708	Easter Seals of So. Cal	111	C3SRC		201410	\$282.26
195		PW6708	Easter Seals of So. Cal	111	C3SRC		201411	\$205.28
196		PW6708	Easter Seals of So. Cal	111	C3SRC		201412	\$218.11
197		PW6708	Easter Seals of So. Cal	111	C3SRC		201501	\$230.94
198		PW6708	Easter Seals of So. Cal	111	C3SRC		201502	\$243.77
199		PW6708	Easter Seals of So. Cal	111	C3SRC		201503	\$243.77
200		PW6708	Easter Seals of So. Cal	111	C3SRC		201504	\$205.28
201		PW6708	Easter Seals of So. Cal	111	C3SRC		201505	\$230.94
202		PW6708	Easter Seals of So. Cal	111	C3SRC		201506	\$256.60
203		PW6708	Easter Seals of So. Cal	111	C3SRC		201507	\$256.60
204		PW6708	Easter Seals of So. Cal	111	C3SRC		201508	\$256.60
205		PW6708	Easter Seals of So. Cal	111	C3SRC		201509	\$269.43
206		PW6708	Easter Seals of So. Cal	111	C3SRC		201510	\$230.94
207		PW6708	Easter Seals of So. Cal	111	C3SRC		201511	\$205.28
208		PW6708	Easter Seals of So. Cal	111	C3SRC		201512	\$230.94
209		PW6708	Easter Seals of So. Cal	111	C3SRC		201601	\$192.45
210		PW6708	Easter Seals of So. Cal	111	C3SRC		201602	\$230.94
211		PW6708	Easter Seals of So. Cal	111	C3SRC		201603	\$153.96
212		PW6708	Easter Seals of So. Cal	111	C3SRC		201604	\$230.94
213		PW6708	Easter Seals of So. Cal	111	C3SRC		201602	\$256.60
214		PW6708	Easter Seals of So. Cal	111	C3SRC		201603	\$295.09
215		PW6708	Easter Seals of So. Cal	111	C3SRC		201604	\$269.43

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
216		PW6708	Easter Seals of So. Cal	111	C3SRC		201508	\$256.60
217		PW6708	Easter Seals of So. Cal	111	C3SRC		201509	\$269.43
218		PW6708	Easter Seals of So. Cal	111	C3SRC		201510	\$269.43
219		PW6708	Easter Seals of So. Cal	111	C3SRC		201511	\$230.94
220		PW6708	Easter Seals of So. Cal	111	C3SRC		201512	\$256.60
221		PW6708	Easter Seals of So. Cal	111	C3SRC		201601	\$179.62
222		PW6708	Easter Seals of So. Cal	111	C3SRC		201602	\$256.60
223		PW6708	Easter Seals of So. Cal	111	C3SRC		201603	\$295.09
224		PW6708	Easter Seals of So. Cal	111	C3SRC		201604	\$269.43
225		PW6716	Easter Seals of So. Cal	111	C3SRC		201602	\$256.60
226		PW6716	Easter Seals of So. Cal	111	C3SRC		201603	\$282.26
227		PW6716	Easter Seals of So. Cal	111	C3SRC		201604	\$256.60
228		PW6716	Easter Seals of So. Cal	111	C3SRC		201505	\$25.66
229		PW6716	Easter Seals of So. Cal	111	C3SRC		201412	\$230.94
230		PW6716	Easter Seals of So. Cal	111	C3SRC		201501	\$256.60
231		PW6716	Easter Seals of So. Cal	111	C3SRC		201502	\$243.77
232		PW6716	Easter Seals of So. Cal	111	C3SRC		201503	\$269.43
233		PW6716	Easter Seals of So. Cal	111	C3SRC		201504	\$269.43
234		PW6716	Easter Seals of So. Cal	111	C3SRC		201505	\$243.77
235		PW6716	Easter Seals of So. Cal	111	C3SRC		201506	\$269.43
236		PW6716	Easter Seals of So. Cal	111	C3SRC		201507	\$243.77
237		PW6716	Easter Seals of So. Cal	111	C3SRC		201512	\$128.30
238		PW6716	Easter Seals of So. Cal	111	C3SRC		201601	\$141.13
239		PW6716	Easter Seals of So. Cal	111	C3SRC		201602	\$230.94
240		PW6716	Easter Seals of So. Cal	111	C3SRC		201603	\$282.26
241		PW6716	Easter Seals of So. Cal	111	C3SRC		201604	\$243.77
242		PW6745	People's Care - Ramsgate H	113	CN2AC		201503	\$17,327.15

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
243		PW6745	People's Care - Ramsgate H	113	CN2AC		201504	\$17,327.15
244		PW6745	People's Care - Ramsgate H	113	CN2AC		201505	\$17,327.15
245		PW6745	People's Care - Ramsgate H	113	CN2AC		201506	\$17,327.15
246		PW6745	People's Care - Ramsgate H	113	CN2AC		201507	\$17,693.67
247		PW6745	People's Care - Ramsgate H	113	CN2AC		201508	\$17,693.67
248		PW6745	People's Care - Ramsgate H	113	CN2AC		201509	\$17,693.67
249		PW6745	People's Care - Ramsgate H	113	CN2AC		201510	\$17,693.67
250		PW6745	People's Care - Ramsgate H	113	CN2AC		201511	\$17,693.67
251		PW6745	People's Care - Ramsgate H	113	CN2AC		201512	\$17,693.67
252		PW6745	People's Care - Ramsgate H	113	CN2AC		201601	\$17,693.67
253		PW6745	People's Care - Ramsgate H	113	CN2AC		201602	\$17,693.67
254		PW6745	People's Care - Ramsgate H	113	CN2AC		201603	\$17,693.67
255		PW6745	People's Care - Ramsgate H	113	CN2AC		201604	\$4,068.89
256		PW6745	People's Care - Ramsgate H	113	CN2AC		201602	\$17,693.67
257		PW6745	People's Care - Ramsgate H	113	CN2AC		201603	\$17,693.67
258		PW6745	People's Care - Ramsgate H	113	CN2AC		201604	\$17,693.67
259		PW6756	National Support Services	020	C11RC		201508	\$3,094.43
260		PW6756	National Support Services	020	C11RC		201509	\$3,094.43
261		PW6756	National Support Services	020	C11RC		201510	\$3,094.43
262		PW6756	National Support Services	020	C11RC		201511	\$3,094.43
263		PW6756	National Support Services	020	C11RC		201512	\$3,094.43
264		PW6756	National Support Services	020	C11RC		201504	\$3,094.43
265		PW6756	National Support Services	020	C11RC		201505	\$3,094.43
266		PW6756	National Support Services	020	C11RC		201506	\$3,094.43
267		PW6766	People's Care - Croft Home	113	CN2AC		201508	\$5,829.20
268		PW6766	People's Care - Croft Home	113	CN2AC		201509	\$13,990.08
269		PW6767	People's Care - Le Doux	113	CN2AC		201512	\$18,708.07

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
270		PW6767	People's Care - Le Doux	113	CN2AC		201601	\$18,708.07
271		PW6767	People's Care - Le Doux	113	CN2AC		201602	\$18,708.07
272		PW6767	People's Care - Le Doux	113	CN2AC		201603	\$18,708.07
273		PW6767	People's Care - Le Doux	113	CN2AC		201604	\$17,694.07
274		PW6775	My Life Foundation Inc.	605	G3SRC		201506	\$208.60
275		PW6775	My Life Foundation Inc.	605	G3SRC		201507	\$2,670.08
276		PW6775	My Life Foundation Inc.	605	G3SRC		201508	\$5,256.72
277		PW6775	My Life Foundation Inc.	605	G3SRC		201509	\$5,419.43
278		PW6775	My Life Foundation Inc.	605	G3SRC		201510	\$5,419.43
279		PW6775	My Life Foundation Inc.	605	G3SRC		201511	\$5,256.72
280		PW6775	My Life Foundation Inc.	605	G3SRC		201512	\$5,419.43
281		PW6775	My Life Foundation Inc.	605	G3SRC		201601	\$5,256.72
282		PW6775	My Life Foundation Inc.	605	G3SRC		201602	\$5,256.72
283		PW6775	My Life Foundation Inc.	605	G3SRC		201603	\$5,419.43
284		PW6775	My Life Foundation Inc.	605	G3SRC		201604	\$5,256.72
285		PW6775	My Life Foundation Inc.	605	G5SRC		201503	\$1,010.20
286		PW6775	My Life Foundation Inc.	605	G5SRC		201504	\$2,187.08
287		PW6775	My Life Foundation Inc.	605	G5SRC		201505	\$2,121.42
288		PW6775	My Life Foundation Inc.	605	G5SRC		201506	\$2,186.07
289		PW6775	My Life Foundation Inc.	605	G5SRC		201507	\$2,187.08
290		PW6775	My Life Foundation Inc.	605	G5SRC		201508	\$2,121.42
291		PW6778	3Peoples Care - Ramsgate	109	C21RC		201407	\$12,240.00
292		PW6778	3Peoples Care - Ramsgate	109	C21RC		201408	\$12,240.00
293		PW6778	3Peoples Care - Ramsgate	109	C21RC		201409	\$12,240.00
294		PW6778	3Peoples Care - Ramsgate	109	C21RC		201410	\$12,240.00
295		PW6778	3Peoples Care - Ramsgate	109	C21RC		201410	\$8,480.00
296		PW6778	3Peoples Care - Ramsgate	109	C21RC		201411	\$12,240.00

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
297		PW6778	3Peoples Care - Ramsgate	109	C21RC		201411	\$9,920.00
298		PW6778	3Peoples Care - Ramsgate	109	C21RC		201412	\$12,240.00
299		PW6778	3Peoples Care - Ramsgate	109	C21RC		201412	\$9,920.00
300		PW6778	3Peoples Care - Ramsgate	109	C21RC		201501	\$12,240.00
301		PW6778	3Peoples Care - Ramsgate	109	C21RC		201501	\$9,920.00
302		PW6778	3Peoples Care - Ramsgate	109	C21RC		201502	\$12,240.00
303		PW6778	3Peoples Care - Ramsgate	109	C21RC		201503	\$12,240.00
304		PW6778	3Peoples Care - Ramsgate	109	C21RC		201504	\$12,240.00
305		PW6778	3Peoples Care - Ramsgate	109	C21RC		201505	\$12,240.00
306		PW6778	3Peoples Care - Ramsgate	109	C21RC		201506	\$12,240.00
307		PW6790	Ladera Home #2	113	CN3RC		201506	\$3,948.96
308		PW6905	Ladera Home #2	113	CN2AC		201407	\$17,338.15
309		PW6905	Ladera Home #2	113	CN2AC		201408	\$17,338.15
310		PW6905	Ladera Home #2	113	CN2AC		201409	\$17,338.15
311		PW6905	Ladera Home #2	113	CN2AC		201410	\$17,338.15
312		PW6905	Ladera Home #2	113	CN2AC		201411	\$17,338.15
313		PW6905	Ladera Home #2	113	CN2AC		201412	\$17,338.15
314		PW6905	Ladera Home #2	113	CN2AC		201501	\$17,327.15
315		PW6905	Ladera Home #2	113	CN2AC		201502	\$17,327.15
316		PW6905	Ladera Home #2	113	CN2AC		201503	\$17,327.15
317		PW6905	Ladera Home #2	113	CN2AC		201504	\$17,327.15
318		PW6905	Ladera Home #2	113	CN2AC		201505	\$17,327.15
319		PW6905	Ladera Home #2	113	CN2AC		201506	\$17,327.15
320		PW6905	Ladera Home #2	113	CN2AC		201507	\$17,605.10
321		PW6905	Ladera Home #2	113	CN2AC		201508	\$17,605.10
322		PW6905	Ladera Home #2	113	CN2AC		201509	\$17,605.10
323		PW6905	Ladera Home #2	113	CN2AC		201510	\$17,605.10

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
324		PW6905	Ladera Home #2	113	CN2AC		201511	\$17,605.10
325		PW6905	Ladera Home #2	113	CN2AC		201512	\$17,605.10
326		PW6905	Ladera Home #2	113	CN2AC		201601	\$17,605.10
327		PW6905	Ladera Home #2	113	CN2AC		201602	\$17,605.10
328		PW6905	Ladera Home #2	113	CN2AC		201603	\$17,605.10
329		PW6905	Ladera Home #2	113	CN2AC		201604	\$17,605.10
330		PW6905	Ladera Home #2	113	CN2AC		201407	\$14,239.75
331		PW6905	Ladera Home #2	113	CN2AC		201408	\$17,338.15
332		PW6905	Ladera Home #2	113	CN2AC		201409	\$17,338.15
333		PW6905	Ladera Home #2	113	CN2AC		201410	\$17,338.15
334		PW6905	Ladera Home #2	113	CN2AC		201411	\$17,338.15
335		PW6905	Ladera Home #2	113	CN2AC		201412	\$17,338.15
336		PW6905	Ladera Home #2	113	CN2AC		201501	\$17,327.15
337		PW6905	Ladera Home #2	113	CN2AC		201502	\$17,327.15
338		PW6905	Ladera Home #2	113	CN2AC		201503	\$17,327.15
339		PW6905	Ladera Home #2	113	CN2AC		201504	\$17,327.15
340		PW6905	Ladera Home #2	113	CN2AC		201505	\$17,327.15
341		PW6905	Ladera Home #2	113	CN2AC		201506	\$17,327.15
342		PW6905	Ladera Home #2	113	CN2AC		201507	\$17,605.10
343		PW6905	Ladera Home #2	113	CN2AC		201508	\$17,605.10
344		PW6905	Ladera Home #2	113	CN2AC		201509	\$17,605.10
345		PW6905	Ladera Home #2	113	CN2AC		201510	\$17,605.10
346		PW6905	Ladera Home #2	113	CN2AC		201511	\$17,605.10
347		PW6905	Ladera Home #2	113	CN2AC		201512	\$17,605.10
348		PW6905	Ladera Home #2	113	CN2AC		201601	\$17,605.10
349		PW6905	Ladera Home #2	113	CN2AC		201602	\$17,605.10
350		PW6905	Ladera Home #2	113	CN2AC		201603	\$17,605.10



**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
351		PW6905	Ladera Home #2	113	CN2AC		201604	\$17,605.10
352		PW6939	National Support Services	117	VN1RC		201506	\$1,027.39
353		PW6939	National Support Services	117	VN1RC		201511	\$4,137.32
354		PW6939	National Support Services	117	VN1RC		201512	\$4,137.32
355		PW6939	National Support Services	117	VN1RC		201601	\$4,137.32
356		PW6939	National Support Services	117	VN1RC		201602	\$4,137.32
357		PW6939	National Support Services	117	VN2RC		201506	\$1,261.17
358		PW6939	National Support Services	117	VN3RC		201506	\$501.35
359		PW6951	Brilliant Corners	101	VN1AC		201603	\$17.50
360		PW6951	Brilliant Corners	101	VN1AC		201604	\$15.75
361		PW6952	Brilliant Corners	104	VCORC		201506	\$2,875.00
362		PW6996	People's Care - Garth Home	113	CD1RC		201503	\$10,404.21
363		PW6996	People's Care - Garth Home	113	CD1RC		201504	\$16,668.75

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
364		PW6996	People's Care - Garth Home	113	CD1RC		201505	\$16,668.75
365		PW6996	People's Care - Garth Home	113	CD1RC		201506	\$16,668.75
366		PW7047	ICPS	765	G1SRC		201603	\$95.00
367		PW7047	ICPS	765	G1SRC		201604	\$95.00
368		PW7080	Ctr for Applied Behavior	115	CN1RC		201604	\$425.00
369		PW7080	Ctr for Applied Behavior	115	CN3RC		201604	\$1,385.48
<b>Total CPP Funds Allocated to Consumers Not on the DC Movers List</b>								<b>\$1,680,621.18</b>

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
1		PJ4058	Parkview Medical Plaza Pha	765	VCORC		201410	\$917.67
2		PJ4058	Parkview Medical Plaza Pha	765	VCORC		201411	\$6.25
3		PJ4058	Parkview Medical Plaza Pha	765	VCORC		201412	\$195.06
4		PJ4058	Parkview Medical Plaza Pha	765	VCORC		201501	\$209.75
5		PJ4058	Parkview Medical Plaza Pha	765	VCORC		201502	\$199.75
6		PM1777	Unipharma, Inc.	765	VCORC		201408	\$163.33
7		PM1777	Unipharma, Inc.	765	VCORC		201409	\$132.72
8		PM1777	Unipharma, Inc.	765	VCORC		201410	\$124.30
9		PW6708	Easter Seals of So. Cal	111	C3SRC		201502	\$243.77
10		PW6708	Easter Seals of So. Cal	111	C3SRC		201503	\$243.77
11		PW6708	Easter Seals of So. Cal	111	C3SRC		201504	\$282.26
12		PW6708	Easter Seals of So. Cal	111	C3SRC		201505	\$243.77
13		PW6708	Easter Seals of So. Cal	111	C3SRC		201506	\$243.77
14		PW6708	Easter Seals of So. Cal	111	C3SRC		201507	\$269.43
15		PW6708	Easter Seals of So. Cal	111	C3SRC		201508	\$269.43
16		PW6708	Easter Seals of So. Cal	111	C3SRC		201509	\$269.43
17		PW6708	Easter Seals of So. Cal	111	C3SRC		201510	\$282.26
18		PW6708	Easter Seals of So. Cal	111	C3SRC		201511	\$243.77
19		PW6708	Easter Seals of So. Cal	111	C3SRC		201512	\$218.11
20		PW6708	Easter Seals of So. Cal	111	C3SRC		201601	\$166.79
21		PW6744	People's Care - 118th Home	113	CN2AC		201507	\$17,609.41
22		PW6744	People's Care - 118th Home	113	CN2AC		201508	\$17,609.41
23		PW6744	People's Care - 118th Home	113	CN2AC		201509	\$17,609.41
24		PW6744	People's Care - 118th Home	113	CN2AC		201510	\$17,609.41
25		PW6744	People's Care - 118th Home	113	CN2AC		201511	\$17,609.41
26		PW6744	People's Care - 118th Home	113	CN2AC		201512	\$17,609.41

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
27		PW6744	People's Care - 118th Home	113	CN2AC		201601	\$17,609.41
28		PW6744	People's Care - 118th Home	113	CN2AC		201602	\$17,609.41
29		PW6744	People's Care - 118th Home	113	CN2AC		201603	\$17,609.41
30		PW6744	People's Care - 118th Home	113	CN2AC		201604	\$17,609.41
31		PW6790	Ladera Home #2	113	CN3RC		201507	\$19,020.54
32		PW6790	Ladera Home #2	113	CN3RC		201508	\$19,020.54
33		PW6790	Ladera Home #2	113	CN3RC		201509	\$19,020.54
34		PW6790	Ladera Home #2	113	CN3RC		201510	\$19,020.54
35		PW6790	Ladera Home #2	113	CN3RC		201511	\$19,020.54
36		PW6790	Ladera Home #2	113	CN3RC		201512	\$19,020.54
37		PW6790	Ladera Home #2	113	CN3RC		201601	\$19,020.54
38		PW6790	Ladera Home #2	113	CN3RC		201602	\$19,020.54
39		PW6790	Ladera Home #2	113	CN3RC		201603	\$19,020.54
40		PW6790	Ladera Home #2	113	CN3RC		201604	\$19,020.54
41		PW6790	Ladera Home #2	113	CN3RC		201507	\$19,020.54
42		PW6790	Ladera Home #2	113	CN3RC		201508	\$19,020.54
43		PW6790	Ladera Home #2	113	CN3RC		201509	\$19,020.54
44		PW6790	Ladera Home #2	113	CN3RC		201510	\$19,020.54
45		PW6790	Ladera Home #2	113	CN3RC		201511	\$19,020.54
46		PW6790	Ladera Home #2	113	CN3RC		201512	\$19,020.54
47		PW6790	Ladera Home #2	113	CN3RC		201601	\$19,020.54
48		PW6790	Ladera Home #2	113	CN3RC		201602	\$19,020.54
49		PW6790	Ladera Home #2	113	CN3RC		201603	\$19,020.54
50		PW6790	Ladera Home #2	113	CN3RC		201604	\$19,020.54
51		PW6939	National Support Services	117	VN1RC		201507	\$4,137.32
52		PW6939	National Support Services	117	VN1RC		201508	\$4,137.32
53		PW6939	National Support Services	117	VN1RC		201509	\$4,137.32

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
54		PW6939	National Support Services	117	VN1RC		201510	\$4,137.32
55		PW6939	National Support Services	117	VN1RC		201511	\$4,137.32
56		PW6939	National Support Services	117	VN1RC		201512	\$4,137.32
57		PW6939	National Support Services	117	VN1RC		201601	\$4,137.32
58		PW6939	National Support Services	117	VN1RC		201602	\$4,137.32
59		PW6939	National Support Services	117	VN1RC		201511	\$4,137.32
60		PW6939	National Support Services	117	VN1RC		201512	\$4,137.32
61		PW6939	National Support Services	117	VN1RC		201601	\$4,137.32
62		PW6939	National Support Services	117	VN1RC		201602	\$4,137.32
63		PW6939	National Support Services	117	VN1RC		201507	\$4,137.32
64		PW6939	National Support Services	117	VN1RC		201508	\$4,137.32
65		PW6939	National Support Services	117	VN1RC		201509	\$4,137.32
66		PW6939	National Support Services	117	VN1RC		201510	\$4,137.32
67		PW6939	National Support Services	117	VN1RC		201511	\$4,137.32
68		PW6939	National Support Services	117	VN1RC		201512	\$4,137.32
69		PW6939	National Support Services	117	VN1RC		201601	\$4,137.32
70		PW6939	National Support Services	117	VN1RC		201602	\$4,137.32
71		PW6939	National Support Services	117	VN2RC		201507	\$4,998.11
72		PW6939	National Support Services	117	VN2RC		201508	\$4,998.11
73		PW6939	National Support Services	117	VN2RC		201509	\$4,998.11
74		PW6939	National Support Services	117	VN2RC		201510	\$4,998.11
75		PW6939	National Support Services	117	VN2RC		201511	\$4,998.11
76		PW6939	National Support Services	117	VN2RC		201512	\$4,998.11
77		PW6939	National Support Services	117	VN2RC		201601	\$4,998.11
78		PW6939	National Support Services	117	VN2RC		201602	\$4,998.11
79		PW6939	National Support Services	117	VN2RC		201507	\$4,998.11
80		PW6939	National Support Services	117	VN2RC		201508	\$4,998.11

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
81		PW6939	National Support Services	117	VN2RC		201509	\$4,998.11
82		PW6939	National Support Services	117	VN2RC		201510	\$4,998.11
83		PW6939	National Support Services	117	VN2RC		201511	\$4,998.11
84		PW6939	National Support Services	117	VN2RC		201512	\$4,998.11
85		PW6939	National Support Services	117	VN2RC		201601	\$4,998.11
86		PW6939	National Support Services	117	VN2RC		201602	\$4,998.11
87		PW6939	National Support Services	117	VN3RC		201510	\$2,045.02
88		PW6939	National Support Services	117	VN3RC		201511	\$2,045.02
89		PW6939	National Support Services	117	VN3RC		201512	\$2,045.02
90		PW6939	National Support Services	117	VN3RC		201601	\$2,045.02
91		PW6939	National Support Services	117	VN3RC		201602	\$2,045.02
92		PW6939	National Support Services	117	VN3RC		201507	\$2,045.02
93		PW6939	National Support Services	117	VN3RC		201508	\$2,045.02
94		PW6939	National Support Services	117	VN3RC		201509	\$2,045.02
95		PW6939	National Support Services	117	VN3RC		201510	\$2,045.02
96		PW6939	National Support Services	117	VN3RC		201511	\$2,045.02
97		PW6939	National Support Services	117	VN3RC		201512	\$2,045.02
98		PW6939	National Support Services	117	VN3RC		201601	\$2,045.02
99		PW6939	National Support Services	117	VN3RC		201602	\$2,045.02
100		PW6993	People's Care Los Angeles,	117	VN1RC		201507	\$781.22
101		PW6993	People's Care Los Angeles,	117	VN1RC		201508	\$781.22
102		PW6993	People's Care Los Angeles,	117	VN1RC		201509	\$781.22
103		PW6993	People's Care Los Angeles,	117	VN1RC		201510	\$781.22
104		PW6993	People's Care Los Angeles,	117	VN1RC		201511	\$781.22
105		PW6993	People's Care Los Angeles,	117	VN1RC		201512	\$781.22
106		PW6993	People's Care Los Angeles,	117	VN1RC		201601	\$781.22
107		PW6993	People's Care Los Angeles,	117	VN2RC		201507	\$643.44

**Westside Regional Center  
Improper Allocation of Community Placement Plan Funds  
Fiscal Years 2014-15 and 2015-16**

	Unique Client Identification Number	Vendor Number	Vendor Name	Service Code	Sub Code	Authorization Number	Payment Period	Improperly Allocated Funds
108		PW6993	People's Care Los Angeles,	117	VN2RC		201508	\$643.44
109		PW6993	People's Care Los Angeles,	117	VN2RC		201509	\$643.44
110		PW6993	People's Care Los Angeles,	117	VN2RC		201510	\$643.44
111		PW6993	People's Care Los Angeles,	117	VN2RC		201511	\$643.44
112		PW6993	People's Care Los Angeles,	117	VN2RC		201512	\$643.44
113		PW6993	People's Care Los Angeles,	117	VN2RC		201601	\$643.44
114		PW6993	People's Care Los Angeles,	117	VN2RC		201602	\$643.44
115		PW6993	People's Care Los Angeles,	117	VN2RC		201603	\$643.44
116		PW6993	People's Care Los Angeles,	117	VN2RC		201604	\$643.44
<b>Total CPP Funds Allocated to Consumers Not on the DC Movers List</b>								<b>\$762,634.65</b>
<b>Total Improper Allocation of CPP Funds</b>								<b>\$2,443,255.83</b>

**APPENDIX A**

**WESTSIDE REGIONAL CENTER**

**RESPONSE  
TO AUDIT FINDINGS**





September 4, 2018

Mr. Ed Yan, Manager Audit Branch  
Department of Developmental Services  
1600 Ninth Street, room 230 MS-2-10  
Sacramento, CA 95814

RE: Response to Department of Developmental services (DDS) audit of Westside Regional Center for fiscal years 2014-15 and 2015-16.

Dear Mr. Yan:

Westside Regional Center (WRC) would like to thank the DDS audit team for the draft audit report. Please find WRC's response to the findings below:

Finding 1: Over/Understated Claims

WRC is in partial agreement with this finding. Over/under payments where WRC is in agreement with DDS have either been remitted to DDS or are in process. Explanations for instances where we are in disagreement can be found in Exhibit A.

Finding 2: Unsupported Credit Card Expenditures

WRC disagrees with DDS in the amount of the finding. Attached, please find documentation in support of a few of the items noted by DDS. (Exhibit B) WRC asks that the amount be reduced by the amount supported in the enclosure. WRC will update its credit card policy per DDS' recommendation and will remit payment for the unsupported transactions.

Finding 3: Family Cost Participation Program

WRC is in agreement with this finding and will comply with the recommendation set forth by DDS.

Finding 4: Equipment Inventory

WRC is in agreement with this finding and will comply with the recommendation set forth by DDS.

Finding 5: Improper Allocation of Community Placement Plan Funds

WRC is in agreement with this finding and will comply with the recommendation set forth by DDS. See Exhibit C.

Finding 6: Annual Family Program Fee

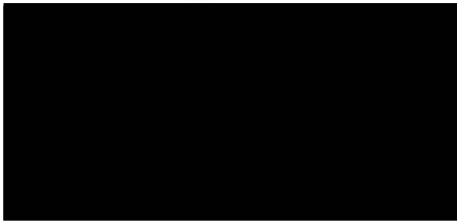
WRC is in agreement with this finding and will comply with the recommendation set forth by DDS.

Finding 7: The Achievable Foundation - In-Kind Services

WRC no longer provides in-kind support to the Achievable Foundation.

If you have any questions, or need further information, please don't hesitate to contact the undersigned. Thank you.

Sincerely,



Enclosure