Duty Statement

Classification: Auditor I			
Working Title: Auditor I			
Program: Audits & Inv	estigations		
Division: Contract and Enrollment Review Division		eview Division	Branch: Contract and Enrollment Review East
Section: Santa Ana			Unit:
COI Classification:	✓ Yes	☐ No	Position Number: 806-105-4175-XXX
Telework Eligible:	✓ Yes	☐ No	Maximum Telework Days: 5 Per Week
Bilingual Fluency:	Yes	☐ No	Specify Language: Not Applicable
both verbally and in w knowledge and skills assignments in a time attendance and condu	riting, when in related to spec ely manner, and	teracting with the cific tasks, method	ent and regular attendance; communicate effectively, public and other employees; develop and maintain dologies, materials, tools, and equipment, complete irtmental policies and procedures regarding
Job Summary:			
Job Summary: The Auditor I is the entry and initial working level of the Health Program Auditor series. Travel of up to 20% is required. Overnight travel is routinely required and out of state travel including overnight and/or weekend stays may be required.			
functions of this job. It of this position may pe	t should not be erform other di	considered an a	neral details as necessary to describe the principal Il-inclusive listing of work requirements. The incumbent rate with this classification) as assigned, including work equalize peak work periods or to otherwise balance

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the workload.

	n of Duties:
% Of Time	Essential Functions
85%	The Auditor I is the trainee and initial working level of the Health program Auditor (HPA) series The Auditor I assists in the medical and/or management field audits of Medi-Cal providers and Medi-Cal managed care contracted providers. Audits include the examination of purchasing and other financial business records to determine compliance with department requirements and to identify if program overpayments have occurred. The Auditor I may participate in unannounced drop-in reviews of newly enrolled providers to determine compliance with Medi-Cal regulations for ongoing business. Audit work is typically performed at the providers location which requires extended travel and overnight stays. Travel of up to 20% is required Overnight travel is routinely required and out of state travel including overnight and/or weekend stays may be required.
10%	Assists in the preparation of financial and management reports, which includes preparing supporting schedules and charts. Conducts meetings/interviews with audited facility staff Department management staff, and various state program representatives.

Description of Duties				
% Of Time	Essential Functions			
% Of Time	Marginal Functions			
5%	Other duties as required.			

Duty Statement

Duty Ctatomont			
Classification: Health Program Auditor II			
Working Title: Health Program Auditor II			
Program: Audits & Investigations			
Division: Contract and Enrollment Review Division	Branch: Contract and Enrollment Review East		
Section: Santa Ana	Unit:		
COI Classification: ✓ Yes ☐ No	Position Number: 806-105-4254-XXX		
Telework Eligible: ✓ Yes ☐ No	Maximum Telework Days: 5 Per Week		
Bilingual Fluency: ☐ Yes ✓ No	Specify Language: Not Applicable		
This position requires the incumbent maintain consistent and regular attendance; communicate effectively, both verbally and in writing, when interacting with the public and other employees; develop and maintain knowledge and skills related to specific tasks, methodologies, materials, tools, and equipment, complete assignments in a timely manner, and, adhere to departmental policies and procedures regarding attendance and conduct.			
Job Summary: Under direction of a Health Program Audit Manager I,	independently conduct fodoral and state mandated		
health program related audits of moderate difficulty. T financial audits of non-institional providers or under the portions of more complex audits. Overnight travel is recovernight and/or weekend stays may be required as a location, up to 20%.	e lead of a Health Program Auditor III conduct butinely required and statewide travel including audit work is typically performed at the providers'		
The duties contained in this job description reflect gen	erai details as necessary to describe the principal		

Ine duties contained in this job description reflect general details as necessary to describe the principal functions of this job. It should not be considered an all-inclusive listing of work requirements. The incumbent of this position may perform other duties (commensurate with this classification) as assigned, including work in other functional areas to cover during absences, to equalize peak work periods or to otherwise balance the workload.

	n of Duties:
% Of Time	Essential Functions
85%	The HPA II assists in the medical and/or management/financial field audits of non-institutional Medi-Cal providers including durable medical equipment providers, pharmacies, secondary suppliers, non-emergency medical transportation providers, physicians and other related health care providers. Audits include the examination of purchasing and other financial business records to determine compliance with Department requirements and to identify if program overpayments have occurred. The HPA II conducts unannounced drop-in reviews of new Durable Medical Equipment providers and other applicants to the Medi-Cal program to determine compliance with Medi-Cal regulations for ongoing business. The HPA II may also participate in the fiscal and management audits of the Family PACT program, Child Health Disability and Prevention (CHDP) program and other related health care programs. Overnight travel is routinely required and statewide travel including overnight and/or weekend stays may be required as audit work is typically performed at the providers' location, up to 20%.
10%	Assists in the preparation of financial and management reports, which includes preparing supporting schedules and charts. Provides expert testimony at hearings related to disputed audit findings. Conducts meetings/interviews with auditees and staff, Department management staff, and various state program representatives.

Description of Duties				
% Of Time	Essential Functions			
% Of Time	Marginal Functions			
5%	Other duties as required.			

State of California – Health an	d Human Services Agency	Department c	f Health Care Services
Supervision Received: Unde		·	
	ssification): Health Program Au	ıdit Manager I	
Supervision Exercised: (che Clerical Staff Professional Staff	, <u> </u>	Supervisory Classificati	on / None Technical Staff Managerial Staff
Special Requirements: Medical Evaluation /Cleara Background Check / Finge Valid Professional License	r Printing Clearance	☐ Valid Driver's I	License
Desirable Qualifications:			
Marking Conditions (Chook	all that apply).		
Working Conditions (Check Prolonged Periods of:	all that apply):	Travel May be Re	auired:
☐ Standing ☐ Sitting ☐	Kneeling	Occasional	✓ Over Night
Acknowledgements:			
Human Resources Acknowlduty statement as of	edgement: The Human Resourd	ces Division has reviewe	ed and approved this
Employee Acknowledgemer received a copy of this duty st	nt: I have discussed with my sup atement.	ervisor the duties of the	position and have
Employee Name:	Employee Signature:		Date:

Supervisor Acknowledgement: I certify this duty statement represents an accurate description of the essential functions of this position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement.

Supervisor Name:	Supervisor Signature:	Date:
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State of California – Health and	Human Services Agency	Department	of Health Care Services
Supervision Received: Unde	r Supervision		
Of the (enter supervisor clas	sification): Health Program A	udit Manager I	
Supervision Exercised: (chec Clerical Staff Professional Staff	ck all that apply)	_	ition / None Technical Staff Managerial Staff
Special Requirements: Medical Evaluation /Clearar Background Check / Finger Valid Professional License	Printing Clearance	☐ Valid Driver's	s License
Desirable Qualifications:			
Working Conditions (Check a	all that apply):	Toronal Marchae D	a anciera de
Prolonged Periods of: Standing Sitting I Requires Lifting of Heavy Obje		Travel May be R ✓ Occasional	· ✓ Over Night
Acknowledgements:			
Human Resources Acknowled			
Employee Acknowledgement received a copy of this duty sta		pervisor the duties of th	e position and have
Employee Name:	Employee Signature:		Date:

Supervisor Acknowledgement: I certify this duty statement represents an accurate description of the essential functions of this position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement.

Supervisor Name:

Supervisor Signature:

Date:

Duty Statement

Classification: Health Program Auditor III Working Title: Health Program Auditor III			
Program: Audits & Investigations			
Branch: Contract and Enrollment Review East Branch			
Unit:			
Position Number: 806-105-4252-015			
Maximum Telework Days: 5			
Specify Language: Not Applicable			
ent and regular attendance; communicate effectively, public and other employees; develop and maintain ologies, materials, tools, and equipment, complete rtmental policies and procedures regarding			
most difficult and complex individual and team audits ance audits of pharmacies. Incumbent participates in reas of provider types and/or of the services rendered. and methodologies for the field sections' audits of new aniques. Provides audit-related support services for travel is routinely required and out of state travel juired, up to 20%.			

of this position may perform other duties (commensurate with this classification) as assigned, including work in other functional areas to cover during absences, to equalize peak work periods or to otherwise balance

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the workload.

December 1	n of Dution
	n of Duties:
% Of Time	Essential Functions
65%	Develops and performs various analytical and audit procedures involved in the detection and audits of fraud and abuse in the Medi-Cal program. This includes auditing defined samples developed by the research staff in order to establish the potential fraud and abuse present in a specific provider type or service area. The incumbent will be required to report their audit findings so that the results can be extrapolated to the sample population; and, the potential magnitude of the problem, including fraud, waste, and abuse, can be evaluated and quantified. Prepare working papers and audit reports to support audit findings and conclusions for use by internal and external users. Overnight travel is routinely required and out of state travel including overnight and/or weekend stays may be required, up to 20%.
15%	Prepare reports/briefings to management identifying audit findings, audit trends, and potential for fraud, waste and abuse based on the results of audited samples and pharmacy audits. Analyze statutes, regulations, policies and procedures as they pertain to program activities.
15%	Participates in auditing the sample selected in the Medi-Cal Payment Error Study (MPES). Correspond with other governmental agencies as needed. Attend meetings and training as required.

Description of Duties				
% Of Time	Essential Functions			
% Of Time	Marginal Functions			
5%	Other duties as required.			

State of California – Health an	d Human Services Agency	Department c	f Health Care Services
Supervision Received: Unde		·	
	ssification): Health Program Au	ıdit Manager I	
Supervision Exercised: (che Clerical Staff Professional Staff	, <u> </u>	Supervisory Classificati	on / None Technical Staff Managerial Staff
Special Requirements: Medical Evaluation /Cleara Background Check / Finge Valid Professional License	r Printing Clearance	☐ Valid Driver's I	License
Desirable Qualifications:			
Marking Conditions (Chook	all that apply).		
Working Conditions (Check Prolonged Periods of:	all that apply):	Travel May be Re	auired:
☐ Standing ☐ Sitting ☐	Kneeling	Occasional	✓ Over Night
Acknowledgements:			
Human Resources Acknowl duty statement as of	edgement: The Human Resourd	ces Division has reviewe	ed and approved this
Employee Acknowledgemer received a copy of this duty st	nt: I have discussed with my sup atement.	ervisor the duties of the	position and have
Employee Name:	Employee Signature:		Date:

Supervisor Acknowledgement: I certify this duty statement represents an accurate description of the essential functions of this position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement.

Supervisor Signature:	Date:
	Supervisor Signature: