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THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
ACTION AGENDA SUMMARY

DEPT: Community Services Agency

BOARD AGENDA # *B-3

Urgent

Routine

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AGENDA DATE October 18, 2011

CEO Concurs with Recommendation YES NO

4/5 Vote Required YES NO

(Information Attached)

SUBJECT:

Approval of the Community Services Agency Fiscal Year 2011-2012 Plan for Fraud Investigations and Program Integrity Efforts for the In-Home Supportive Services Program

STAFF RECOMMENDATIONS:

1. Approve the Community Services Agency Fiscal Year 2011-2012 plan for Fraud Investigations and Program Integrity Efforts for the In-Home Supportive Services (IHSS) Program.
2. Authorize the Community Services Agency to participate in the Enhanced IHSS Anti-Fraud Program in Fiscal Year 2011-2012.

Continued on Page 2

FISCAL IMPACT:

The California Department of Social Services has allocated \$410,765 to Stanislaus County for the Fraud Investigations and Program Integrity Efforts for the IHSS Program in Fiscal Year 2011-2012. This funding will support 2 Special Investigators, 1 Fraud Technician and Supervisory oversight to complete IHSS fraud investigations work in accordance with the County Plan. Approximately \$348,678 is Federal and State funding, with the balance of \$62,087 identified as County share.

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BOARD ACTION AS FOLLOWS:

No. 2011-634

On motion of Supervisor Chiesa, Seconded by Supervisor Withrow

and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Withrow, DeMartini, and Chairman Monteith

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

1) X Approved as recommended

2) _____ Denied

3) _____ Approved as amended

4) _____ Other:

MOTION:

ATTEST: CHRISTINE FERRARO TALLMAN, Clerk

File No.

STAFF RECOMMENDATION (Continued):

3. Authorize the Chairman of the Board to sign the County Response Cover Page and Checklist "Enclosure B" for submission to the State Department of Social Services.

FISCAL IMPACTS (Continued):

The Fiscal Year 2011-2012 Adopted Final Budget includes sufficient appropriations and estimated revenues, as well as the County General Fund support necessary for the program.

While the State has released this allocation, consistent with the Fiscal Year 2011-2012 State Budget, the funding is part of the Final State Budget "trigger". In Final State Budget negotiations, the Legislature adopted cuts that would be triggered if additional State general fund revenues did not materialize as projected.

Essentially, if State revenues fall short of the adopted State Budget Act by \$1 billion, then cuts totaling \$601 million in State general fund will be triggered. IHSS anti-fraud activities pursuant to approved county plans are identified as one of the triggered cuts. The State plans to evaluate and act on the proposed triggers in January 2012 if necessary.

Since July 2011, the Department has operated the IHSS Anti Fraud Program at a reduced level, designed to keep the County share exposure within the current amount of County general funds already committed. Currently the staff completing IHSS fraud investigations work are extra-help staff due to the uncertainty of funding. If the trigger cut is avoided, the plan and budget authorization will allow the Anti Fraud Program to resume normal operations. If the trigger cut is implemented, the Agency will report back at Fiscal Year 2011-2012 Mid-Year with a program close out plan.

At this time there is no additional cost to the County general fund related to approval of the IHSS Program Integrity Efforts Plan subject to the trigger action.

DISCUSSION:

The California Department of Social Services and the Stanislaus County Community Services Agency (CSA) strongly values program and agency integrity. This value is incorporated within procedures and protocols in all case management programs which includes the In-Home Supportive Services (IHSS) Program. The role of program integrity has been a part of social services statewide for many years and CSA has had a dedicated Special Investigations Unit (SIU) comprised of staff trained to investigate public assistance fraud, including IHSS fraud for decades. Effective in 2004, as a result of a State level change in Welfare and Institutions Code (WIC) 12305.82, the SIU

Approval of the Community Services Agency Fiscal Year 2011-2012 Plan for Fraud Investigations and Program Integrity Efforts for the In-Home Supportive Services Program

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and County were precluded from completing IHSS investigations and this responsibility was transferred to the State. Prior to that legislation, the SIU completed all IHSS Fraud investigations, timely and thoroughly. These investigations often resulted in discontinuance or denial of benefits, as well as collection of overpayments and in some cases, referrals to the District Attorney for prosecution. From 2004 through early 2009, the State Department of Health Care Services (DHCS) was responsible for IHSS fraud investigations. Unfortunately, caseworker referrals of fraud were not effectively handled at the statewide level leading the Governor and the DHCS to propose a new collaborative approach during Fiscal Year 2009-2010.

On October 6, 2009 the Board of Supervisors referred to CSA a letter from the California Department of Social Services (CDSS) dated September 25, 2009. The letter notified counties of funding for fraud investigation and program integrity efforts related to the In-Home Supportive Services (IHSS) program pursuant to the California State Budget Act of 2009. On November 24, 2009 the Board of Supervisors approved the Agency's Plan for Fraud Investigations and Program Integrity Efforts as a pilot program through June 30, 2010. On August 31, 2010 the Board of Supervisors reviewed the pilot and approved the CSA Fiscal Year 2010-2011 plan to continue Fraud Investigations and Program Integrity Efforts for the IHSS program.

CSA continues to operate a robust early fraud detection pilot program to identify, deter and prevent fraud in the early stages of the IHSS program. Fraud exists when a recipient or provider intentionally misrepresent facts in order to receive benefits or services he/she is not entitled to receive.

The SIU role has been developed to augment the controls in place within the Agency in which Social Workers accept applications, determine eligibility and assess customer need for authorization of IHSS services. Social Workers diligently apply program regulations to ensure customers who truly need services receive them.

Fiscal Year 2010-2011 concluded with one referral to the District Attorney for prosecution with more cases in review for the referral process. Additional results of this program were significant. For the period July 1, 2010 through June 30, 2011, 444 investigations were completed and of those 65% or 288 cases had fraud identified. Of the 288 fraud identified cases, 28% or 81 cases were randomly pulled cases and 72% or 207 were referred by Social Workers. The 12-month cost-avoidance savings from this program totaled \$1,202,882 for Fiscal Year 2010-2011. This amount far exceeds the staffing costs of the program and generates a total return on investment (ROI) for Fiscal Year 2010-2011 of \$2.66 for every dollar spent. From July 1, 2010 through June 30, 2011 IHSS fraud overpayments identified and reported for collection totaled \$127,022. In addition, many cases are still under investigation and will likely result in further identified overpayments that will be referred for follow up collections.

Approval of the Community Services Agency Fiscal Year 2011-2012 Plan for Fraud Investigations and Program Integrity Efforts for the In-Home Supportive Services Program
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The Department has developed the attached Stanislaus County Community Services Agency Plan for In-Home Supportive Services Program Integrity Efforts for Fiscal Year 2011-2012. CDSS solicits County proposals for IHSS program integrity activities annually. If Stanislaus County chooses to continue the program, the Agency must submit a plan and receive CDSS approval. CDSS has provided instructions for the Fiscal Year 2011-2012 plan. The Fiscal Year 2011-2012 plan is due to CDSS by October 28, 2011. The plan, and the budget for implementation, must be approved by the County Board of Supervisors.

The Agency developed the attached In-Home Supportive Services Program Integrity Efforts Plan and requests Board of Supervisors approval. CSA proposes to continue the program through Fiscal Year 2011-2012. Lessons learned during the pilot phase have led to very effective investigations and up-front partnering with IHSS Social Work staff.

The Agency recommends approval of the Fraud Investigations and Program Integrity Efforts for the IHSS program through Fiscal Year 2011-2012 contingent upon no trigger action.

POLICY ISSUES:

Approval of the Community Services Agency Plan for In-Home Supportive Services Program Integrity Efforts supports the Board's priorities of Efficient Delivery of Public Services and Effective Partnerships by working with County partners to investigate and prosecute fraud which strengthens program integrity.

STAFFING ISSUES:

The Community Services Agency commits existing program staff resources to support the Fraud Investigations and Program Integrity efforts for the In-Home Supportive Services Program, in accordance with the Fiscal Year 2011-2012 Plan.

CONTACT PERSON:

Janice Viss, Assistant Director 558-2500

COUNTY RESPONSE COVER PAGE

MUST BE FULLY COMPLETED AND SUBMITTED BY OCTOBER 28, 2011

Stanislaus County is requesting participation in the IHSS Fraud Prevention Program. Once the revenue trigger has been met, the completed county plan and data as described above will be submitted by January 15, 2012.

Board of Supervisors Approval

Approved on: October 18, 2011, by the County Board of Supervisors

Name of Approver: Dick Monteith Title: Chairman

Signature: 

Board of Supervisors

Name of Representative: Christine Ferraro Title: Clerk of the Board of Supervisors

Telephone No.: (209) 525-4494

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County Welfare Department (Designated contact for all plan inquiries)

Name of Representative: Christine C. Applegate Title: Director

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County District Attorney Office

Name of Representative: Birgit Fladager Title: District Attorney

Telephone No.: (209) 525-5550

Email Address: Birgit.Fladager@standa.org

Stanislaus County Community Services Agency

Plan for In-Home Supportive Services Program Integrity Efforts

Enclosure C

September 30, 2011

County's Current and Proposed Anti-Fraud Activities

The Stanislaus County Community Services Agency (SCCSA) has a strong commitment to program and agency integrity. Beginning in January 2010, the SCCSA Special Investigations Unit (SIU), implemented an early fraud prevention and detection pilot program for In-Home Supportive Services (IHSS). The intent of this investigative program focuses on identifying and terminating fraudulent cases in order to assure only those that are truly eligible receive services.

Fiscal year 2010/2011 brought with it one referral to the District Attorney for prosecution with more cases in review for the referral process. Additional results of this program were significant. For the period July 1, 2010 through June 30, 2011, 444 investigations were completed and of those 65% had fraud identified. Randomly pulled cases had a fraud rate of 28% and cases referred by social workers had a fraud rate of 72%. The 12-month cost-avoidance savings from this program totaled \$1,202,882 for fiscal year 2010/11. This amount far exceeds the staffing costs of the program. The total County return on investment (ROI) for fiscal year 2010/2011 was \$2.66 assuming a 12 month cost avoidance.

The SCCSA is requesting continued approval and funding of these anti-fraud efforts, as the results have clearly shown the efforts are necessary and cost-effective. The plan for the upcoming year will be to continue with the same activities as the previous year. Those activities include sworn peace-officers and non-sworn investigative assistant staff at SCCSA SIU conducting investigations on both randomly pulled cases as well as all cases referred by social workers. SCCSA also has a local hotline that allows citizens to make complaints that are reviewed for possible investigation. The SIU will continue to provide ongoing education and training on fraud prevention and detection to the IHSS social workers as well as the local community. The timeline for implementation of these activities is not relevant as the activities are ongoing pending budgetary considerations.

Collaboration and Partnerships with the District Attorney's Office

SCCSA partners with the Stanislaus County District Attorney's Office (DAO) for prosecution of those who commit public assistance fraud. A dedicated

prosecutor is already contracted by SCCSA and is assigned to the SIU for handling public assistance fraud cases.

All public assistance fraud investigations are handled by the SCCSA SIU in Stanislaus County. IHSS fraud referrals are also investigated by SIU. Investigators have the knowledge, training, equipment and resources in place to evaluate and investigate suspected fraud quickly, with professionalism and respect for all parties.

Since previous regulations require fraud amounts greater than \$500 be referred to DHCS (WIC 12305.82e), it was a priority to recover those amounts less than \$500 rather than pursuing prosecution. Since the grant implementation, the SCCSA SIU and the DAO have expanded their partnership to include early fraud detection (best to prevent fraud from occurring in the first place), develop a system for fraud referrals, guidelines for prosecutions of suspected violators and training in IHSS fraud.

The DAO fully supports this fraud program and the plan submitted by SCCSA.

Collaboration and Partnerships with the California Department of Health Care Services (DHCS) and the California Department of Social Services (CDSS)

SCCSA currently has an electronic database that tracks all referrals made to DHCS and the outcomes associated with each referral. This will continue to be tracked and reported out to CDSS upon request and as required. SCCSA staff has been working with the DHCS investigator assigned to this region on joint investigations, information sharing, and overlapping cases when appropriate.

County Proposed Budget for Utilization of Funds

The proposed funding available will be utilized by the SCCSA SIU as follows:

• 2.0 FTE Special Investigators	\$195,912
• 0.2 FTE Special Investigator Supervisor	\$ 19,591
• 1.0 FTE Fraud Technician	\$ 91,992
• Operating Expenses / Operating Support for Caseworkers	<u>\$103,270</u>
	\$410,765

Fraud Referrals/Outcomes

In January and February of 2010, the SCCSA SIU hired three additional Special Investigators, one Fraud Technician, and one part-time Accountant for the IHSS fraud program. The Special Investigators and Fraud Technician were hired to investigate referrals for suspected fraud submitted by IHSS caseworkers, as well as to conduct early fraud prevention/detection interviews, surveillance and home visits on a random sampling of intake cases. SIU Policy statement 940-1 "IHSS Fraud Referral Process" describes the SCCSA process for referring, processing

and investigating potential IHSS fraud. The Accountant was hired for statistical tracking, budgetary accounting, and return on investment research and reporting to determine the effectiveness of the program. The referrals and outcomes were submitted and tracked electronically in the C-IV automated welfare system, and through a separate database maintained by the Accountant.

The focus of the SCCSA fraud program is on early fraud cost-avoidance, not prosecutions. SCCSA feels strongly that eliminating as many fraudulent recipients and providers from the program as possible, with the investigative resources available, is the most cost-effective way to pursue fraud in the IHSS program. While prosecutions are necessary and important in holding people accountable for their actions, they are also expensive and time-consuming for both the investigative staff as well as the DAO, who are all experiencing reduced staffing due to budgetary constraints. The most egregious cases will be referred for prosecution; however the SCCSA plans to continue the cost-avoidance model for IHSS fraud.

IHSS Overpayments

Upon implementation of the fraud program in January 2010, SCCSA received permission from the DHCS Investigations Division, to pursue all IHSS fraud cases in Stanislaus County at the local level, regardless of the overpayment amount. From July 1, 2010 through June 30, 2011 fraud overpayments for IHSS totaled \$127,022. In addition, many cases are still being investigated and will likely result in further overpayments. As indicated above the SCCSA has implemented internal strategies, policies and partnerships to address all facets of IHSS fraud and prevention; including ways to identify, reduce and recover IHSS overpayments.

Mechanism for Tracking/Reporting

SCCSA has tracked and will continue to track and report referrals and outcomes to CDSS as required. The mechanism used for tracking and reporting is the automated C-IV system, the electronic database, and manual tracking as needed by the Accountant.

IHSS Fraud Investigation Statistics

REFERRALS

Referrals from 01/01/09 to 6/30/2010

Total Referrals: 478

ALL REFERRAL SOURCES

Completed Investigations from 01/01/09 to 6/30/2010

Total Referrals: 187	Fraud Found: 142	Total Savings: \$722,777.66
Completed Cases: 187	Insufficient Evidence: 19	Total Overpayments: \$143,158.65
No Fraud: 26		

<u>Fraud Type</u>	<u>Count</u>	<u>Program Outcome</u>	<u>Count</u>	<u>Fraud By</u>	<u>Count</u>
Entirely Overstated Disability	76	Denied Case	2	Both	117
Failed to Provide Services	21	No Financial Impact	49	Provider	10
Forged Documents	4	Reduced Case	41	Recipient	15
Household Composition	26	Terminated Case	91		
Over Income	1	Terminated/Denied Provider Only	4		
Partly Overstated Disability	30				

RANDOM REFERRAL SOURCES

Completed Investigations from 01/01/09 to 6/30/2010

Total Referrals: 37	Fraud Found: 23	Total Savings: \$100,245.84
Completed Cases: 37	Insufficient Evidence: 1	Total Overpayments: \$0.00
No Fraud: 13		

<u>Fraud Type</u>	<u>Count</u>	<u>Program Outcome</u>	<u>Count</u>	<u>Fraud By</u>	<u>Count</u>
Entirely Overstated Disability	12	Denied Case	1	Both	19
Failed to Provide Services	4	No Financial Impact	15	Provider	1
Household Composition	1	Reduced Case	8	Recipient	3
Partly Overstated Disability	8	Terminated Case	13		

NON RANDOM REFERRAL SOURCES

Completed Investigations from 01/01/09 to 6/30/2010

Total Referrals: 150	Fraud Found: 119	Total Savings: \$622,531.82
Completed Cases: 150	Insufficient Evidence: 18	Total Overpayments: \$143,158.65
No Fraud: 13		

<u>Fraud Type</u>	<u>Count</u>	<u>Program Outcome</u>	<u>Count</u>	<u>Fraud By</u>	<u>Count</u>
Entirely Overstated Disability	64	Denied Case	1	Both	98
Failed to Provide Services	17	No Financial Impact	34	Provider	9
Forged Documents	4	Reduced Case	33	Recipient	12
Household Composition	25	Terminated Case	78		
Over Income	1	Terminated/Denied Provider Only	4		
Partly Overstated Disability	22				

**IHSS Fraud Quarterly Report
FY 2010/11**

Cumulative Data	1st Quarter		2nd Quarter		3rd Quarter		4th Quarter		YTD Total	
	# Cases	%	# Cases	%	# Cases	%	# Cases	%	# Cases	%
Investigation Referrals										
Referrals received - Non Random	96	66%	52	61%	22	40%	39	56%	209	59%
Referrals received - Random	50	34%	33	39%	33	60%	31	44%	147	41%
Total referrals received	146	100%	85	100%	55	100%	70	100%	356	100%
Investigation Results										
Non Random Investigations completed	41	60%	102	63%	62	67%	92	76%	297	67%
Random Investigations completed	27	40%	61	37%	30	33%	29	24%	147	33%
Total investigations completed	68	100%	163	100%	92	100%	121	100%	444	100%
Of the Investigations Completed										
Fraud Found in Non-Random	31	70%	81	72%	34	67%	61	76%	207	72%
Fraud Found in Random	13	30%	32	28%	17	33%	19	24%	81	28%
Total Fraud Found	44	100%	113	100%	51	100%	80	100%	288	100%
Total % Fraud Found	65%		69%		55%		66%		65%	
Insufficient Evidence Non-Random	1	100%	11	79%	19	100%	23	100%	54	95%
Insufficient Evidence Random	0	0%	3	21%	0	0%	-	0%	3	5%
Total insufficient Evidence	1	100%	14	100%	19	100%	23	100%	57	100%
Total % of Insufficient Evidence	1%		9%		21%		19%		13%	
No Fraud Non-Random	9	39%	10	28%	9	41%	8	44%	36	36%
No Fraud Random	14	61%	26	72%	13	59%	10	56%	63	64%
Total No Fraud	23	100%	36	100%	22	100%	18	100%	99	100%
Total % of No Fraud	34%		22%		24%		15%		22%	
Who is Committing Fraud										
Provider: 32 Non Random, 11 Random	4	9%	17	15%	8	16%	14	17%	43	15%
Recipient: 85 Non-Random, 41 Random	16	36%	58	51%	30	59%	22	28%	126	44%
Both: 90 Non-Random; 29 Random	24	55%	38	34%	13	25%	44	55%	119	41%
Total cases	44	100%	113	100%	51	100%	80	100%	288	100%
Investigation Outcomes										
Denied Case: 4 Non-Random, 0 Random	3	4%	1	1%	0	0%	0	0%	4	1%
No Financial Impact: 123 Non-Random, 74 Random	28	41%	67	41%	51	31%	51	42%	197	44%
Reduced Case: 80 Non-Random, 39 Random	15	22%	49	30%	18	11%	37	31%	119	27%
Terminated Case: 86 Non-Random, 34 Random	20	29%	44	27%	23	14%	33	27%	120	27%
Denied Provider Only: 4 Non-Random	2	3%	2	1%	0	0%	-	0%	4	1%
Total Outcomes on Investigations completed	68	100%	163	100%	92	56%	121	100%	444	100%
Overpayments Identified and Sent to Collections	\$	15,721	\$	30,381	\$	34,045	\$	41,751	\$	121,898
Quarterly Average Data										
Incidence of Fraud										
Avg. # of Authorized IHSS cases	6,040		5,944		5,876		5,840		5,925	
Avg. # of Cases Investigated	23		54		31		40		37	
Avg. % of Cases Investigated*	0.4%		0.9%		0.5%		0.7%		0.6%	
Avg. # Paid IHSS IP Cases	5,626		5,541		5,716		5,661		5,636	
Avg. Cases where fraud found	15		38		17		27		24	
% of Fraud to Total Pd. Cases (Avg.fraud found/avg. pd cases)	0.1%		0.2%		0.1%		0.2%		0.1%	

Definition of Fraud: Fraud exists when a recipient or provider intentionally misrepresents facts in order to receive benefits or services to which he/she is not entitled.

Non-Random: Referred by CSA staff, Investigators, and anonymous persons.

Random: Randomly pulled cases.

*The % of cases is very small and not statistically valid for extrapolating potential IHSS fraud within the IHSS Program at large.

Prepared by: Cindy Solis

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8/4/2011

Budget Justification Stanislaus County's Fraud Funding Plan for FY 2011-12

Budget Section	Total
A. Personnel Costs (includes employee benefits)	\$ 307,495
B. Operating Expenses	\$ 103,270
C. Equipment Expenses	\$ 0
D. Travel/Per Diem and Training	\$ 0
E. Subcontracts and Consultants	\$ 0
F. Other Costs	\$ 0
G. Indirect Expenses	\$ 0
Total Expenses	\$ 410,765

A. Personnel Costs (including employee benefits)	Total Budget
<p>Title: 2 Special Investigator I/II</p> <p>Salary Calculation: Average monthly Salary for a fraud investigator for 12 months</p> <p>Duties Description: Sworn peace officers who will conduct fraud investigations in the IHSS program. The investigations will include, but not be limited to, home visits and consent searches, interviews with providers and recipients, interviews with witnesses, various types of surveillance, and obtaining and reviewing documentary evidence. Cases found fraudulent will be assessed for overpayments and may be referred to the District Attorney's Office for criminal prosecution when appropriate.</p>	\$ 195,912
<p>Title: 1 Special Investigator III</p> <p>Salary Calculation: Average Monthly Salary for a fraud investigator at .2 FTE for 12 months</p> <p>Duties Description: Supervise sworn peace officers and non-sworn staff who will assist and conduct fraud investigations in the IHSS program. The investigations will include, but not be limited to, home visits and consent searches, interviews with providers and recipients, interviews with witnesses, various types of surveillance, and obtaining and reviewing documentary evidence. Cases found fraudulent will be assessed for overpayments and may be referred to the District Attorney's Office for criminal prosecution when appropriate</p>	\$ 19,591
<p>Title: 1 Fraud Technician</p> <p>Salary Calculation: Average monthly Salary for a fraud investigator for 12 months</p> <p>Duties Description: Investigative assistant who will assist with conducting fraud investigations in the IHSS program, including assisting sworn investigators with home visits, interviews, reports, evidence gathering and surveillance activity.</p>	\$ 91,992
Total Personnel Costs:	\$307,495

B. Operating Expenses	Total Budget
Title: Operating Support Costs Description: Operating Support Costs includes operating expenses such as space, utilities, office supplies, postage, staff development, EDP, etc. incurred in the course of doing business. Operating Support Costs are charged to IHSS Fraud consistent with the CDSS County Expense Claim guidelines which ensure an equitable distribution of costs across all CSA programs based on time studied casework hours.	\$ 103,270
Title: Description:	\$ 0
Title: Description:	\$ 0
Total Operating Expenses:	\$103,270

C. Equipment Expenses	Total Budget
Title: Description:	\$ 0
Title: Description:	\$ 0
Title: Description:	\$ 0
Total Equipment Expenses:	\$ 0

D. Travel/Per Diem and Training	Total Budget
Title: Description:	\$ 0
Title: Description:	\$ 0
Title: Description:	\$ 0
Total Travel/Per Diem and Training:	\$ 0

E. Subcontracts and Consultants	Total Budget
Title:	\$ 0
Description:	
Title:	\$ 0
Description:	
Title:	\$ 0
Description:	
Total Subcontracts and Consultants:	\$ 0

F. Other Costs	Total Budget
Title: Background Checks//Personnel & Equipment Costs	\$ 0
Description: Contract with Sheriff's office to provide mandated law enforcement background investigations if needed and/or incidents of personnel and equipment costs.	
Title:	\$ 0
Description:	
Title:	\$ 0
Description:	
Title:	\$ 0
Description:	
Title:	\$ 0
Description:	
Total Other Costs:	\$ 0

G. Indirect Expenses	Total Budget
Title:	\$ 0
Description:	
Title:	\$ 0

Description:	
Total Indirect Expenses:	\$ 0