



**STATE OF TENNESSEE  
DEPARTMENT OF HUMAN SERVICES**

JAMES K. POLK BUILDING  
505 DEADERICK STREET  
NASHVILLE, TENNESSEE 37243-1403

TELEPHONE: 615-313-4700 FAX: 615-741-4165  
TTY: 1-800-270-1349  
www.tn.gov/humanservices

**BILL LEE**  
GOVERNOR

**DANIELLE W. BARNES**  
COMMISSIONER

June 15, 2020

Ben Redmond, Jr., Board Chair  
Ridgeview Psychiatric Hospital and Center, Incorporated  
240 West Tyrone Road  
Oak Ridge, Tennessee 37830

Dear Mr. Redmond,

The Department of Human Services (DHS) - Division of Audit Services staff conducted a limited desk review of the Child and Adult Care Food Program (CACFP) at Ridgeview Psychiatric Hospital and Center, Incorporated (Sponsor), Application Agreement number 00-473, during the period of April 3, 2020 through April 30, 2020. Our scope of the review was for reimbursement claimed during December 2019.

Due to the outbreak and the risk that COVID19 poses to the Sponsor and our staff, the review was limited to verification, based on review of the documents obtained from Sponsor, via e-mail or other electronic transmission of documents. We also obtained confirmation from the feeding sites and Sponsor staff via telephone or e-mail relative to the operation and administration of the CACFP.

The purpose of this review was to determine if the Sponsor complied with the applicable *Title 7 of the Code of Federal Regulations* (CFR) applicable parts, provider agreements, and applicable Federal and State regulations, taking into consideration the waivers granted to the Sponsor's operation during the COVID-19 period.

Based on our review of the Sponsor's records and information provided, the Sponsor had four (4) feeding sites operating during the review period. Fresh Start and Stepping Stones were selected as the sample feeding sites.

Background

CACFP Sponsors utilize meal count sheets to record the number of breakfast, lunch, supper, and supplement meals served. Meals served by participating Sponsors must meet the minimum guidelines set by the United States Department of Agriculture (USDA) and DHS to be eligible for reimbursement. The CACFP Sponsor reports the number of meals served through

the DHS Tennessee Information Payment System (TIPS) for reimbursement.

We inspected meal counts sheets for our test period and reconciled the meals claimed to the meals reported as served for each meal service. We also assessed compliance with civil rights requirements.

**Important COVID-19 note:** Due the current outbreak and the risk that COVID19 poses to your organization personnel and our staff, all our staff are working from home with no or very limited access to the office. Therefore, we will not send a copy of this report via regular mail until further notice. Please confirm the receipt of this email as it is currently the option to communicate to you. If you need any assistance or have any questions, please do not hesitate to contact us via email.

Our review of the Sponsor's records for December 2019 disclosed the following:

## **1. The Sponsor reported meal counts incorrectly**

### Condition

#### ***Fresh Start – sample site***

Based on our review of the Claim for Reimbursement for December 2019, the Sponsor reported 296 breakfast meals and 287 lunch meals served. However, based on our review of available documents, we noted that there were 295 breakfast meals and 287 lunch meals served, prior to any meal disallowances.

As a result, one (1) breakfast meal was overreported. (See Exhibit B)

### Criteria

*Title 7 of the Code of Federal Regulations, Section 226.10(c)* states, "... In submitting a Claim for Reimbursement, each institution shall certify that the claim is correct and that records are available to support that claim...."

### Recommendation

The Sponsor should ensure that claims for reimbursement are completed correctly and based on accurate supporting documents.

## **2. The Sponsor provided menus that did not meet the USDA meal pattern requirements**

### Condition

Based on our review of the menus provided by the Sponsor for December 2019, the menus provided did not meet the USDA meal pattern requirements. The menus provided had deficiencies as follows:

**Fresh Start – sample site**

<b>Date</b>	<b>Menu</b>	<b>Menu Error</b>	<b>Meal Type</b>	<b>No. of Meals</b>
12/6/19	Turkey breast/gravy, mixed vegetables, applesauce, milk	Missing grain component	Lunch	9

**Stepping Stones - sample site**

<b>Date</b>	<b>Menu</b>	<b>Menu Error</b>	<b>Meal Type</b>	<b>No. of Meals</b>
12/3/19	Chicken Patty, corn, side salad, pineapple	insufficient grain component in patty breading, milk not documented on menu	Lunch	50
12/31/19	Chicken wings, meatballs, broccoli, cauliflower, carrot sticks, pineapple, chips/dip	Missing grain component and milk not documented on menu	Lunch	48

As a result, 107 lunch meals claimed for reimbursement were disallowed. (See Exhibit B and C)

Criteria

*Title 7 of the Code of Federal Regulations, Section 226.19 (a)(6)* Each adult day care center participating in the Program shall claim only the meal types specified in its approved application in accordance with the meal pattern requirements specified in §226.20. Participating centers may not claim CACFP reimbursement for meals claimed under part C of title III of the Older Americans Act of 1965. Reimbursement may not be claimed for meals served to persons who are not enrolled, or for meals served to participants at any one time in excess of the center's authorized capacity, or for any meal served at a for-profit center during a calendar month when less than 25 percent of enrolled participants were title XIX or title XX beneficiaries. Menus and any other nutritional records required by the State agency shall be maintained to document compliance with such requirements.

*Title 7 of the Code of Federal Regulations, Section 226.20(a)(1)* states, "Fluid milk must be served as a beverage or on cereal, or a combination of both, as follows: (i) Children 1 year old. Children one year of age must be served unflavored whole milk. (ii) Children 2 through 5 years old. Children two through five years old must be served either unflavored low-fat (1 percent) or unflavored fat-free (skim) milk. (iii) Children 6 years and older. Children six years old and older must be served milk that is low-fat (1 percent fat or less) or fat-free (skim). Milk may be unflavored or flavored from July 1, 2018, through June 30, 2019 (school year 2018-2019)." (iv) Adults. Adults must be served milk that is low-fat (1 percent fat or less) or fat-free (skim). Milk may be unflavored or flavored from July 1, 2018, through June 30, 2019 (school year 2018-2019). Six ounces (weight) or 3/4 cup (volume) of yogurt may be used to fulfill the equivalent of 8 ounces of fluid milk once per day. Yogurt may be counted as either a fluid milk substitute or as a meat alternate, but not as both in the same meal."

*Title 7 of the Code of Federal Regulations, Section 226.20(c)(2)* states, "Fluid milk, meat and meat alternatives, vegetable, fruits, and grains are required components in the lunch and supper meals."

Recommendation

The Sponsor should maintain copies of commercially prepared food CN labels or Product Formulation Statements on file and follow the recommended serving sizes/equivalents listed on the label and ensure that all meals prepared meet the meal patterns established by the USDA, and menus should be reviewed to ensure they contain all required meal components to be eligible as a reimbursable meal.

### **Technical Assistance Provided**

Technical assistance was offered via email but was declined by the Sponsor.

### **Disallowed Meals Cost**

Based on the review, we determined that the Sponsor's noncompliance with the applicable Federal and State regulations that govern the CACFP resulted in a total disallowed cost of \$392.12.

### **Corrective Action**

The Sponsor must complete the following actions within 30 days from the date of this report:

- Log into the Tennessee Information Payment System (TIPS) and revise the claim submitted for December 2019, which contains the verified claim data from the enclosed exhibits. ***Please note that, if the claim is revised***, TIPS will automatically deduct the overpayment from your next CACFP claim for reimbursement. **OR**
- If you are no longer participating in the CACFP program, remit a check payable to the ***Tennessee Department of Human Services*** in the amount noted in the report for recovery of the amounts disallowed in this report. ***Please return the attached billing notice with your check***; and
- Prepare and submit a corrective action plan to address the deficiencies identified in this report. The corrective action plan template is attached. Please return the corrective action plan to:

[AuditServices.CAPS.DHS@tn.gov](mailto:AuditServices.CAPS.DHS@tn.gov)

If you have questions relative to the corrective action plan, please contact:

Allette Vayda, Director of Operations  
Child and Adult Care Food Program  
James K. Polk Building, 15<sup>th</sup> Floor  
505 Deaderick Street  
Nashville, Tennessee 37243  
[Allette.Vayda@tn.gov](mailto:Allette.Vayda@tn.gov)  
(615) 313-3769

Please note that the amount of disallowed cost is subject to an interest charge. The interest charge will be waived if your revised claim within 30 days from the date of this report. If the revised claim is not completed by the 30-day deadline, an interest charge may be billed to your institution. Please mail your check and the billing notice to:

Child and Adult Care Food Program  
Fiscal Services  
James K. Polk Building, 16<sup>th</sup> Floor  
505 Deaderick Street.  
Nashville, Tennessee 37243

In accordance with the federal regulation found at *7 CFR Part 226.6 (k)*, your institution may appeal the amount of disallowed cost identified in this monitoring report. The procedures for submitting an appeal are enclosed. The appeal must be submitted to:

Tennessee Department of Human Services  
Appeals and Hearings Division, Clerk's Office  
P.O. Box 198996  
Nashville, TN 37219

If the Institution decides to appeal the amount of disallowed administrative and meals cost, all appeal procedures must be followed as failure to do so may result in the denial of your request for an appeal.

We appreciate the assistance provided during this review. If you have any questions regarding this report, please contact Sean Baker, Audit Director 2, at 615-313-4727 or [Sean.Baker@tn.gov](mailto:Sean.Baker@tn.gov).

Sincerely,



Sam O. Alzoubi, CFE  
Director of Audit Services

#### Exhibits

cc: Sharon Stratton, Director of Psychosocial Rehabilitation Programs, Ridgeview Psychiatric Hospital and Center, Incorporated  
Allette Vayda, Director of Operations, Child and Adult Care Food Programs  
Debra Pasta, Program Manager, Child and Adult Care Food Program  
Elke Moore, Administrative Services Assistant 3, Child and Adult Care Food Program  
Constance Moore, Program Specialist, Child and Adult Care Food Program  
Marty Widner, Program Specialist, Child and Adult Care Food Program  
Rick Reese, Fiscal Director  
Comptroller of the Treasury, State of Tennessee

## EXHIBIT A

### Sponsor of Affiliated Centers Program Data

**Sponsor:** Ridgeview Psychiatric Hospital and Center, Incorporated

**Review Month/Year:** December 2019

**Total Reimbursement:** \$8,358.34

<b>Program Area</b>	<b>Reported on Claim</b>	<b>Reconciled to Documentation</b>
Total Number of Centers	4	4
Total CACFP Food Service Days	20	20
Total Attendance	1,887	1,834 <sup>1</sup>
Number of Breakfasts Served	861	860
Number of Lunches Served	1,667	1,560
Number of Supplements Served	738	738
Number of Participants in Free Category	190	NA <sup>2</sup>
Total Number of Participants	190	NA <sup>2</sup>

<sup>1</sup> The difference in the number claimed and the number verified is immaterial and therefore not a finding.

<sup>2</sup> The number of participants and their classifications were not verified due to the limited review because of COVID-19

## EXHIBIT B

### Verification of Affiliated Sponsored Center Data

#### Sample Site: Fresh Start

Site Meal Service Activity and Monitor Reconciliation	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	20	20
Total Attendance	303	296 <sup>1</sup>
Number of Breakfasts Served	296	295
Number of Lunches Served	287	278
Number of Participants in Free Category	38	NA <sup>2</sup>
Total Number of Participants	38	NA <sup>2</sup>

<sup>1</sup>The difference in the number claimed and the number verified is immaterial and therefore not a finding.

<sup>2</sup>The number of participants and their classifications was not verified due to the limited review because of COVID-19

## EXHIBIT C

### Verification of Affiliated Sponsored Center Data

#### Sample Site: Stepping Stones

Site Meal Service Activity and Monitor Reconciliation	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	20	20
Total Attendance	893	847 <sup>1</sup>
Number of Lunches Served	779	681
Number of Supplements Served	738	738
Number of Participants in Free Category	76	NA <sup>2</sup>
Total Number of Participants	76	NA <sup>2</sup>

<sup>1</sup> The difference in the number claimed and the number verified is immaterial and therefore not a finding.

<sup>1</sup>The number of participants and their classifications were not verified due to the limited review because of COVID-19



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Ben Redmond, Jr., Board Chair  
Ridgeview Psychiatric Hospital and Center, Incorporated  
240 West Tyrone Road  
Oak Ridge, Tennessee 37830

**Note: If you are no longer participating in the CACFP, remit a check payable to the Tennessee Department of Human Services in the amounts disallowed in this report to the address below. Please return the attached billing notice with your check.**

**If you continue participating in the CACFP, log into the Tennessee Information Payment System (TIPS) and revise the claim submitted for December 2019, which contains the verified claim data from the enclosed exhibits.**

Institution Name:	Ridgeview Psychiatric Hospital and Center, Incorporated
Institution Address:	240 West Tyrone Road; Oak Ridge, Tennessee 37830
Agreement Numbers:	00-473
Amount Due:	\$392.12
Due Date:	July 16, 2020

Please remit a check or money order payable to the **Tennessee Department of Human Services** in the amount noted above by the due date to:

**Fiscal Services 16th Floor  
James K. Polk Building  
505 Deaderick Street  
Nashville, Tennessee 37243  
Tennessee Department of Human Services**

Please note that the disallowed meals cost/overpayment of the CACFP is subject to an interest charge. The interest charge will be waived if the payment is received by the due date. If payment is not received by the end of 5th day of the due date, an interest charge may be added to the original amount due and will be billed to your entity.

If you have any questions regarding this notice, please feel free to contact Allette Vayda, Director of Operations at (615) 313-3769 or [Allette.Vayda@tn.gov](mailto:Allette.Vayda@tn.gov).

Thank you for your attention