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COMPTROLLER GENERAL OF THE UNITED STATES
WASHINGTON, D.C. 20548



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B-164031(3)

OCT 27 1976

The Honorable Delbert L. Latta
House of Representatives

Dear Mr. Latta:

This is in response to your letter dated July 23, 1976, and discussions with your office about what we can do to bring about proper handling of welfare program funds.

There are many Federal, federally assisted, and non-Federal programs which can be called welfare programs. These programs are directed to various needs, including food, shelter, clothing, education, health, and employment. Federal programs are administered by a large number of departments and agencies operating under an even larger number of legislative authorizations. The large number of such programs in itself contributes to the problems discussed in your letter.

Much publicity and interest in recent years have focused on welfare programs authorized under several titles of the Social Security Act. The unprecedented growth of these programs has caused many questions regarding their management.

Program evaluation is a fundamental part of effective program administration, and the agencies carrying out the programs are primarily responsible for evaluating their efforts in achieving the goals or objectives of the programs. However, we are also responsible for evaluating programs of Federal agencies.

GAO was created by the Budget and Accounting Act, 1921 (31 U.S.C. 41). The act broadened the Government's audit activities and established new responsibilities for reporting to the Congress. The scope of our activities was extended by the Budget and Accounting Procedures Act of 1950 (31 U.S.C. 65) and other legislation.

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Our basic purposes are to (1) help the Congress, its committees, and its members carry out their legislative responsibilities, consistent with our role as an independent nonpolitical agency in the legislative branch, (2) carry out legal, accounting, auditing, and claims settlement functions regarding Federal Government programs and operations, and (3) make recommendations designed to improve Government efficiency and effectiveness.

In addition to Federal Government programs, we audit the activities of State and local governments, quasi-governmental bodies, and private organizations in their capacity as recipients under or administrators for Federal-aid programs financed by loans, advances, and grants.

Our concern with the integrity of public assistance programs--the degree to which benefits are given only to eligible recipients and in the correct amounts--goes back many years. We have made many reviews and have issued reports regarding such programs. Many of these reports contained recommendations to increase the effectiveness, efficiency, and economy of Federal programs.

A listing of selected GAO reports on welfare programs issued to the Congress and its committees during fiscal year 1969 to the present is included as an enclosure. If you would like to have copies of any of the reports or to discuss our current efforts relating to welfare programs, please contact our Office of Congressional Relations.

Sincerely yours,


DEPUTY Comptroller General
of the United States

Enclosure

SELECTED GAO REPORTS ISSUEDFROM NOVEMBER 1968 TO AUGUST 1976

1. Need to Improve Procedures for Reporting Individuals as Rehabilitated Under the Vocational Rehabilitation Program (B-164131(3), Nov. 26, 1968)
2. Need for Timely Action in Resolving Problems Affecting the Eligibility of Hospitals Under the Medicare Program (B-164131(4), Dec. 27, 1968)
3. Additional Information Relating to GAO Report Concerning Eligibility of Hospitals Under Medicare Program (B-164031(4), Mar. 25, 1969)
4. Review of Medicare Payments for Services of Supervisory and Teaching Physicians at Cook County Hospital, Chicago, Illinois (B-164031(4), Sept. 3, 1969)
5. Monitoring of Special Review of Aid to Families with Dependent Children in New York City conducted by the Department of Health, Education, and Welfare, and the New York State Department of Social Services (B-164031(3), Oct. 17, 1969)
6. Questionable Claims Under the Medicaid Program for the Care of Persons in State Institutions for the Mentally Retarded in California (B-164031(3), May 11, 1970)
7. Problems in Approving and Paying for Nursing Home Care Under the Medicaid Program in California (B-164031(3), July 25, 1970)
8. Observations of the Test of the Simplified Method for Determining Eligibility of Persons for Adult Public Assistance Programs (B-164031(3), Aug. 5, 1970)
9. Continuing Problems in Providing Nursing Home Care and Prescribed Drugs Under the Medicaid Program in California (B-164031(3), Aug. 26, 1970)
10. Improvement Needed in the Administration of the Iowa and Kansas Medicaid Programs by the Fiscal Agents (B-164031(3), Oct. 20, 1970)

11. Controls Over Medicaid Drug Program in Ohio Need Improvement (B-164031(3), Nov. 23, 1970)
12. Improvements Needed in Processing Medicare Claims for Physicians' Services in Texas (B-164031(4), Dec. 31, 1970)
13. Opportunity to Reduce Medicare Costs by Consolidating Claims Processing Activities, Department of Health, Education, and Welfare and Railroad Retirement Board (B-164031(4), Jan. 21, 1971)
14. Ways to Reduce Payments for Physician and X-Ray Services to Nursing Home Patients Under Medicare and Medicaid (B-164031(3), Feb. 2, 1971)
15. Control Needed Over Excessive Use of Physician Services Provided Under the Medicaid Program in Kentucky (B-164031(3), Feb. 3, 1971)
16. Problems in Providing Proper Care to Medicaid and Medicare Patients in Skilled Nursing Homes (B-164031(3), May 28, 1971)
17. Lengthy Delays in Settling the Costs of Health Services Furnished Under Medicare (B-164031(4), June 23, 1971)
18. Comparison of the Simplified and Traditional Methods of Determining Eligibility for Aid to Families with Dependent Children (B-164031(3), July 14, 1971)
19. Ineffective Controls over Program Requirements Relating to Medically Needy Persons Covered by Medicaid (B-164031(3), July 28, 1971)
20. Improved Controls Needed Over Extent of Care Provided by Hospitals and Other Facilities to Medicare Patients (B-164031(4), July 30, 1971)
21. Drug Purchases for Medicaid Patients in Nursing Homes in Illinois (B-164031(3), Sept. 10, 1971)
22. Limited Impact of Federal Programs for Treating and Rehabilitating Narcotic Addicts (B-164031(2), Sept. 20, 1971)
23. Analysis of Federal Expenditures to Aid Cuban Refugees (B-164031(3), Nov. 3, 1971)

24. Problems in Paying for Services of Supervisory and Teaching Physicians in Hospitals Under Medicare (B-164031(4), Nov. 17, 1971)
25. Drugs Provided to Elderly Persons in Nursing Homes Under the Medicaid Program (B-164031(3), Jan. 5, 1972)
26. Continuing Problems in Paying State Claims for Administrative Expenses of Public Assistance Programs (B-164031(3), Feb. 7, 1972)
27. Problems in Attaining Integrity of Welfare Programs (B-164031(3), Mar. 16, 1972)
28. Ineffective Controls Over Program Requirements Relating to Medically Needy Persons Covered by Medicaid (B-164031(3), July 28, 1971)
29. Maternal and Child Health Programs Authorized by Title V, Social Security Act (B-164031(3), June 23, 1972)
30. More Needs to be Done to Assure That Physicians' Services--Paid for by Medicare and Medicaid--are Necessary (B-164031(4), Aug. 2, 1972)
31. Sizable Amounts Due the Government by Institutions That Terminated Their Participation in the Medicare Program (B-164031(4), Aug. 4, 1972)
32. Effectiveness of Vocational Rehabilitation in Helping the Handicapped (B-164031(3), Apr. 3, 1973)
33. Social Services: Do They Help Welfare Recipients Achieve Self-Support or Reduced Dependency? (B-164031(3), June 27, 1973)
34. Improvements Needed in the Administration of the Program to Provide Medicare Benefits for Welfare Recipients (B-164031(3), Aug. 14, 1973)
35. Comprehensive Health Planning As Carried Out By State and Areawide Agencies in Three States (B-164031(2), Apr. 18, 1974)
36. Home Health Care Benefits Under Medicare and Medicaid (MWD-74-179, July 9, 1974)

37. Need to More Consistently Reimburse Health Facilities Under Medicare and Medicaid (MWD-74-177, Aug. 16, 1974)
38. Need for More Effective Management of Community Mental Health Centers Program (MWD-74-151, Aug. 27, 1974)
39. Better Controls Needed for Health Maintenance Organizations Under Medicaid in California (MWD-75-6, Sept. 10, 1974)
40. Further Improvements Needed in the Processing of Widows' Claims for Black Lung Benefits (MWD-75-44, Dec. 31, 1974)
41. Improving Federally Assisted Family Planning Programs (MWD-75-25, Apr. 15, 1975)
42. A Proposal for Disclosure of Contractual and Financial Arrangements Between Hospitals and Members of Their Governing Boards and Hospitals and Their Medical Specialists (MWD-75-73, Apr. 30, 1975)
43. Review of Federal Programs Benefiting the Poor (MWD-75-87, June 2, 1975)
44. Outpatient Health Care in Inner Cities: Its Users, Services, and Problems (MWD-75-81, June 6, 1975)
45. Improvements Needed in Medicaid Program Management Including Investigations of Suspected Fraud and Abuse (MWD-75-74, June 14, 1975)
46. Need for More Uniform Application of the Presumptive Disability Provision of the Supplemental Security Income Program (MWD-76-2, Oct. 16, 1975)
47. Compliance with Institutional Utilization Review Requirements of Section 1903(g) of the Social Security Act (MWD-76-89, Jan. 1, 1976)
48. History of the Rising Costs of the Medicare and Medicaid Programs and Attempts to Control These Costs: 1966-1975 (MWD-76-93, Feb. 11, 1976)
49. New Child Support Legislation--Its Potential Impact and How to Improve It (MWD-76-63, Apr. 5, 1976)

50. More Can Be Learned and Done About the Well-Being of Children (MWD-76-23, Apr. 9, 1976)
 51. Problems in Administering Supplemental Security Income for the Aged, Blind, and Disabled (MWD-76-73, June 11, 1976)
 52. Tighter Controls Needed Over Payments for Laboratory Services Under Medicare and Medicaid (HRD-76-121, Aug. 4, 1976)
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