

ONE HUNDRED FIFTEENTH CONGRESS  
**Congress of the United States**  
**House of Representatives**  
COMMITTEE ON ENERGY AND COMMERCE  
2125 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-6115  
Majority (202) 225-2927  
Minority (202) 225-3641

May 31, 2017

Ms. Katherine Iritani  
Director, Health Care  
U.S. Government Accountability Office  
441 G Street, N.W.  
Washington, DC 20226

Dear Ms. Iritani:

Thank you for appearing before the Subcommittee on Oversight and Investigations on Tuesday, May 2 2017, to testify at the hearing entitled "Combating Waste, Fraud, and Abuse in Medicaid's Personal Care Services Program."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on Wednesday, June 14, 2017. Your responses should be mailed to Elena Brennan, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, DC 20515 and e-mailed in Word format to [Elena.Brennan@mail.house.gov](mailto:Elena.Brennan@mail.house.gov).

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,  


Tim Murphy  
Chairman  
Subcommittee on Oversight and Investigations

cc: The Honorable Diana DeGette, Ranking Member, Subcommittee on Oversight and Investigations

Attachment

## Attachment—Additional Questions for the Record

### The Honorable Frank Pallone

1. The Medicaid program is designed to give states flexibility to design their programs under broad federal guidelines. However, that flexibility can make it difficult to conduct effective oversight and ensure that these state programs are adequately serving beneficiaries. In your testimony, regarding the Medicaid PCS program, you stated: “Beneficiaries with similar needs could be receiving services in programs with significantly different safeguards in place, depending on the program.”
  - a. How do different program requirements affect beneficiary safeguards, as well as fiscal oversight?
  - b. What steps should the Centers for Medicare & Medicaid Services (CMS) take to harmonize requirements across PCS programs?