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INDEPENDENT ACCOUNTANTS' REPORT ON APPLYING AGREED-UPON PROCEDURES

Ohio Department of Medicaid
50 West Town Street, Suite 400
Columbus, Ohio 43215

We have performed the procedures enumerated below on the Voca Corporation of Ohio DBA ResCare Ohio-London's Medicaid Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID) Cost Report and Medicaid payments for the year ended December 31, 2021 and certain compliance requirements related to the Cost Report and Medicaid services included in the information provided to us by the management of the ICF-IID. The ICF-IID is responsible for the Cost Report for the year ended December 31, 2021 and certain compliance requirements related to the Cost Report and Medicaid services included in the information provided to us by the ICF-IID.

The Ohio Department of Medicaid and the Ohio Department of Developmental Disabilities have agreed to and acknowledged that the procedures performed are appropriate to meet the intended purpose of providing assistance in the evaluation of the ICF-IID's Cost Report for the year ended December 31, 2021, and certain compliance requirements related to the Cost Report and Medicaid services. No other party acknowledged the appropriateness of the procedures. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of the report and may not meet the needs of all users of the report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes. The sufficiency of the procedures is solely the responsibility of the parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

The procedures and the associated findings are as follows:

Census Data and Medicaid Paid Claims

1. We footed the Census by Location report. There were no computational errors. We compared the total of inpatient and leave days from the census report to *Schedule A-1, Summary of Inpatient Days*. There were no omitted days.
2. We selected a minimum of eight residents from the Census by Location report and included residents with leave days in the selection. We obtained the medical records for the selected individuals for one month. We confirmed the ICF-IID maintained service documentation for each selected date as required by Ohio Admin. Code §§ 5123-7-12(H) and 5123:2-3-04(I) for seven of the eight residents.

Recoverable Finding: \$5,551

We found one resident without supporting medical records for 19 days in September 2021. We compared these dates to the Summary by Service Code and found unsupported payments for all 19 days and calculated a finding in the amount of \$5,551 per Ohio Admin. Code §5160-1-17.2(D).

For any reimbursed leave days, we totaled leave days for each resident for the year from the Census by Location report and medical records. We found no residents had over 30 days for the year.

Census Data and Medicaid Paid Claims (Continued)

3. We compared the number of reimbursed Medicaid days with the total Medicaid days reported on *Schedule A-1*. We found that reported days are equal to net Medicaid reimbursed days.

Revenue

1. We agreed the revenue reported on *Attachment 1, Revenue Trial Balance* to the Detailed Revenue Ledgers and with the chart of account classifications in the Appendix to Ohio Admin. Code § 5123-7-12. There were no variances.
2. We scanned the description in the Detailed General Ledger for any discounts, allowances or refunds or rebates and compared these entries to the chart of account codes on *Attachment 2, Adjustments to Trial Balance; Schedule B-1, Other Protected Costs; Schedule B-2, Direct Care Cost Center; or Schedule C, Indirect Cost Care Center*. We found no unreported offsets or reclassifications between schedules.

Non-Payroll Expenses

1. We compared all non-payroll expenses from the Mapping Trial Balance, Home Office, Core and Residential Allocation worksheets to *Schedule B-1, B-2 and C*. We found no variances.
2. We scanned the General Ledger Detail report for potentially unallowable or improperly allocated costs and costs with no business purpose associated with the ICF-IID per CMS Publication 15-1, § 2102 to 2139 and § 2302.4.

We selected 30 non-payroll expenses and 10 home office expenses from *Schedules B-1, B-2, and C* and obtained the invoice and/or contract for each expense, and, if the purpose of the expense was unclear, we inquired with the ICF-IID. Using this documentation and any additional explanations, we performed the following procedures on each expense:

- We confirmed that the documentation for the full cost was maintained as required by Ohio Admin. Code § 5123-7-12(H). We found variances resulting in decreased costs as reported in the Appendix.
- We footed the invoice/documentation for accuracy. We found no computational differences resulting in decreased costs. We compared the invoice rate to the contracted rate. We found no variances within the rates.
- We compared the documentation for each expense to the unallowable categories listed in CMS Publication 15-1, § 2102 to 2139. We found no non-federal reimbursable unallowable costs.
- We compared the documented type of non-payroll expense to the schedule and chart of account classification reported on the Cost Report and to the chart of account classifications in the Appendix to Ohio Admin. Code § 5123-7-12 and the Instructions for completing the Ohio Department of Developmental Disabilities calendar year cost report for Intermediate Care Facilities for Individuals with Intellectual Disabilities Cost Report (Cost Report Instructions). We found no variances between schedules exceeding \$500
- We documented the name and type of expense and inquired with ICF-IID to confirm that the business purpose of the expense benefitted the ICF-IID in accordance with CMS Publication 15-1 § 2302.4. We found costs that did not benefit the ICF-IID as reported in the Appendix.

Non-Payroll Expenses (Continued)

- We compared the cost and type of expense on the documentation to Ohio Admin. Code § 5123-7-18 and the ICF's Depreciation/ Capitalization Policy to confirm that the expense was not a capital asset. We found no unidentified capital assets.
 - We compared the cost methodology and allocation statistics for each expense to the allowable methods per CMS Publication 15-1 § 2302.4. We found no variances resulting in decreased costs. We confirmed each amount was expensed during 2021 and used the proper accounting basis in accordance with the Cost Report instructions.
3. We compared the cost methodology used in the Home Office, Core and Residential Allocation worksheets for Schedules B-1, B-2, and C and to Ohio Admin. Code § 5123-7-12 and CMS Publication 15-1, § 2150. There were no reclassifications or adjustments resulting in decreased costs.

Property

1. We compared the initial square footage and year of construction of the 56 Graham Avenue facility from the Madison County Auditor's Property records to *Attachment 9, Fair Rental Value Survey*. There were no variances in the year or square footage variances exceeding 10 percent.

We also compared the square footage, type and year of construction for one recent removal from the residential care facility license and the Madison County Auditor's Property records to *Attachment 9, Log 1: Additions and Removals* and the Cost Report Instructions. We found no difference in the year, type and/or square footage variances exceeding 10 percent.

2. We compared the project year, type and cost for five recent renovations from the invoices to *Attachment 9, Log 2: Renovations Projects*. We also compared the type and cost of the renovation to the Cost Report Instructions. There were no year or type variances or decreases in costs.
3. We compared the square footage and year of construction of the 805 N. Whittington Parkway home office and the 3700 Corporate Drive Ste 110 core office from the Home Office square footage summary, property lease documentation, Franklin County Property tax records and floor plans to *Attachment 9: Log 3: Secondary Buildings* and the Cost Report instructions. There were no variances.

We also compared the utilization percentage from the Home Office, Residential and Core Allocation worksheets to Attachment 9 and the Cost Report Instructions and CMS Publication 15-1 §§ 2150 and 2302.4. There were no decreases in the utilization percentage.

4. We compared equipment depreciation and lease costs from the Fixed Asset/Depreciation Schedules, Home Office, Residential and Core Allocation worksheets and General Ledger Detail to *Schedule D, Capital Cost Center*, the Cost Report Instructions. There were no unsupported costs.

We scanned the Fixed Asset/Depreciation Schedules and General Ledger Detail to identify any reported loss on *Schedule D* no in accordance with CMS Publication 15-1, § 104.10(E). We found no capital loss.

We selected one capital asset each from account 8040 and 8090 which were being depreciated in the first year. We recalculated the first year's depreciation for the two assets selected, based on the Cost Report instructions and useful lives prescribed in the 2018 American Hospital Association (AHA) Asset Guide and Appendix A of Ohio Admin. Code § 5123:2-7-18.

Property (Continued)

We compared the recalculated depreciation to the reported depreciation and found a variance resulting in decreased costs as reported in the Appendix.

Payroll

1. We compared all salary and fringe benefits on the Mapping Trial Balance to *Schedules B-2* and *C*. There were no variances resulting in decreased costs.

We also compared hours and percentage of time worked and salaries from the Administrator's Wage Allocation worksheet to *Schedule C-1, Administrator's Compensation*. There were no variances resulting in decreased costs.

2. We obtained the detailed Payroll Disbursement Journal and selected five employees reported on *Schedules B-2* and *C* and obtained the job descriptions and Mapping Trial Balance (payroll documentation) and if the programs will benefit from the employees' work is unclear, we inquired with the ICF-IID. We performed the following procedures on each selected employee:
 - We compared the employee payroll documentation to the Cost Report and confirmed if documentation for the full cost was maintained as required by Ohio Admin. Code § 5123-7-12(H). We found no unsupported expenses.
 - We compared the employee payroll documentation for each expense to the unallowable categories listed in CMS Publication 15-1, § 2102 to 2139 and determined if the cost benefitted the Medicaid program in accordance with CMS Publication 15-1 § 2302.4. We found no non-reimbursable costs.
 - We compared the employee payroll documentation to the schedule and account classification reported on the Cost Report and to the chart of account classification in the Appendix to Ohio Admin. Code § 5123-7-12 and to the Cost Report instructions. We found no reclassifications between schedules exceeding \$500.
 - We compared the cost methodology and allocation statistics for each expense to the allowable methods per CMS Publication 15-1 § 2302.4 and determined if each amount was expensed during 2021 and used the proper accounting basis in accordance with the Cost Report instructions. We found no variances resulting in decreased costs.

Contracted Personnel

1. We selected the one contracted personnel reported on *Schedule B-2* and obtained the corresponding contract and General Ledger Detail, and if the purpose of the contract expense is unclear, we inquired with the ICF-IID (contract documentation). Using this documentation, we performed the following procedures on each selected contracted personnel:
 - We compared contract documentation to the General Ledger Detail and Cost Report instructions to confirm documentation for the full cost was maintained as required by Ohio Admin. Code § 5123-7-12(H). The ICF stated there was no monthly invoice documentation for 2021 for this contractor and we reclassified these unsupported costs as reported in the Appendix.
 - We compared the monthly rate charged in the Detailed General Ledger to the contracted rate and found no variances.
 - We compared the contract documentation to the unallowable categories listed in CMS Publication 15-1, § 2102 to 2139 and determined if the costs benefitted the ICF-IID in accordance with CMS Publication 15-1 § 2302.4. We found no unallowable costs or costs that did not benefit the ICF-IID.

Contracted Personnel (Continued)

- We compared the documented contract cost and type of expense to the schedule and chart of account classification reported on the Cost Report and to the chart of account classification in the Appendix to Ohio Admin. Code § 5123-7-12. We found no reclassifications between schedules exceeding \$500.
- We compared the cost methodology and allocation statistics for each expense to the allowable methods per CMS Publication 15-1 § 2302.4. We found no variances resulting in decreased costs.
- We confirmed each amount was expensed during 2021 and used the proper accounting basis in accordance with the Cost Report Instructions. We found no variances resulting in decreased costs.

We were engaged by the Ohio Department of Medicaid to perform this agreed-upon procedures engagement and conducted our engagement in accordance with the attestation standards established by the American Institute of Certified Public Accountants (AICPA). We were not engaged to, and did not conduct an examination or review engagement, the objective of which would be the expression of an opinion or conclusion, respectively, on the ICF-IID's Cost Report and compliance with certain laws and regulations. Accordingly, we do not express an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We are required to be independent of the ICF-IID and to meet our ethical responsibilities, in accordance with the ethical requirements established by the AICPA related to our agreed upon procedures engagement.



Keith Faber
Auditor of State
Columbus, Ohio

February 28, 2023

Appendix
Voca Corporation of Ohio DBA ResCare Ohio-London
Medicaid ICF-IID Cost Report Adjustments

	Reported Amount	Correction	Corrected Amount	Explanation of Correction
Schedule B-1 Other Protected Costs				
7. Heat, Light, Power - 6020 - Other/Contract Wages (2)	\$ 13,538	\$ (909)	\$ 12,629	To reclassify expenses allocable to another facility to non-reimbursable costs.
Schedule B-2 Direct Care Cost Center				
24. Other Direct Care - Specify Below - 6220 - Other/Contract Wages (2)	\$ 3,789	\$ (3,600)	\$ 189	To reclassify unsupported expense without invoices as non-federal reimbursable costs.
Schedule C Indirect Care Cost Center				
30. Communications - 7225 - Other/Contract Wages (2)	\$ 10,889	\$ (151)		To reclassify expenses allocable to another facility to non-reimbursable
		\$ (182)		To reclassify expenses allocable to another facility to non-reimbursable
		\$ (182)		To reclassify expenses allocable to another facility to non-reimbursable
		\$ (182)		To reclassify expenses allocable to another facility to non-reimbursable
		\$ (182)		To reclassify expenses allocable to another facility to non-reimbursable
		\$ (182)	\$ 9,828	To reclassify expenses allocable to another facility to non-reimbursable
68. Other Non-Reimbursable - Specify Below - 9725 - Other/Contract Wages (2)	\$ -	\$ 909		To reclassify expenses allocable to another facility to non-reimbursable
		\$ 151		To reclassify expenses allocable to another facility to non-reimbursable
		\$ 182		To reclassify expenses allocable to another facility to non-reimbursable
		\$ 182		To reclassify expenses allocable to another facility to non-reimbursable
		\$ 182		To reclassify expenses allocable to another facility to non-reimbursable
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		\$ 182		To reclassify expenses allocable to another facility to non-reimbursable
		\$ 3,600	\$ 5,570	To reclassify unsupported expense without invoices as non-federal reimbursable costs.
Schedule D Capital Cost Center				
4. Depreciation - Equipment - 8040 - Total (3)	\$ 1,740	\$ (12)	\$ 1,728	To correct for depreciation expense

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VOCA CORPORATION OF OHIO DBA RESCARE OHIO-LONDON

MADISON COUNTY

AUDITOR OF STATE OF OHIO CERTIFICATION

This is a true and correct copy of the report, which is required to be filed pursuant to Section 117.26, Revised Code, and which is filed in the Office of the Ohio Auditor of State in Columbus, Ohio.



Certified for Release 3/28/2023

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This report is a matter of public record and is available online at
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