



Independent Accountants' Report on Applying Agreed-Upon Procedures

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

RE: Hoang U. Lim, D.O. NPI: 1891012225 Program Year 1: Adopt, Implement or Upgrade

We have performed the procedures enumerated below, which were agreed to by the Ohio Department of Medicaid (ODM), on Dr. Hoang U. Lim's (hereafter referred to as the Provider) compliance with the requirements of the Medicaid Provider Incentive Program (MPIP) for the year ended December 31, 2015. The Provider is responsible for compliance with the MPIP requirements. The sufficiency of these procedures is solely the responsibility of ODM. Consequently, we make no representation regarding the sufficiency of the procedures enumerated below either for the purpose for which this report has been requested or for any other purpose.

- 1. We compared the Provider's Ohio Medicaid Agreement dates from the Medicaid Information Technology System (MITS) to the patient volume attestation period. We found the Provider had an active Ohio Medicaid Agreement in effect during the attestation period.
- 2. Using the Ohio e-license center, we compared the Provider type and licensure dates to the MPIP system and the patient volume attestation period. We found the Provider type was the same as reported in MPIP and the Provider was licensed to practice in Ohio during the attestation period.
- 3. Using the MPIP system, we confirmed the Provider underwent the ODM's payment approval process, was approved for an incentive payment and received an incentive payment.
 - We compared the date of the payment approval with the date of the incentive payment and confirmed the payment approval occurred prior to the payment. We also compared the payment amount with the MPIP payment schedule and confirmed that ODM issued the correct payment amount.
- 4. We obtained the list of all encounters during the patient volume attestation period from the Provider. We scanned the list and found duplicate encounters. We removed duplicates and recalculated encounters. We also scanned the list for inclusion of multiple payer sources and found no unrecorded encounters.
- 5. We recalculated the Medicaid patient volume from the final Provider's Medicaid encounters identified in procedure 4 and confirmed the Provider met the 30 percent patient volume requirement.
- We found that the location where the Provider worked was now using a newer version of the electronic health record (EHR) software reported in the MPIP system. We verified that the newer version of the EHR software was approved by the Office of the National Coordinator of Health IT.

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This agreed-upon procedures engagement was conducted in accordance with the American Institute of Certified Public Accountants' attestation standards. We were not engaged to and did not conduct an examination or review, the objective of which would be the expression of an opinion or conclusion, respectively, on the Provider's compliance with the requirements of the Medicaid Provider Incentive Program. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported. This report is intended solely for the information and use of the Provider and the ODM, and is not intended to be, and should not be used by anyone other than the specified parties.

Dave Yost Auditor of State

November 16, 2018



HOANG LIM

COSHOCTON COUNTY

CLERK'S CERTIFICATION

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

CLERK OF THE BUREAU

Susan Babbitt

CERTIFIED DECEMBER 27, 2018