



OHIO AUDITOR OF STATE  
**KEITH FABER**





# OHIO AUDITOR OF STATE KEITH FABER



Medicaid Contract Audit  
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## Independent Accountants' Report on Applying Agreed-Up Procedures

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

RE: Agnes M. Laus, M.D. NPI: 1881670974  
Program Year 2017: Meaningful Use Stage 2 Year 1

We have performed the procedures enumerated below, which were agreed to by the Ohio Department of Medicaid (ODM), on Dr. Agnes M. Laus' (hereafter referred to as the Provider) compliance with the requirements of the Medicaid Promoting Interoperability Program (MPIP) for the year ended December 31, 2017. 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 scanned the Provider's group encounters during the patient volume attestation period, found no duplicate encounters and noted multiple payer sources. We calculated the Medicaid patient volume and confirmed the Provider met the 30 percent requirement.
2. We compared the system generated dashboards to the applicable criteria and to the summaries for Meaningful Use Objectives 3 through 9 and the Clinical Quality Measures. We found Objective 7: Medication Reconciliation did not meet the applicable criteria. We found all other reported objectives and measures met the applicable criteria. We noted a variance greater than 10 percent for Objective 5: Summary of Care. As a result, we performed additional procedures.
3. The Provider's electronic health record (EHR) system was different than reported in the MPIP system and the Provider submitted a verification letter identifying the new EHR system. We verified that the new EHR system was approved by the Office of the National Coordinator of Health IT.
4. We compared the Provider's equipped practice location during the meaningful use period to the location included in the meaningful use report. We found no exception.
5. The Provider subsequently submitted the system generated dashboard from 2017 that was used for the attestation. We compared supporting documentation for the 10 objectives on the original dashboard to the applicable criteria and all reported objectives met the applicable criteria. For those objectives that require only unique patients be counted, we scanned the detailed data for each query and found no duplicates.
6. We compared the system generated dashboard for the clinical quality measures to the applicable criteria and the Provider met the minimum requirements.

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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 Promoting Interoperability 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 ODM, and is not intended to be, and should not be used by anyone other than the specified party.



Keith Faber  
Auditor of State  
Columbus, Ohio

December 15, 2020

# OHIO AUDITOR OF STATE KEITH FABER



**AGNES M. LAUS, M.D.**

**FAIRFIELD 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 12/29/2020**

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This report is a matter of public record and is available online at  
[www.ohioauditor.gov](http://www.ohioauditor.gov)