



OHIO AUDITOR OF STATE
KEITH FABER



OHIO AUDITOR OF STATE KEITH FABER



Medicaid Contract Audit
88 East Broad Street
Columbus, Ohio 43215
(614) 466-3340
ContactMCA@ohioauditor.gov

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 intermediate care facility for individuals with intellectual disabilities, Champaign Residential Services, Inc. dba CRSI-McKinley Avenue Home's (the ICF-IID) Medicaid ICF-IID Cost Report and Medicaid payments for the year ended December 31, 2019 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 Medicaid ICF-IID Cost Report for the year ended December 31, 2019 and certain compliance requirements related to the Cost Report and Medicaid services included in the information provided to us by the ICF-IID.

The Department of Medicaid and the 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, 2019, 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:

Occupancy and Usage

1. We footed the Monthly QIDP Census Reports. There were no computational errors.

We compared the number of Medicaid and non-Medicaid patient days from the Monthly QIDP Census Reports to *Schedule A-1, Summary of Inpatient Days*. There were no omitted days.

2. We selected all six residents' medical records for June 2019 and compared the total days of care with inpatient days reported on the Monthly QIDP Census Report and *Schedule A-1*. There were no omitted days.

Medicaid Paid Claims

1. We selected paid claims for June 2019 from the Quality Decision Support System (QDSS) for all six residents selected in the Occupancy and Usage procedure and compared the reimbursed days to the days documented per the resident's medical records and to the payment adjustment requirements for resident's admission, discharge or death in the Ohio Admin. Code § 5123:2-7-15. There were no unsupported or unallowable reimbursed days.

Medicaid Paid Claims (Continued)

We compared the medical records and documentation of authorization for any bed hold days in excess of 30 in a calendar year and waiver respite days to the paid claims data. There were no bed hold days in excess of 30 days and no waiver respite days.

2. We compared the total number of reimbursed days per QDSS with the total Medicaid days on *Schedule A-1*. The reported days exceeded paid days.

Revenue

1. We compared revenues on the General Ledger to *Attachment 1, Revenue Trial Balance* and the Appendix to Ohio Admin. Code § 5123-7-12, and CMS Publication 15-1. There were no variances.
2. We scanned the General Ledger for any revenue offsets or applicable credits which were not reported 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* to offset corresponding expenses in accordance with CMS Publication 15-1, Chapters 1, 6, and 8. There were no omitted revenue offsets/applicable credits.

Non-Payroll Expenses

1. We compared home office non-payroll expenses from the Home Office Summary to the Home Office Allocation Worksheets. We then compared all non-payroll expenses from the Home Office Allocation Worksheets and the Trial Balance to *Schedule B-1, B-2 and C*. There were no variances.
2. We scanned the General Ledgers and selected 30 non-payroll expenses and 10 home office expenses from *Schedules B-1; B-2; and C* and compared supporting documentation to Ohio Admin. Code § 5123-7-12, the Cost Report Instructions for ICF-IID and CMS Publication 15-1. We found errors for non-federal reimbursable costs and decreased costs. We scanned the corresponding invoice documentation and found similar errors and misclassifications. We reported the combined errors and misclassifications in the Appendix.
3. We compared the cost methodology used in the Home Office Summary and Home Office Allocation Worksheets for *Schedules B-1, B-2 and C* to Ohio Admin. Code § 5123-7-12 and CMS Publication 15-1, Section 2150. There were no variances.

Property

1. We compared the year of initial construction and square footage of the 106 McKinley Avenue facility from the Knox County Auditor's Property records, to *Attachment 9, Fair Rental Value Survey*. There were no differences in the square footage; however, there was a difference in the year of initial construction as reported in the Appendix.
2. We compared the project year and cost for the three renovations from the invoices to *Attachment 9, Log 2: Renovations Projects*. We also compared the type and cost of the addition to the Cost Report Instructions for ICF-IID. There were no variances or variances resulting in a decrease in costs.
3. We compared the square footage and year of construction of secondary buildings from the square footage summary, floor plans and confirmation correspondence from the building's lessors, and the Allen, Clark, Champaign, Madison, Seneca County Auditor's property records to *Attachment 9: Log 3: Secondary Buildings*.

Property (Continued)

There was one variance in the year of construction for the line three of *Attachment 9: Log 3*. There were no square footage variances for lines one through three and line five. The secondary building reported on line four of *Attachment 9: Log 3* was comprised of 10 home office locations listed on the secondary building square footage summary with separate square footage and different years of construction for each. We compared the square footage of the Champaign and Knox county home office locations included on line four to square footage documentation provided by ICF-IID and found variances exceeding 10 percent as reported in the Appendix.

We also compared the utilization percentage from the Home Office Allocation Worksheet to *Attachment 9* and the Cost Report Instructions and CMS Publication 15-1. There were no variances.

4. We compared equipment depreciation and lease costs from the Depreciation Schedule and Home Office Allocation Worksheets to *Schedule D, Capital Cost Center*, the Cost Report Instructions and CMS Publication 15-1. There were no variances.

We selected one capital asset each from account 8040 and account 8090, which were being depreciated in the first year. We recalculated the first year's depreciation for the asset 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.

We compared the recalculated depreciation to the reported depreciation. There were no variances resulting in decreased costs.

Payroll

1. We compared all salary, fringe benefits, payroll tax entries and hours worked on the Trial Balance/Crosswalk and the Home Office Allocation Worksheets to *Schedule B-2 and Schedule C-1, Administrator's Compensation*. There were no variances.
2. We selected a sample of five employees on *Schedule B-2 and Schedule C-1*. We compared job descriptions and one month of Paycor Pay stub reports to the Detailed Payroll Ledger. We then compared the Detailed Payroll Ledger to the General Ledger and then to the schedule in which each employee's salary and fringe benefit expenses were reported. We also compared the payroll costs to Ohio Admin. Code § 5123:2-7 and to CMS Publication 15-1, Chapter 9 and Section 2150. There were no variances resulting in decreases in costs or non-federal reimbursable costs. There were no reclassifications between schedule exceeding \$500.

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 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 Medicaid ICF-IID 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.

Champaign Residential Services, Inc. dba CRSI-McKinley Avenue Home
Knox County
Independent Accountants' Report on
Applying Agreed-Upon Procedures
Page 4

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.

A handwritten signature in black ink that reads "Keith Faber". The signature is written in a cursive, flowing style.

Keith Faber
Auditor of State
Columbus, Ohio

March 28, 2022

Appendix
Champaign Residential Services, Inc. DBA CRSI - McKinley Avenue Home
Medicaid ICF-IID Cost Report Adjustments

	Reported Amount	Correction	Corrected Amount	Explanation of Correction
Schedule B-2 Direct Care Cost Center				
24. Home office Costs/Direct Care - 6230 - Other/Contract Wages (2)	\$ 5,885	\$ (241)	\$ 5,644	To reclassify gifts to employees as non-federal reimbursable costs.
Schedule C Indirect Care Cost Center				
30. Communications - 7225 - Other/Contract Wages (2)	\$ 9,310	\$ (52)	\$ 9,258	To remove an unsupported cell phone expense
48. Home Office Costs/Indirect Care ** - 7310 - Other/Contract Wages (2)	\$ 40,294	\$ (2)		To remove an unsupported cell phone expense
		\$ (68)	\$ 40,224	To reclassify gifts to employees as non-federal reimbursable costs.
68. Other Non-Reimbursable Costs - Specify Below 9725 - Other/Contract Wages (2)	\$ 593	\$ 309	\$ 902	To reclassify gifts to employees as non-federal reimbursable costs.
Schedule D Capital Cost Center				
11. Home Office Costs/Capital Costs - 8090 - Totals (3)	\$ 8,724	\$ (9)	\$ 8,715	To remove depreciaton expense for month of acquisition for asset tested.
Attachment 9, Fair Rental Value Survey Initial Construction				
Year of Initial Construction	2016	(1)	2015	To correct the initial year of construction
Attachment 9, Fair Rental Value Log 3				
3. Home Office/Record Storage - Year of Construction	2000	(43)	1957	To correct the year of construction for the London Home Office location
4. Home Office/Record Storage - Square Footage	19,098	(219)	18,879	To correct the square footage for the Knox County Home Office location

OHIO AUDITOR OF STATE KEITH FABER



**CHAMPAIGN RESIDENTIAL SERVICES, INC. DBA CRSI - MCKINLEY AVENUE HOME
KNOX 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 5/5/2022

88 East Broad Street, Columbus, Ohio 43215
Phone: 614-466-4514 or 800-282-0370

This report is a matter of public record and is available online at
www.ohioauditor.gov