TOBACCO SETTLEMENT PROGRAM

Forbes Hospital Tobacco Settlement Payment Data Review Year 2019

October 2018



Commonwealth of Pennsylvania Department of the Auditor General

Eugene A. DePasquale • Auditor General



Commonwealth of Pennsylvania Department of the Auditor General Harrisburg, PA 17120-0018 Facebook: Pennsylvania Auditor General Twitter: @PAAuditorGen

EUGENE A. DEPASQUALE AUDITOR GENERAL

October 17, 2018

Mr. Andrew Tisch Manager of Reimbursement Allegheny Health Network 30 Isabella Street, Suite 300 Pittsburgh, PA 15212

Re: Forbes Hospital

Dear Mr. Tisch:

The Tobacco Settlement Act of June 26, 2001 (P.L. 755, No. 77), as amended, 35 P.S. § 5701.101 et seq., mandated the Department of Human Services (DHS) to make payments to hospitals for a portion of uncompensated care services provided by these facilities. Hospitals that qualify can receive payments using either an uncompensated care approach or an extraordinary expense approach. The uncompensated care score of each hospital is determined by using three-year averages from five main data elements (for a total of fifteen data elements). These data elements are uncompensated care costs, net patient revenues, Medicare supplemental security income (Medicare SSI) days, Medical Assistance (MA) days and total inpatient days. A hospital qualifies for an extraordinary expense payment based on their number of qualified claims. Qualified claims are those claims in which the cost of the claim exceeds twice the average cost of all claims for that particular facility and for which the hospital provided inpatient services to an uninsured patient.

At the request of the DHS, the Department of the Auditor General performed a review¹ of Forbes Hospital's records to substantiate the claims data and days data it submitted to the Pennsylvania Health Care Cost Containment Council (PHC4) and the DHS, respectively.

The purpose of our review was to determine whether this facility could substantiate its fiscal year ended June 30, 2017 reported claims and verify whether corresponding patients were uninsured and the facility received no compensation from third party payers such as Medicare, Medicaid, or Blue Cross. Payments made by the patients themselves toward their financial obligations may have reduced the allowable costs of the respective claim when determining

¹ This review was not required to be and was not conducted in accordance with professional auditing or attestation standards.

eligibility. We also determined whether this facility could substantiate total MA days as reported on its submitted MA-336 cost reports for the fiscal years ended June 30, 2015 and June 30, 2016.

The results of our review are as follows:

For Reported Claims:

Based on the PHC4 claims database for the fiscal year ended June 30, 2017, the facility reported eight potentially eligible extraordinary expense claims, totaling \$806,833.28, for review. We reviewed six of these reported claims, representing at least 75% of the hospital's total dollar value of reported claims. The results of our review disclosed that all six of these reported potentially eligible extraordinary expense claims met the criteria to qualify as extraordinary expense claims. The chart below details our results and explains any adjustments that should be made to the PHC4 Database. Since we determined that all six of these reported claims submitted by the facility qualify as extraordinary expense claims, this facility could be eligible for payment under the extraordinary expense method for the 2019 Tobacco Settlement Payment Year.

	Originally	Substantiated	Patient		
	Reported	Total Charges	Payments	Qualify (Y/N) –	
Claim	Total	Based on	Applied to	Reason for Not	Adjustment(s)
No.	Charges	Account Notes	Account	Qualifying	Needed
1	\$143,707.75	\$143,707.75	\$0	Y	N/A
2	\$142,616.53	\$142,616.53	\$0	Y	N/A
3	\$125,267.48	\$125,267.48	\$0	Y	N/A
4	\$107,962.14	\$107,962.14	\$0	Y	N/A
5	\$84,985.71	\$84,985.71	\$0	Y	N/A
6	\$73,231.46	\$73,231.46	\$0	Y	N/A

For MA Days:

For the total MA days for fiscal years ended June 30, 2015 and 2016, our results are as follows:

For FYE 6/30/15	or FYE 6/30/15 Originally		Explanation of
	Submitted Number	Number Based on	Difference
	of Days	Source Documents	
FFS Days	2,334	2,334	N/A
HMO Days	6,207	6,207	N/A
OOS Days	56	56	N/A

For FYE 6/30/16	Originally	Substantiated	Explanation of
	Submitted Number	Number Based on	Difference
	of Days	Source Documents	
FFS Days	2,807	2,808	Change in payer type
HMO Days	10,149	10,962	Reporting error
OOS Days	57	57	N/A

The DHS will use all substantiated reported claims and number of days to calculate Forbes Hospital's eligibility to receive, and if deemed eligible, its subsidy entitlement under both the extraordinary expense and uncompensated care methods. If eligible under both methods, the DHS will allow the facility to choose the method to be used to calculate the facility's 2019 Tobacco Settlement subsidy entitlement payment. The DHS establishes the date that these payments will be distributed to all eligible hospitals.

Our office is currently reviewing all facilities that are potentially eligible for a 2019 Tobacco Settlement subsidy entitlement payment. After all the reviews are completed, we will prepare for the DHS' use a report detailing the results of all of our reviews. The PHC4 and the DHS will contact you with instructions regarding entering adjustments to your facility's originally submitted claims and MA days data based on the results of our review.

As a reminder, Forbes Hospital may submit for our review any claims coded as having Medicare, Medicaid, or any other insurance when submitted to the PHC4 for the fiscal year ended June 30, 2017, which the facility now believes qualify as self-pay claims, and which have total charges above Forbes Hospital's threshold of \$57,088.30. We refer to these types of claims as "additional claims" and these additional claims must be submitted to the Department of the Auditor General no later than October 31, 2018. The results of our review of each facility's submitted additional claims data will be detailed in individualized reports sent to each respective hospital that submitted additional claims.

We thank the staff of Allegheny Health Network for the cooperation extended to us during the course of our review. If you have any questions, please feel free to contact Tracie Fountain, CPA, Director, Bureau of Children and Youth Services Audits at 717-787-1159.

Sincerely,

Eugn f. O-Paspur

Eugene A. DePasquale Auditor General

FORBES HOSPITAL REPORT DISTRIBUTION 2019 TOBACCO SETTLEMENT PAYMENT DATA

This report was initially distributed to:

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Ms. Erica Eisenacher HSPS Bureau of Managed Care Department of Human Services

Mr. Andrew Tisch Manager of Reimbursement Allegheny Health Network

This report is a matter of public record and is available online at <u>www.PaAuditor.gov</u>. Media questions about the report can be directed to the Pennsylvania Department of the Auditor General, Office of Communications, 229 Finance Building, Harrisburg, PA 17120; via email to: <u>news@PaAuditor.gov</u>.