## DEPARTMENT OF HEALTH AND HUMAN SERVICES



Office of Audit Services 1100 Commerce, Room 632 Dallas, Texas 75242

April 8, 2009

Report Number: A-06-08-00015

Mr. Dan Bloodworth Senior Vice President and CFO Pinnacle Business Solutions, Inc. 515 Pershing Boulevard North Little Rock, Arkansas 72114

Dear Mr. Bloodworth:

Enclosed is the U.S. Department of Health and Human Services (HHS), Office of Inspector General (OIG), final report entitled "Audit of Pinnacle Business Solutions, Inc.'s, Medicare Part A Final Administrative Cost Proposals for Fiscal Years 2005 through 2007." We will forward a copy of this report to the HHS action official noted on the following page for review and any action deemed necessary.

The HHS action official will make final determination as to actions taken on all matters reported. We request that you respond to this official within 30 days from the date of this letter. Your response should present any comments or additional information that you believe may have a bearing on the final determination.

Pursuant to the Freedom of Information Act, 5 U.S.C. § 552, OIG reports generally are made available to the public to the extent that information in the report is not subject to exemptions in the Act. Accordingly, this report will be posted on the Internet at <a href="http://oig.hhs.gov">http://oig.hhs.gov</a>.

If you have any questions or comments about this report, please do not hesitate to call me, or contact Paul Chesser, Audit Manager, at (501) 225-8114 or through e-mail at Paul.Chesser@oig.hhs.gov. Please refer to report number A-06-08-00015 in all correspondence.

Sincerely,

Gordon L. Sato

Regional Inspector General

for Audit Services

: Gordon & Sap

**Enclosure** 

# **Direct Reply to HHS Action Official:**

Nanette Foster Reilly, Consortium Administrator Consortium for Financial Management & Fee for Service Operations Centers for Medicare & Medicaid Services 601 East 12<sup>th</sup> Street, Room 235 Kansas City, Missouri 64106 rokcmora@cms.hhs.gov

# Department of Health and Human Services

# OFFICE OF INSPECTOR GENERAL

AUDIT OF PINNACLE BUSINESS SOLUTIONS, INC.'S, MEDICARE PART A FINAL ADMINISTRATIVE COST PROPOSALS FOR FISCAL YEARS 2005 THROUGH 2007



Daniel R. Levinson Inspector General

> April 2009 A-06-08-00015

# Office of Inspector General

http://oig.hhs.gov

The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452, as amended, is to protect the integrity of the Department of Health and Human Services (HHS) programs, as well as the health and welfare of beneficiaries served by those programs. This statutory mission is carried out through a nationwide network of audits, investigations, and inspections conducted by the following operating components:

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The Office of Evaluation and Inspections (OEI) conducts national evaluations to provide HHS, Congress, and the public with timely, useful, and reliable information on significant issues. These evaluations focus on preventing fraud, waste, or abuse and promoting economy, efficiency, and effectiveness of departmental programs. To promote impact, OEI reports also present practical recommendations for improving program operations.

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at <a href="http://oig.hhs.gov">http://oig.hhs.gov</a>

Pursuant to the Freedom of Information Act, 5 U.S.C. § 552, Office of Inspector General reports generally are made available to the public to the extent that information in the report is not subject to exemptions in the Act.

#### OFFICE OF AUDIT SERVICES FINDINGS AND OPINIONS

The designation of financial or management practices as questionable, a recommendation for the disallowance of costs incurred or claimed, and any other conclusions and recommendations in this report represent the findings and opinions of OAS. Authorized officials of the HHS operating divisions will make final determination on these matters.

#### **EXECUTIVE SUMMARY**

#### **BACKGROUND**

Title XVIII of the Social Security Act established the Medicare Program, which provides for a hospital insurance program (Part A) and a supplementary medical insurance program (Part B). The Centers for Medicare & Medicaid Services (CMS) administers the Medicare program through contractors, including Part A fiscal intermediaries that process and pay Medicare claims. Contracts between CMS and the Medicare contractors define the functions to be performed and provide for the reimbursement of allowable administrative costs incurred in the processing of Medicare claims.

At the close of each fiscal year (FY), contractors submit to CMS a Final Administrative Cost Proposal (cost proposal), which reports the costs incurred in performing Medicare functions during the year. For FYs 2005 through 2007, CMS contracted with Pinnacle Business Solutions, Inc. (Pinnacle), to serve as the Medicare Part A contractor for Arkansas and Rhode Island. Pinnacle reported Medicare administrative costs totaling \$32,713,096 in its cost proposals for FYs 2005 through 2007.

#### **OBJECTIVE**

Our objective was to determine whether the administrative costs Pinnacle reported in its cost proposals were reasonable, allowable, and allocable in accordance with part 31 of the Federal Acquisition Regulations (FAR) and the Medicare contract.

#### **SUMMARY OF FINDINGS**

Pinnacle reported expenditures in its cost proposals that substantially complied with FAR and Medicare contract provisions. However, Pinnacle reported \$4,395 in unallowable costs: \$1,235 in overstated fringe benefit costs and \$3,160 in FY 2004 costs that it reported on the FY 2005 cost proposal. Pinnacle also reported \$95,245 in professional and consulting services costs and \$3,196 in subcontractor services costs that may be unallowable. We are setting aside the potentially unallowable costs for the CMS contracting officer to review for allowability.

Pinnacle had no forward-funding remaining for FYs 2005 through 2007; i.e., Pinnacle had performed all of the services for which it had received funding.

#### RECOMENDATION

We recommend that Pinnacle:

- decrease its FY 2005 cost proposal by \$3,644 and its FY 2006 cost proposal by \$751 to reflect the unallowable costs and
- work with the CMS contracting officer to determine the allowability of \$98,441 in costs related to professional and consulting services and subcontractor services costs.

#### PINNACLE COMMMENTS

In written comments on our draft report, Pinnacle agreed that it had reported unallowable costs. Pinnacle said that it had made or would make adjustments or offsets to decrease its FY 2005 cost proposal by \$3,644 and its FY 2006 cost proposal by \$751. Pinnacle said that it would work with CMS to determine the allowability of costs relating to professional and consulting services and subcontractor services.

Pinnacle's response to our draft report is included as Appendix D. We excluded the attachments to Pinnacle's comments because they contained personally identifiable information.

#### OFFICE OF INSPECTOR GENERAL RESPONSE

In addition to it comments, Pinnacle provided additional documentation supporting a portion of the unallowable costs and a portion of the potentially unallowable costs. We adjusted our draft report findings and recommendations based on the additional documentation.

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#### INTRODUCTION

#### **BACKGROUND**

Title XVIII of the Social Security Act established the Medicare Program, which provides for a hospital insurance program (Part A) and a supplementary medical insurance program (Part B). The Centers for Medicare & Medicaid Services (CMS) administers the Medicare program through contractors, including Part A fiscal intermediaries that process and pay Medicare claims. Contracts between CMS and the Medicare contractors define the functions to be performed and provide for the reimbursement of allowable administrative costs incurred in the processing of Medicare claims.

At the close of each fiscal year (FY), contractors submit to CMS a Final Administrative Cost Proposal (cost proposal), which reports the costs incurred in performing Medicare functions during the year. For FYs 2005 through 2007, CMS contracted with Pinnacle Business Solutions, Inc. (Pinnacle), to serve as the Medicare Part A contractor for Arkansas and Rhode Island. Pinnacle reported Medicare administrative costs totaling \$32,713,096 in its cost proposals for FYs 2005 through 2007.

#### **OBJECTIVE, SCOPE, AND METHODOLOGY**

#### **Objective**

Our objective was to determine whether the administrative costs Pinnacle reported in its cost proposals were reasonable, allowable, and allocable in accordance with part 31 of the Federal Acquisition Regulations (FAR) and the Medicare contract.

#### Scope

Our review covered the period October 1, 2004, through September 30, 2007 (FYs 2005 through 2007). For this period, Pinnacle reported Medicare administrative costs of \$32,713,096.

We performed a limited review of the internal controls and procedures Pinnacle had in place to allocate costs in accordance with the FAR and Medicare contract. We performed the review to accomplish our objectives, not to provide assurance on the internal control structure.

We conducted fieldwork at the Pinnacle campus in North Little Rock, Arkansas, from November 2007 through May 2008.

#### Methodology

To accomplish our objectives, we:

- reviewed applicable Medicare laws, regulations, and guidelines;
- reviewed the applicable sections of the FAR and Pinnacle contract with CMS;

- reviewed the independent auditor's reports for FYs 2005 and 2006;
- reviewed Pinnacle internal audit reports for FYs 2005 through 2007;
- reconciled line-item expenses on cost proposals and cost classification reports to the contractor's subsidiary record of expenses;
- reviewed journal entries, invoices, expense reports, contracts and agreements, and additional supporting documentation;
- interviewed Pinnacle officials regarding the cost accumulation processes for cost proposals and cost allocation systems;
- reviewed payroll and personnel records; and
- tested costs for reasonableness, allowability, and allocability.

Regarding top Pinnacle executives who had salaries allocated to Medicare, we:

- reviewed established personnel and accounting policies and procedures to determine Pinnacle's practices for allocating compensation costs to Medicare,
- compared a sample of executives' compensation to benchmark compensation amounts published in the Federal Register, and
- tested for excessive executive compensation costs.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

#### FINDINGS AND RECOMMENDATIONS

Pinnacle reported expenditures in its cost proposals that substantially complied with FAR and Medicare contract provisions. However, Pinnacle reported \$4,395 in unallowable costs: \$1,235 in overstated fringe benefit costs and \$3,160 in FY 2004 costs that it reported on the FY 2005 cost proposal. Pinnacle also reported \$95,245 in professional and consulting services costs and \$3,196 in subcontractor services costs that may be unallowable. We are setting aside the potentially unallowable costs for the CMS contracting officer to review for allowability.

Pinnacle had no forward-funding remaining for FYs 2005 through 2007; i.e., Pinnacle had performed all of the services for which it had received funding.

#### UNALLOWABLE COSTS

#### Fiscal Year 2004 Costs

FAR 31.201-2(a)(3) states: "A cost is allowable when the cost complies with . . . generally accepted accounting principles and practices appropriate to the circumstances." Also, the "Medicare Financial Management Manual," chapter 2, section 130, states that the final administrative cost proposals (FACP) ". . . shall not include adjustments related to prior years' costs on the current FACP."

Pinnacle incorrectly reported \$3,160 in FY 2004 costs in its FY 2005 cost proposal because the FY 2004 cost proposal was closed for adjustments. The costs include tuition reimbursement credits, subcontractor costs, and outside professional services.

#### **Fringe Benefit Costs**

Pinnacle reported unallowable fringe benefit costs of \$1,235 in its FYs 2005 and 2006 cost proposals.

Lobbying Costs

FAR 31.205-22(c) states: "When a contractor seeks reimbursement for indirect costs, total lobbying costs shall be separately identified in the indirect cost rate proposal, and thereafter treated as other unallowable activity costs."

Pinnacle reported \$1,000 of unallowable costs in its FYs 2005 and 2006 cost proposals for lobbying activities related to corporate membership in a trade organization.

State Unemployment Tax Refund

FAR 31.201-5 states: "The applicable portion of any income, rebate, allowance, or other credit relating to any allowable cost and received by or accruing to the contractor shall be credited to the Government either as a cost reduction or by cash refund."

Pinnacle received a \$235 State unemployment tax refund that was not included in the FY 2006 cost proposal. Because the refund was not deducted from costs, the FY 2006 cost proposal contains unallowable costs of \$235.

#### POTENTIALLY UNALLOWABLE COSTS

#### **Professional and Consulting Services**

The carrier contract, section II, part I, B, states: "The prior written approval of the Contracting Officer shall be required: . . . (2) for the utilization of the services of any consultant under this contract where such reimbursement exceeds or may exceed \$400.00 per day or \$100,000 per year, exclusive of travel costs." In addition, the carrier contract, section I, article

XIV, G, states: "If, with respect to any subcontract entered into under this Article requiring the prior written approval of the Secretary, such required approval is not obtained, the United States shall not be obligated to reimburse the Carrier for any costs incurred, relative to such subcontract, prior to the date of the Secretary's approval unless so stipulated."

Pinnacle reported costs totaling \$95,245 in its FY 2005 and FY 2006 cost proposals for professional and consulting services for which it was unable to provide written approval. Without prior written approval, CMS is not required to reimburse these costs.

#### **Subcontractor Services**

The carrier contract, section I, article XIV, A, states: "The Plan shall not enter into any subcontract with a third party to perform any of the functions set forth in this agreement unless such subcontract received the prior written approval of the Secretary." In addition, the carrier contract, section I, Article XIV, G, states: "If, with respect to any subcontract entered into under this Article requiring the prior written approval of the Secretary, such required approval is not obtained, the United States shall not be obligated to reimburse the Plan for any costs incurred, relative to such subcontract, prior to the date of the Secretary's approval unless so stipulated."

Pinnacle reported costs totaling \$3,196 in its FY 2005 and FY 2006 cost proposals for subcontractor services for which it was unable to provide written approval. Without prior written approval, CMS is not required to reimburse these costs.

#### RECOMMENDATIONS

We recommend that Pinnacle:

- decrease its FY 2005 cost proposal by \$3,644 and its FY 2006 cost proposal by \$751 to reflect the unallowable costs and
- work with the CMS contracting officer to determine the allowability of \$98,441 in costs related to professional and consulting services and subcontractor services costs.

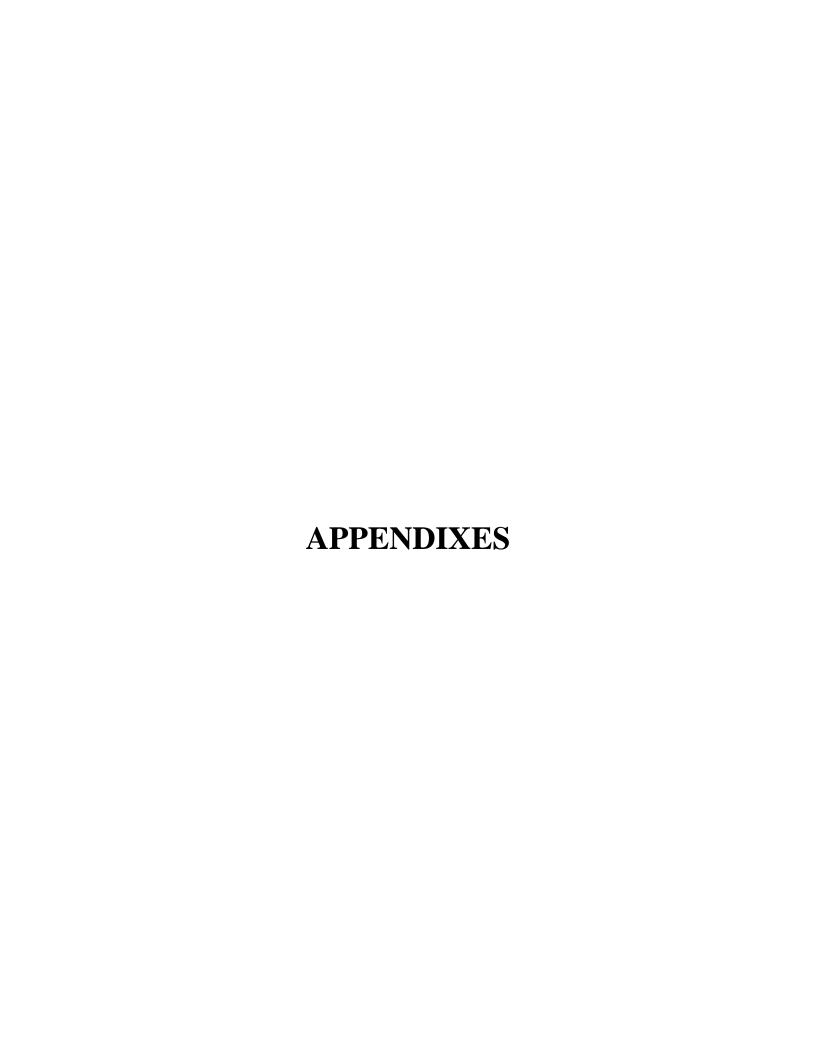
#### PINNACLE COMMMENTS

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Pinnacle's response to our draft report is included as Appendix D. We excluded the attachments to Pinnacle's comments because they contained personally identifiable information.

## OFFICE OF INSPECTOR GENERAL RESPONSE

In addition to it comments, Pinnacle provided additional documentation supporting a portion of the unallowable costs and a portion of the potentially unallowable costs. We adjusted our draft report findings and recommendations based on the additional documentation.



# FINAL ADMINISTRATIVE COST PROPOSALS AND RECOMMENDED DISALLOWANCE, SET-ASIDE, AND ACCEPTANCE AMOUNTS FOR FISCAL YEARS 2005, 2006, AND 2007

| Cost Category                  | FY 2005      | FY 2006      | FY 2007     | Total        |
|--------------------------------|--------------|--------------|-------------|--------------|
|                                |              |              |             |              |
| Salaries/wages                 | \$7,219,281  | \$7,105,409  | \$5,756,649 | \$20,081,339 |
| Fringe benefits                | 2,028,907    | 2,054,480    | 1,601,024   | 5,684,411    |
| Facilities or occupancy        | 519,626      | 468,192      | 549,436     | 1,537,254    |
| Data processing equipment      | 179,043      | 198,006      | 200,644     | 577,693      |
| Subcontracts                   | 738,477      | 687,948      | 474,676     | 1,901,101    |
| Outside professional. services | 231,242      | 128,890      | (578,251)   | (218,119)    |
| Telephone and telegraph        | 126,145      | 156,295      | 184,120     | 466,560      |
| Postage and express            | 427,694      | 398,582      | 223,168     | 1,049,444    |
| Furniture and equipment        | 621,115      | 681,821      | 393,281     | 1,696,217    |
| Materials and supplies         | 120,628      | 86,033       | 74,004      | 280,665      |
| Travel                         | 91,961       | 82,787       | 69,452      | 244,200      |
| Return on investment           | 83,016       | 37,684       | 0           | 120,700      |
| Miscellaneous                  | 67,584       | 64,381       | 740,212     | 872,177      |
| Other                          | (10,277)     | (456)        | 0           | (10,733)     |
| Subtotal                       | 12,444,442   | 12,150,052   | 9,688,415   | 34,282,909   |
| Other adjustments (credits)    | (634,030)    | (544,860)    | (390,923)   | (1,569,813)  |
| Total                          | \$11,810,412 | \$11,605,192 | \$9,297,492 | \$32,713,096 |
| Forward funding                | 0            | 0            | 0           | 0            |
| Total claimed on cost proposal | \$11,810,412 | \$11,605,192 | \$9,297,492 | \$32,713,096 |
| Recommended disallowance*      | 3,644        | 751          | 0           | 4,395        |
| Recommended set aside          | 79,370       | 19,071       | 0           | 98,441       |
| Recommended for acceptance     | \$11,727,398 | \$11,585,370 | \$9,297,492 | \$32,610,260 |

<sup>\*</sup> See Appendix B

# RECOMMENDED COST DISALLOWANCE AND SET-ASIDE AMOUNTS

|                                      | Fiscal Year 2005 |           |
|--------------------------------------|------------------|-----------|
| Disallowance Category                | Disallowance     | Set-Aside |
| Fiscal year 2004 costs               | \$3,160          |           |
| Lobbying costs                       | 484              |           |
| Professional and consulting services |                  | \$77,264  |
| Subcontract services                 |                  | 2,106     |
| Total                                | \$3,644          | \$79,370  |

| Disallowance Category                | Fiscal Year 2006<br>Disallowance | Set-Aside |
|--------------------------------------|----------------------------------|-----------|
| Lobbying costs                       | \$516                            |           |
| State unemployment tax refund        | 235                              |           |
| Professional and consulting services |                                  | \$17,981  |
| Subcontract services                 |                                  | 1,090     |
| Total                                | \$751                            | \$19,071  |

## COMPARISON OF ADMINISTRATIVE COSTS CLAIMED TO BUDGET AUTHORIZATION

#### Fiscal Year 2005

|                                    | riscai i cai 2005 |                      |                        |
|------------------------------------|-------------------|----------------------|------------------------|
|                                    | Budget            | Administrative       | Variance—<br>Favorable |
| Operation                          | Authorization     | <b>Costs Claimed</b> | (Unfavorable)          |
| <b>Program Management (PM)</b>     |                   |                      |                        |
| Bills/claims payment               | \$3,751,115       | \$3,850,666          | (\$99,551)             |
| Appeals/reviews                    | 784,809           | 758,835              | 25,974                 |
| Beneficiary inquiries              | 413,907           | 383,827              | 30,080                 |
| PM provider communications         | 32,192            | 31,763               | 429                    |
| Reimbursement                      | 911,486           | 865,128              | 46,358                 |
| Provider enrollment                | 207,942           | 154,231              | 53,711                 |
| Provider telephone inquiries       | 384,549           | 383,709              | 840                    |
| Credits                            | (592,527)         | (626,532)            | 34,005                 |
| Subtotal                           | 5,893,473         | 5,801,627            | 91,846                 |
| Medicare Integrity Program         |                   |                      |                        |
| (MIP)                              |                   |                      |                        |
| Medical review                     | 1,213,757         | 1,165,888            | 47,869                 |
| MSP <sup>1</sup> prepayment        | 190,714           | 184,000              | 6,714                  |
| Benefits integrity                 | 17,565            | 16,866               | 699                    |
| Local provider education and       |                   |                      |                        |
| training                           | 140,266           | 166,427              | (26,161)               |
| Provider communications            | 384,699           | 381,897              | 2,802                  |
| Audit                              | 2,458,010         | 2,536,047            | (78,037)               |
| MSP postpayment                    | 1,397,097         | 1,350,983            | 46,114                 |
| Subtotal                           | 5,802,108         | 5,802,108            | 0                      |
| MMA <sup>2</sup> regulatory reform | 224,417           | 206,677              | 17,740                 |
| Total                              | \$11,919,998      | \$11,810,412         | \$109,586              |

Note: All amounts taken from Final Administrative Cost Proposal (Supplement No. 9) and Notice of Budget Approval (Supplement No. 10).

 $<sup>^1</sup> MSP-Medicare$  secondary payer  $^2 MMA-Medicare$  Prescription Drug, Improvement, and Modernization Act

# COMPARISON OF ADMINISTRATIVE COSTS CLAIMED TO BUDGET AUTHORIZATION

#### Fiscal Year 2006

|                              |               |                      | Variance—     |
|------------------------------|---------------|----------------------|---------------|
|                              | Budget        | Administrative       | Favorable     |
| Operation                    | Authorization | <b>Costs Claimed</b> | (Unfavorable) |
| Program Management           |               |                      | _             |
| Bills/claims payment         | \$3,997,000   | \$3,932,780          | \$64,220      |
| Appeals/reviews              | 396,000       | 394,408              | 1,592         |
| Beneficiary inquiries        | 259,500       | 277,537              | (18,037)      |
| PM provider communications   | 96,700        | 114,760              | (18,060)      |
| Reimbursement                | 901,000       | 917,938              | (16,938)      |
| Productivity investment      | 9,600         | 0                    | 9,600         |
| Provider enrollment          | 170,200       | 209,964              | (39,764)      |
| Provider telephone inquiries | 641,900       | 543,948              | 97,952        |
| Credits                      | (533,100)     | (530,991)            | (2,109)       |
| Subtotal                     | 5,938,800     | 5,860,344            | 78,456        |
| Medicare Integrity Program   |               |                      |               |
| Medical review               | 1,039,500     | 1,223,195            | (183,695)     |
| MSP prepayment               | 140,200       | 187,568              | (47,368)      |
| Benefits integrity           | 28,600        | 30,813               | (2,213)       |
| Local provider education and |               |                      |               |
| training                     | 210,000       | 264,649              | (54,649)      |
| Provider communications      | 271,700       | 297,456              | (25,756)      |
| Audit                        | 2,566,800     | 2,345,180            | 221,620       |
| MIP productivity investment  | 79,600        | 40,516               | 39,084        |
| MSP postpayment              | 1,330,000     | 1,251,083            | 78,917        |
| Subtotal                     | 5,666,400     | 5,640,460            | 25,940        |
| Nonactivity Summary          |               |                      |               |
| Nonrenewal                   | 0             | 104,388              | (104,388)     |
| Total                        | \$11,605,200  | \$11,605,192         | \$8           |

Note: All amounts taken from Final Administrative Cost Proposal (Supplement No. 03) and Notice of Budget Approval (Supplement No. 16).

# COMPARISON OF ADMINISTRATIVE COSTS CLAIMED TO BUDGET AUTHORIZATION

#### Fiscal Year 2007

|                                     |               |                      | Variance—        |
|-------------------------------------|---------------|----------------------|------------------|
|                                     | Budget        | Administrative       | <b>Favorable</b> |
| Operation                           | Authorization | <b>Costs Claimed</b> | (Unfavorable)    |
| Program Management                  |               |                      |                  |
| Bills/claims payment                | \$3,372,200   | \$3,299,373          | \$72,827         |
| Appeals/reviews                     | 587,900       | 562,046              | 25,854           |
| Beneficiary inquiries               | 60,400        | 36,533               | 23,867           |
| Reimbursement                       | 795,900       | 729,705              | 66,195           |
| Productivity investment             | 16,900        | 0                    | 16,900           |
| Provider enrollment                 | 254,000       | 253,252              | 748              |
| Provider telephone inquiries        | 561,500       | 489,536              | 71,964           |
| Provider outreach and education     | 97,900        | 97,543               | 357              |
| Credits                             | (617,200)     | (373,825)            | (243,375)        |
| Subtotal                            | 5,129,500     | 5,094,163            | 35,337           |
| Medicare Integrity Program          |               |                      |                  |
| Medical review                      | 1,263,000     | 1,171,837            | 91,163           |
| MSP prepayment                      | 198,300       | 140,795              | 57,505           |
| Benefits integrity                  | 25,000        | 17,489               | 7,511            |
| Audit                               | 2,518,000     | 2,410,196            | 107,804          |
| MSP postpayment                     | 172,700       | 137,076              | 35,624           |
| MIP provider outreach and education | 364,300       | 325,936              | 38,364           |
| Subtotal                            | 4,541,300     | 4,203,329            | 337,971          |
| Total _                             | \$9,670,800   | \$9,297,492          | \$373,308        |

Note: All amounts taken from Final Administrative Cost Proposal (Supplement No. 00) and Notice of Budget Approval (Supplement No. 12).





**MEDICARE** 

Part A Intermediary Part B Carrier

March 6, 2009

Report Number: A-06-08-00015

Mr. Gordon L. Sato Regional Inspector General for Audit Services Department of Health & Human Services Office of Inspector General Office of Audit Services 1100 Commerce, Room 632 Dallas, TX 75242 Office of Inspector General Note: Portions of this response are no longer applicable because we reduced the unallowable costs and the potentially unallowable costs based on additional documentation submitted by the auditee.

Dear Mr. Sato,

This letter represents Pinnacle Business Solutions, Inc.'s (PBSI) response to draft Report Number A-06-08-00015 dated February 6, 2009. This report was issued as a result of the Office of Inspector General's (OIG) audit of PBSI's Fiscal Years 2005, 2006, and 2007 final administrative cost proposals (FACP).

Below you will find PBSI's written comments in response to each of the findings included within the draft report. An excel sheet summarizing these findings as well as the status of adjustments has been included as Attachment A for reference. The status of adjustments and actions necessary to remediate agreed upon findings is included in both Attachment A as well as discussions below.

#### **Unallowable Costs:**

- Fiscal Year 2004 Costs: PBSI agrees that FY 2004 costs were recognized on the FY 2005 FACP in the amount of \$3,160. These were allowable costs recognized inaccurately in FY 2005 rather than FY 2004. A settlement agreement has been finalized for the FY 2004 FACP; therefore, an adjustment to increase the FY 2004 expenses is not possible. PBSI will remove these costs in the next FY 2005 FACP submission.
- Fringe Benefit Costs:
  - Lobbying Costs: PBSI agrees that unallowable costs in the total amount of \$1,000 were included in the FY 2005 and FY 2006 FACP's (FY 2005 -\$484 / FY 2006 - \$516). PBSI did not file \$286,628 of its Program

Mr. Gordon L. Sato March 6, 2009 Page 2 of 2

Management costs in FY 2006 (see Attachment B) in order to stay within notice of budget approval (NOBA); therefore, PBSI proposes to offset the FY 2006 finding amount of \$516 by these unfiled costs and remove the FY 2005 amount of \$484 in the next FY 2005 FACP submission.

- Training Costs: PBSI does not agree that \$747 of training cost should be disallowed due to lack of supporting documentation. We have included documentation as Attachment C as support for this expenditure.
- State Unemployment Tax Refund: PBSI agrees that unallowable costs in the amount of \$235 were included in the FY 2006 FACP related to a tax refund that was not applied. PBSI made an adjustment to the FY 2006 FACP supplement #05 dated July 31, 2008 to remove this cost. Therefore, no further adjustment is necessary.

#### **Potentially Unallowable Costs:**

The audit report recommends that PBSI work with the CMS contracting officer to determine the allowability of \$106,031 in set aside costs related to professional and consulting services and subcontractor services costs. Upon initial review of the detailed listing of vendor payments, PBSI has determined that \$9,220 of the expenses identified in the audit report were not included on the 2006 FACP; therefore, the total set aside amount should be adjusted downward by this amount, leaving a balance of \$96,811. PBSI does believe those remaining expenses to be allowable, and we will work with the CMS contracting officer to validate the allowability of those expenses.

We look forward to continuing our work with you to finalize this audit. If you have any questions or comments about our response please feel free to contact me at 501-210-9105.

Sincerely,

Dan Bloodworth Sr. VP & CFO

/db

Attachments

cc: Kathy Markman Janie Fenton

Amy Green