

INTEROFFICE MEMORANDUM

TO: Fulton County Board of Commissioners

FROM: Anthony Micks, County Auditor

DATE: August 21, 2014

RE: GMH 2013 MOU Compliance Report

Outlined below is a summary of the report for the Grady Memorial Hospital FY 2013 Memorandum of Understanding (MOU) Compliance Report. This summary includes background information on the MOU as well as the types of files reviewed and findings.

Background

Grady Memorial Hospital (GMH) is authorized under the direction of the Fulton-DeKalb Hospital Authority via a MOU. This MOU was amended and approved on November 2, 2011, to provide medical services to those Fulton County residents classified as indigent and charity patients or those residents seeking emergency services or Fulton County detainees or inmates or other uninsured Fulton County residents as stipulated in Section 2.1 Eligible Patient of the amended MOU, including those pending Medicaid eligibility determination. GMH is also obligated to deliver medical services in compliance with the standards of care established by the Joint Commission's Hospital Accreditation Standards and the Center for Medicare and Medicaid Services Guidelines.

We have reviewed the Fulton County Indigent Care Analysis Reports received from Grady Memorial Hospital for eligible patients receiving health care services during the year ended December 31, 2013. The following health care statistics were accumulated from the reports:

Patient Types	Total Patients Served	*Adjusted Cost	Payments	ICTF/Grant Funding	Uncompensated Care Cost
Uninsured - Indigent	155,758	\$73,513,758	\$20,968,283	\$28,386,480	\$24,158,995
Uninsured - Charity	35,267	14,068,023	4,618,027	4,425,408	5,024,588
UninsuredEmergency Svcs.	25,772	19,775,223	1,966,083	5,506,020	12,303,120
Uninsured - Other	20,846	4,225,085	671,704	965,952	2,587,429
Medicaid Pending	2,661	14,407,000	5,049,109	3,493,728	5,864,163
Inmates and Detainees	669	1,664,144	9 2	V=	1,664,144
Total	240,973	\$127,653,233	\$33,273,206	\$42,777,588	\$51,602,439

^{*} Adjusted for the Indigent Uninsured Adjustment Factor (MOU).

In collaboration with Cherry, Bekaert & Holland and Banks, Finley, White & Co., we reviewed GMH's updated policies and procedures and, on a limited basis, tested the indigent and charity care eligibility controls and procedures. Two hundred and fifty (250) patient files were selected and reviewed for the year ended December 31, 2013. The files were selected using a statistical model, which is designed to provide a representative sample of the total population of 240,973 patients served. The sample selection model provides a 95% confidence level that the sample is representative of the

population. The purpose of our review was to provide assurance that the uncompensated health care cost was the direct result of services delivered to Fulton County citizens eligible to receive indigent and charitable health care services.

Our review focused on the eligibility of the patients as defined in the MOU. Per the MOU, patients are considered eligible if they meet both the income and residency requirements explained as follows:

The income requirements state that patients fall into two categories. (1) Those patients whose individual or family income is less that 251% of the Federal Poverty Limit Guidelines are eligible to receive services based on a sliding fee scale basis. (2) Those patients whose income falls at or below 126% of the Federal Poverty Limit Guidelines are eligible to receive a 100% discount.

Residency

The residency requirements state that a patient must have been a resident of Fulton or DeKalb County for at least 30 days at the time services were provided. In determining residency, the hospital has implemented several policies and procedures that the staff should follow prior to providing services. These policies are detailed under Grady Health System Operational Policy, Verification of Residency and Grady Health System-Financial Assistance Program/ Financial Eligibility Scale. The policies and procedures regarding verification of residency remain on file in the Internal Audit office.

As a result of our review, we found one exception to GMH eligibility and documentation policies and procedures. The exception is classified as income, residency, or records unavailable for review. The overall results are summarized below:

Income and Residency Exceptions Summary

Patient records with no exceptions	249
Patient records unavailable for review	1
Patient records containing income exceptions only	:=
Patient record containing residency exceptions only	:
Patient records containing residency & income exceptions	-
TOTAL	250

Patient records unavailable for review

One patient file selected for our review was not provided to us.

Patient records containing income eligibility exceptions

All patient financial files tested contained sufficient information to verify income eligibility. There were no findings of patients' income exceeding the income thresholds established in the MOU.

Patient records containing residency exceptions only

There were no incidences in our sample of patients where residency of the patient, as applicable, did not meet the residency requirements established in the MOU and as interpreted by the Authority's legal counsel.

Patient records containing both residency and income exceptions

There were no records containing both residency and income exceptions.

Our procedures were limited to the review of patient charges incurred by eligible patients by the hospital, outpatient pharmacy, and nursing home for patients classified as indigent (K) and charitable (M). The scope of our review did not include evaluating all of the internal controls of the hospital.

Funding Reconciliation

An important step in the review process is the reconciliation of the amount of County funds appropriated to the hospital to the uncompensated cost of providing services to Fulton County residents. This calculation was done to ensure that the amount provided by the County did not exceed the amount of cost incurred by the hospital for the indigent care of Fulton County residents adjusted by the MOU compliance (residential) exceptions. Fulton County's funding contribution was \$50,000,000.00 and GMH's total adjusted uncompensated care cost was \$51,224,918.90. Based on this analysis Fulton Count provided 97.6% of GMH's indigent care cost for 2013. The calculation is presented on page 4 of this report.

Distribution of this report is restricted solely to the Fulton County Georgia Board of Commissioners and the Management of Fulton County.

This report concludes our review of the Grady Memorial Hospital MOU for 2013. If you have any questions or need additional information, please contact me at extension 21019. Thank you.

Cc: Dwight Ferrell, County Manager

Calculation for the Fulton County Indigent Care Analysis Report				
Indigent Patient Care Cost				
Indigent K	\$73,513,758.00			
Charity M	14,068,023.00			
Emergency Services	19,775,223.00			
2014 200 5				
Other Uninsured	4,225,085.00			
AA II I D. II	14 407 000 00			
Medicaid Pending	14,407,000.00			
Inmates and Detainees	1,664,144.00			
Initiates and Detainees	1,004,144.00			
Total Indigent Cost	\$127,653,233.00			
less: Third Party Payments Received	33,273,206.00			
Total Indigent Care Cost	\$94,380,027.00			
less: deduction for non Fulton Residents*	377,520.10			
Total Eligible Indigent Care Cost	\$94,002,506.90			
L Coulty Coulty County Founds	42 777 500 00			
less: Credit for ICTF and Grant Funds	42,777,588.00			
Total Eligible minus PY ICTF				
and Grant Funds	\$51,224,918.90			
	7-77-2010			
less: Amount Disbursed by FC				
for Indigent Patient Care*	50,000,000.00			
Uncompensated Difference	\$1,224,918.90			

^{*} Deduction for non-Fulton Residents is obtained by dividing the audit exceptions by the total number of items sampled. The calculation is as follows:

of Exceptions = 1 Total items sampled = 250 % deduction for non-Fulton Residents = 1/250 = 0.004