GOVERNOR BACON HEALTH CENTER

Examination Report Medicaid Cost Report and Nursing Wage Survey

June 30, 2010

Issued: March 7, 2013





GOVERNOR BACON HEALTH CENTER

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Independent Accountants' Report

State of Delaware
Office of Auditor of Accounts
Department of Health & Social Services
Division of Social Services Medicaid
Dover, Delaware

We have examined management's assertions that Governor Bacon Health Center (the "Facility") has complied with federal requirements (42 CRF 447.253 and 483 Subpart B) and state requirements (Title XIX Delaware Medicaid State Plan, Attachment 4.19D), as applicable, relative to the Facility's fiscal records of the Department of Health and Social Services (DHSS), Division of Social Services, Medicaid Long-Term Care Facilities' Statement of Reimbursement Costs for Skilled and Intermediate Care Nursing Facilities - Title XIX and Nursing Wage Survey ("Statement" and "Survey", respectively) for the fiscal year ended June 30, 2010. The Facility's management is responsible for the assertions. Our responsibility is to express an opinion on the assertions based on our examination.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants and United States Government Accountability Office, *Government Auditing Standards* and, accordingly, included examining, on a test basis, evidence supporting management's assertions and performing such other tests as we considered necessary in the circumstances. We believe that our examination provides a reasonable basis for our opinion.

In our opinion, except for the items listed as adjustments on the accompanying Schedule of Adjustments on pages 5-6, management's assertions referred to above are fairly stated, in all material respects, based on the federal requirements (42 CRF 447.253 and 483 Subpart B) and state requirements (Title XIX Delaware Medicaid State Plan, Attachment 4.19D).

In accordance with *Government Auditing Standards*, we also issued our report dated February 28, 2013, on our consideration of the Facility's internal control over reporting for the Cost Report and Survey and our tests of its compliance with certain provisions of laws, regulations, contracts and grants. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting and compliance. This report is an integral part of an examination performed in accordance with *Government Auditing Standards* and should be read in conjunction with this report in considering the results of our examination.



(Independent Accountants' Report, Continued)

This report is intended solely for the information and use of the Office of Auditor of Accounts of the State of Delaware, the Department of Health and Social Services of the State of Delaware, the Board of Directors and management of the Facility, Office of the Governor, Office of the Controller General, Office of the Attorney General, Office of Management and Budget, Office of the State Treasurer, and the Department of Finance. However, under 29 Del. C., Section 10002, this report is public record and its distribution is not limited.

BDO USA, LLP

February 28, 2013

Schedule of Adjustments to the Statement of Reimbursement Cost for Skilled and Intermediate Care Nursing Facilities - Title XIX and the Nursing Wage Survey

Year ended June 30, 2010

	Description	<u>Page</u>	<u>Line</u>	As Filed Amounts	Ad	djustments Amount	Adjusted Amounts	Adjusted Cost Per Day	Note <u>Ref.</u>
PART I - COS	T REPORT TRIAL BALANCE AND ADJU	STMENTS							
	ient Care Costs (lines 1-5)	_							
Ag	sing Staff Salaries ency costs aff Nurse	2 2	1a 1b	\$ - 3,508,824 3,508,824	-	\$ - - -	\$ - 3,508,824 3,508,824		
Nurs	sing Staff Benefits	2	2	1,442,999		-	1,442,999		
Nurs	sing Training Salaries	2	3	-		-	-		
Oth	er	2	4	-			-		
Sub	total - Primary Patient Care	2	5	4,951,823	-	-	4,951,823	\$ 165.85	
Secondary P	Patient Care Costs (lines 6-14)								
Clin	ical Consultants	2	6	-		-	-		
Soci	al Services	2	7	73,448		-	73,448		
Emp	oloyee Benefits	2	8	25,198		-	25,198		
Raw	Food	2	9	197,279		-	197,279		
Med	lical Supplies	2	10	147,393			147,393		
Pha	rmacy	2	11	177,817		-	177,817		
Oth	er - Allowable Ancillary	2	12	59,386	-	-	59,386		
Sub	total - Secondary Patient Care Costs	2	14	680,521		-	680,521	22.79	
Support Ser	vice Costs (lines 15-22)								
Diet	ary	2	15	592,502		-	592,502		
Ope	ration and Maintenance of Facility	2	16	1,477,823		-	1,477,823		
Hou	sekeeping	2	17	334,332		-	334,332		
Lauı	ndry & Linen	2	18	436,250		-	436,250		
Pati	ent Recreation	2	19	99,395		-	99,395		
Emp	oloyee Benefits	2	20	291,903		-	291,903		
Oth	er	2	21		-	-			
Sub	total - Support Service Costs	2	22	3,232,205		-	3,232,205	108.26	

Schedule of Adjustments to the Statement of Reimbursement Cost for Skilled and Intermediate Care Nursing Facilities - Title XIX and the Nursing Wage Survey, continued

Year ended June 30, 2010

			As Filed	Adjustments	Adjusted	Adjusted Cost Note
<u>Description</u>	<u>Page</u>	<u>Line</u>	<u>Amounts</u>	No. Amount	<u>Amounts</u>	Per Day Ref.
Administrative & Routine Costs (line	es 23-32)					
Owner/Executive Director Sal	lary 2	23	65,793	-	65,793	
Medical and Nursing Director	Salary 2	24	77,436	-	77,436	
Other Administrative Salaries	2	25	366,467	-	366,467	
Employee Benefits	2	26	244,390	-	244,390	
Medical Records	2	27	33,556	-	33,556	
Training	2	28	5,914	-	5,914	
Interest - Working Capital	2	29		-	-	
Home Office - Admin	3	30	571,221	-	571,221	
Other	3	31	235,888		235,888	
Subtotal - Administrative & F	Routine 3	32	1,600,665	-	1,600,665	53,61
Capital Costs (lines 33-39)						
Lease Costs	3	33	-	-	-	
Interest - Mortgage	3	34	226	-	226	
Property Taxes	3	36	-	-	-	
Depreciation	3	36	207,873	-	207,873	
Home Office Capital	3	37	-	-	-	
Other	3	38	994		994	
Subtotal - Capital	3	39	209,093		209,093	7.00
SUBTOTAL	3	40	10,674,307	-	10,674,307	357.51

Schedule of Adjustments to the Statement of Reimbursement Cost for Skilled and Intermediate Care Nursing Facilities - Title XIX and the Nursing Wage Survey, continued

Year ended June 30, 2010

	Description	Domo	l dan a	As Filed		justments	Adjusted	Adjusted Cost	Note
	<u>Description</u>	<u>Page</u>	<u>Line</u>	<u>Amounts</u>	<u>No.</u>	<u>Amount</u>	<u>Amounts</u>	<u>Per Day</u>	<u>Ref.</u>
Ancill	ary Costs - (lines 41-49)								
	Laboratory	3	41	-		-	-		
	X-Rays	3	42	-		-	-		
	Physical Therapy	3	43	144,842		-	144,842		
	Occupational Therapy	3	44	179		-	179		
	Speech Therapy	3	45	634		-	634		
	Pharmacy (Rx)	3	46	-		-	-		
	Oxygen	3	47	-		-	-		
	Other	3	48	279,203	_		279,203		
	Subtotal - Ancillary	3	49	424,858		-	424,858	14.23	
Other	Costs - (lines 50-52)								
	Gift, Beauty Shop, etc.	3	50	-		-	-		
	Util. Review	3	51		_	<u>-</u>			
	Subtotal	3	52		_				
	TOTAL COSTS	3	53	\$ 11,099,165	_	\$ -	\$ 11,099,165	\$ 371.74	
PART	II - COST REPORT PATIENT DAYS								
	Total beds	6	1, 3	85		-	85		
	Total bed days available Medicaid Patient Days	6 6	4 5A	31,025 25,869		- (21)	31,025 25,848		K-1
	90% minimum census threshold	6	JA	25,869 27,923		(21)	25,848 27,923		IV- I
	Total census days	6	5E	29,857		-	29,857		

Schedule of Adjustments to the Statement of Reimbursement Cost for Skilled and Intermediate Care Nursing Facilities - Title XIX and the Nursing Wage Survey, continued

Year ended June 30, 2010

	<u>Description</u>	<u>Page</u>	<u>Line</u>	As Filed <u>Amounts</u>	Adju	ustments Amount	Adjusted <u>Amounts</u>	Note <u>Ref.</u>
PART II	I - NURSING WAGE SURVEY							
I. Adm	inistrative Nurse Information							
	RN's - Total Payroll RN's - Total Hours	9 9	A A	18,244 590		274 7	18,518 597	NWS-1 NWS-1
II. Staj	II. Staff Nurse Information							
	RN's - Total Payroll	9	В	30,112		1,639	31,751	NWS-1
	CNA's - Total Payroll	9	В	49,850		220	50,070	NWS-1

PART IV - DETAILED EXPLANATION OF ADJUSTMENTS

K-1 Medicaid patient days as listed on the cost report did not agree to supporting documentation. They were overstated by twenty-one days.

NWS-1 To adjust Nursing Wage Survey to supporting documentation. Administrative Nurse RN's Total Payroll and Total Hours excluded overtime hours and wages for one Administrative RN. Staff Nurse RN's Total Payroll excluded one nurses that should have been included. Staff Nurse CNA's Total Payroll did not match supporting documentation, it was understated by \$220.



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Independent Accountants' Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Examination of Financial Statements Performed in Accordance With *Government Auditing Standards*

State of Delaware
Office of Auditor of Accounts
Department of Health & Social Services
Division of Social Services Medicaid
Dover, Delaware

We have examined management's assertions that Governor Bacon Health Center (the "Facility") has complied with federal requirements (42 CRF 447.253 and 483 Subpart B) and state requirements (Title XIX Delaware Medicaid State Plan, Attachment 4.19D), as applicable, relative to the Facility's fiscal records of the Department of Health and Social Services (DHSS), Division of Social Services, Medicaid Long-Term Care Facilities' Statement of Reimbursement Costs for Skilled and Intermediate Care Nursing Facilities - Title XIX and Nursing Wage Survey ("Statement" and "Survey", respectively) for the fiscal year ended June 30, 2010, and have issued our report thereon dated February 28, 2013, which was qualified due to the required adjustments reported in the Schedule of Adjustments accompanying it. We conducted our examination in accordance with attestation standards established by the American Institute of Certified Public Accountants and the standards applicable to financial examinations contained in *Government Auditing Standards*, issued by the Comptroller General of the United States of America.

Internal Control Over Reporting

Management of the Facility is responsible for establishing and maintaining effective internal control over financial reporting. In planning and performing our examination, we considered the Facility's internal control over financial reporting in order to determine our examination procedures for the purpose of expressing our opinions on managements' assertions, but not for the purposes of expressing an opinion on the effectiveness of the Facility's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Facility's internal control over financial reporting.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies in internal control, such that there is a reasonable possibility that a material misstatement of the Cost Report and/or Survey will not be prevented, or detected and corrected on a timely basis.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.



Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Facility's Cost Report and Survey are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of reported amounts. However, providing an opinion on compliance with those provisions was not an objective of our examination, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

We noted certain matters that we reported to management of the Facility in a separate letter dated February 28, 2013.

This report is intended solely for the information and use of the Office of Auditor of Accounts of the State of Delaware, the Department of Health and Social Services of the State of Delaware, the Board of Directors and management of the Facility, Office of the Governor, Office of the Controller General, Office of the Attorney General, Office of Management and Budget, Office of the State Treasurer, and the Department of Finance. However, under 29 Del. C., Section 10002, this report is public record and its distribution is not limited.

BDO USA, LLP

February 28, 2013

GOVERNOR BACON HEALTH CENTER

Schedule of Findings and Responses

June 30, 2010

CURRENT YEAR CONDITIONS

NONE