

**REPORT
ON THE
HOME OFFICE AUDIT**

**ALLEN-COX FAMILY HOUSE
FRESNO, CALIFORNIA**

**FISCAL PERIOD ENDED
DECEMBER 31, 2011**

**Audits Section—Fresno
Financial Audits Branch
Audits and Investigations
Department of Health Care Services**

**Section Chief: Michael Harrold
Audit Supervisor: Kristina Nacino
Auditor: Kathleen Nuzzolese**



TOBY DOUGLAS
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

June 13, 2013

Laura Harris, Owner
Allen-Cox Family House
2019 E. Oakhaven
Fresno, CA 93730

ALLEN-COX FAMILY HOUSE
FISCAL PERIOD ENDED DECEMBER 31, 2011

We have examined the Medi-Cal Home Office Cost Report for the fiscal period ended December 31, 2011. Our examination was made under the authority of Section 14170 of the Welfare and Institutions Code and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the data presented in the Comparison of Reported and Audited Home Office Cost represents a proper determination of home office allowable costs for the above fiscal period in accordance with Medi-Cal reimbursement principles. The audited home office cost will be incorporated, by separate adjustment, into each applicable facility audit report.

This audit report includes the:

1. Comparison of Reported and Audited Home Office Cost and supporting schedules
2. Audit Adjustments Schedule

If you disagree with the decision of the Department, the results of the home office audit may only be appealed through each individual facility's audit report. Please refer to the appeal instructions in each facility's audit report.

Laura Harris
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If you have questions regarding this report, you may call the Audits Section—Fresno at (559) 446-2458.

Original Signed By

Michael A. Harrold, Chief
Audits Section—Fresno
Financial Audits Branch

Certified

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COMPARISON OF REPORTED AND AUDITED
HOME OFFICE COST

HOME OFFICE:
ALLEN-COX FAMILY HOUSE

FISCAL PERIOD ENDED:
DECEMBER 31, 2011

CHAIN COMPONENTS 1	NPI NUMBER 2	FISCAL YEAR END 3	REPORTED COST 4	AUDITED COST 5	VARIANCE 6
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(From Sch 2, Col 6) (Col 5 - Col 4)

1. Oakhaven	1740429455	12/31/11	\$64,447	\$4,329	(\$60,118)
2. Carnegie	1295964369	12/31/11	0	0	0
3. Wheeler	1922237098	12/31/11	70,174	4,713	(65,461)
4. Brix	1104055458	12/31/11	65,960	4,430	(61,530)
5.				0	0
6.				0	0
7.				0	0
8.				0	0
9.				0	0
10.				0	0
11.				0	0
12.				0	0
13.				0	0
14.				0	0
15.				0	0
16.				0	0
17.				0	0
18.				0	0
19.				0	0
20.				0	0
21.				0	0
22.				0	0
23.				0	0
24.				0	0
25.				0	0

TOTALS

\$200,581	\$13,472	(\$187,109)
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SUMMARY OF DIRECT AND ALLOCATED POOL COST

HOME OFFICE:
ALLEN-COX FAMILY HOUSEFISCAL PERIOD ENDED:
DECEMBER 31, 2011

CHAIN COMPONENTS 1	NPI NUMBER 2	FISCAL YEAR END 3	DIRECT EXPENSES 4	POOLED EXPENSES 5	TOTAL DIRECT & POOLED FACILITY EXPENSE 6
			(From Sch 4)	(From Sch 3)	(Col 4 + Col 5)
1. Oakhaven	1740429455	12/31/11	\$0	\$4,329	\$4,329
2. Carnegie	1295964369	12/31/11	0	0	0
3. Wheeler	1922237098	12/31/11	0	4,713	4,713
4. Brix	1104055458	12/31/11	0	4,430	4,430
5.			0	0	0
6.			0	0	0
7.			0	0	0
8.			0	0	0
9.			0	0	0
10.			0	0	0
11.			0	0	0
12.			0	0	0
13.			0	0	0
14.			0	0	0
15.			0	0	0
16.			0	0	0
17.			0	0	0
18.			0	0	0
19.			0	0	0
20.			0	0	0
21.			0	0	0
22.			0	0	0
23.			0	0	0
24.			0	0	0
25.			0	0	0
TOTALS			\$0	\$13,472	\$13,472

(To Sch 1)

ALLOCATION OF POOLED EXPENSES

HOME OFFICE:
ALLEN-COX FAMILY HOUSE

FISCAL PERIOD ENDED:
DECEMBER 31, 2011

PART I - ALLOCATION BETWEEN PROVIDER AND NONPROVIDER COMPONENTS

FACILITY	Allocation Statistics Base: Accumulated Cost 986,362	Percent 2	Allocation Pool Expenses 3
Program Services (Adj 5)	\$986,362	98.5343%	\$13,472
Nonprogram Services (Adj 5)	14,672	1.4657%	200
TOTAL	\$1,001,034	100.0000%	\$13,672

(From Sch 5)

PART II - ALLOCATION TO INDIVIDUAL CHAIN COMPONENTS

CHAIN COMPONENTS	NPI NUMBER	Audit Adjustment	Allocation Statistic: (Client Days)	Allocated Pool Expense (Col 2 X UCM)
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1. Oakhaven	1740429455		2,003	\$4,329
2. Carniege	1295964369		0	0
3. Wheeler	1922237098		2,181	4,713
4. Brix	1104055458		2,050	4,430
5.				0
6.				0
7.				0
8.				0
9.				0
10.				0
11.				0
12.				0
13.				0
14.				0
15.				0
16.				0
17.				0
18.				0
19.				0
20.				0
21.				0
22.				0
23.				0
24.				0
25.				0

TOTALS

6,234 \$13,472

(To Sch 2)

UNIT COST MULTIPLIER (UCM) (Pooled Expenses/Client Days)	2.160990
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DIRECT ALLOCATION OF EXPENSES TO CHAIN COMPONENTS

HOME OFFICE:
ALLEN-COX FAMILY HOUSE

FISCAL PERIOD ENDED:
DECEMBER 31, 2011

CHAIN COMPONENTS 1	NPI NUMBER	REPORTED TOTAL (Col F) 2	Expense Directly Allocable to Chain Component				AUDITED TOTAL 7
			specify expense 3 (Adj)	specify expense 4 (Adj)	specify expense 5 (Adj)	specify expense 6 (Adj)	
1. Oakhaven	1740429455	\$0	\$0	\$0	\$0	\$0	\$0
2. Carnegie	1295964369	0	0	0	0	0	0
3. Wheeler	1922237098	0	0	0	0	0	0
4. Brix	1104055458	0	0	0	0	0	0
5.		0	0	0	0	0	0
6.		0	0	0	0	0	0
7.		0	0	0	0	0	0
8.		0	0	0	0	0	0
9.		0	0	0	0	0	0
10.		0	0	0	0	0	0
11.		0	0	0	0	0	0
12.		0	0	0	0	0	0
13.		0	0	0	0	0	0
14.		0	0	0	0	0	0
15.		0	0	0	0	0	0
16.		0	0	0	0	0	0
17.		0	0	0	0	0	0
18.		0	0	0	0	0	0
19.		0	0	0	0	0	0
20.		0	0	0	0	0	0
21.		0	0	0	0	0	0
22.		0	0	0	0	0	0
23.		0	0	0	0	0	0
24.		0	0	0	0	0	0
25.		0	0	0	0	0	0
TOTALS		\$0	\$0	\$0	\$0	\$0	\$0

(To Sch 2)

STATEMENT OF REIMBURSABLE COSTS

HOME OFFICE:
ALLEN-COX FAMILY HOUSEFISCAL PERIOD ENDED:
DECEMBER 31, 2011

ACCOUNT DESCRIPTION 1	REPORTED COSTS 2	COST AUDIT ADJUSTMENTS 3	AUDITED COSTS 4	DIRECT COST 5	AUDITED POOLED COSTS 6
		(Adj 1-4)	(Col 2 + Col 3)	(Adj)	(Col 4 - Col 5)
1. Salaries-Officers	\$78,888	(\$78,888)	\$0		\$0
2. Salaries-Other	86,192	(86,192)	0		0
3. Payroll Taxes			0		0
4. Employee Benefits	240		240		240
5. Travel			0		0
6. Entertainment			0		0
7. Automobile	7,257	(7,257)	0		0
8. Depreciation-Building			0		0
9. Depreciation-Equipment			0		0
10. Other Depreciation and Amortization			0		0
11. Leases and Rentals			0		0
12. Interest-Mortgages			0		0
13. Interest-Other			0		0
14. Taxes and Licenses	52		52		52
15. Legal and Accounting	180		180		180
16. Insurance	1,847		1,847		1,847
17. Telephone	1,964		1,964		1,964
18. Utilities	2,608	(923)	1,685		1,685
19. Office Supplies	397		397		397
20. Nonprogram			0		0
21. Other-(Client Supplies)	556		556		556
22. Other General & Administrative			0		0
23. Bank Charges	4,428		4,428		4,428
24. Business Meals	130		130		130
25. Equipment Rental			0		0
26. Rent	12,900	(12,900)	0		0
27. Continuing Education			0		0
28. Consultants	320		320		320
29. Home Operations	2,359	(750)	1,609		1,609
30. Dues & Subscriptions			0		0
31. Employee Physicals			0		0
32. Groceries	264		264		264
33.			0		0
34.			0		0
TOTAL EXPENSES	\$200,582	(\$186,910)	\$13,672	\$0	\$13,672
				(To Sch 4)	(To Sch 3)

Provider Name							Fiscal Period	Provider NPI	Adjustments	
ALLEN-COX FAMILY HOUSE							JANUARY 1, 2011 THROUGH DECEMBER 31, 2011	N/A	5	
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
Cost Report			Audit Report							
Adj. No.	Page or Exhibit	Line	Col.	Sch.	Line	Col				
<u>ADJUSTMENTS TO REPORTED COSTS</u>										
1	2	18	6	5	18	3	Utilities	\$2,608	(\$923)	\$1,685
	2	29	6	5	29	3	Home Operations To reconcile the reported expenses to agree with the provider records. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300 and 2304	2,359	(750)	1,609
2	2	1	6	5	1	3	Salaries - Officers	\$78,888	(\$78,888)	\$0
	2	2	6	5	2	3	Salaries - Others To eliminate salaries expense due to insufficient documentation. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300 and 2304	86,192	(86,192)	0
3	2	7	6	5	7	3	Automobile To eliminate automobile expense due to lack of documentation. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300 and 2304	\$7,257	(\$7,257)	\$0
4	2	26	6	5	26	3	Rent To eliminate rent expense belonging to the Wheeler and Carnegie facilities. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300 and 2304	\$12,900	(\$12,900)	\$0

Provider Name							Fiscal Period	Provider NPI		Adjustments
ALLEN-COX FAMILY HOUSE							JANUARY 1, 2011 THROUGH DECEMBER 31, 2011	N/A		5
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
Cost Report			Audit Report							
Adj. No.	Page or Exhibit	Line	Col.	Sch.	Line	Col				
<u>ADJUSTMENT TO REPORTED STATISTICS</u>										
5	5	1	1	3	N/A	1	Program Services (Accumulated Costs)	0	986,362	986,362
	5	2	1	3	N/A	1	Nonprogram Services	0	14,672	14,672
							To include accumulated cost statistics to agree with the provider's records for proper cost determination.			
							42 CFR 413.20, 413.24 and 413.50			
							CMS Pub. 15-1, Sections 2150.3, 2300, 2304 and 2306			