

DHH - CF - 1  
Revised:2-08

AGREEMENT BETWEEN STATE OF LOUISIANA  
DEPARTMENT OF HEALTH AND HOSPITALS

CFMS: 681388  
DHH: 054142  
Agency # 305

Office of Management and Finance

Medical Vendor Administration

AND

Cypress Audit Team, LLC

FOR

Personal Services  Professional Services  Consulting Services  Social Services

1) Contractor (Legal Name if Corporation) Cypress Audit Team, LLC			5) Federal Employer Tax ID# or Social Security # 37157359900 (Must be 11 Digits)	
2) Street Address 5814 Valley Forge			6) Parish(es) Served ST	
City Baton Rouge	State LA	Zip Code 70808	7) License or Certification #	
3) Telephone Number (225) 603-2115			8) Contractor Status	
4) Mailing Address (if different)			Subrecipient: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
			Corporation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
			For Profit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
			Publicly Traded: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City	State	Zip Code	8a) CFDA#(Federal Grant #)	

9) Brief Description Of Services To Be Provided:

The contractor is to make routine and special audits of records of hospitals, Federally Qualified Health Centers, Rural Health Clinics, and community mental health and substance abuse clinics, for filed cost reports for facilities which provide services under Title XIX of the Social Security Act; and as is necessary to insure that such facilities are being reimbursed in accordance with the provisions of the Act and rules and regulations promulgated pursuant thereto.

After performing any such audit or study (regular or special), the contractor shall report its findings or results to the Department.

10) Effective Date 07-01-2009	11) Termination Date 06-30-2012
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12) This contract may be terminated by either party upon giving thirty (30) days advance written notice to the other party with or without cause but in no case shall continue beyond the specified term.

13) Maximum Contract Amount

14) Terms of Payment

Contractor obligated to submit final invoices to Agency within fifteen (15) days after termination of contract.

1) Invoices are to be submitted in accordance with the provisions of Attachment D, Description of Work/Reports and Attachment E, Terms of Payment. Payments will be made in accordance with the provisions of Attachment E, Terms of Payment.

2) Travel and other reimbursable expenses shall constitute part of the total maximum payable under the contract.

PAYMENT WILL BE MADE ONLY UPON APPROVAL OF:	First Name Darla	Last Name Ratcliff
	Title Section Chief - Program Operations	Phone Number (225) 342-2339

15) Special or Additional Provisions which are incorporated herein, if any (IF NECESSARY, ATTACH SEPARATE SHEET AND REFERENCE)

**Attachment B**  
**Statement of Work**  
**Cypress Audit Team, LLC**

**Goal/Purpose**

To provide professional services in the performance of test work, development of Medicaid cost reports, analysis and audit of records of hospitals, Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), community mental health and substance abuse clinics, and other Medicaid providers as required by the federal regulations for filed cost reports for services provided under Title XIX of the Social Security Act. The purpose of the contractor's work under this agreement is to assure that such facilities are being reimbursed in accordance with the provisions of the Act and rules and regulations promulgated pursuant thereto.

**Outcome #1**

The contractor shall perform desk reviews of provider cost reports and submit recommendations to the Department for partial preliminary payments or contingent receivables. Contractor shall perform this work within 90 days of receipt of cost reports and in accordance with Department guidelines.

**Performance Indicators**

The contractor submits written recommendation for partial preliminary payment or contingent receivable within 90 days of receipt of cost report.

The written recommendation contains information and documentation to support the recommendation.

**Monitoring Plan**

The contract monitor shall reconcile the contractor's monthly report to insure recommendations have been received within 90 days of receipt of cost report.

The contract monitor shall review through staff sign-off that written recommendations contain appropriate documentation to support the recommendation.

**Outcome #2**

The contractor shall perform and forward to the department final audits or amended final Title XIX audits within 90 days of receipt of Medicare (Title XVIII) final or final amended audits.

**Performance Indicators**

The contractor submits final audits or amended final Title XIX audits within 90 days of receipt of Medicare (Title XVIII) final or final amended audits.

The written recommendation contains information and documentation to support the recommendation.

**Monitoring Plan**

The contract monitor shall reconcile the contractor's monthly report to insure final audit reports and amended final audit reports have been received within 90 days of receipt of Medicare (Title XVIII) final or amended final audits.

**Performance Indicators**

The contractor provides special and non-routine audits and/or studies as directed by the Department.

The contractor provides said information within the timeframes specified by the department.

The information provided by the contractor meets the criteria established by the Department for Title XIX reimbursement, including disproportionate share payments and uncompensated care costs calculations.

**Monitoring Plan**

The contract monitor shall verify issuance by the Department to the contractor of the requirement for a special or non-routine audit or study.

The contract monitor shall verify receipt from the contractor of the special or non-routine audit or study, inclusive of date of receipt.

The contract monitor shall verify date of receipt is within timeframe established by the Department.

The contract monitor shall verify through staff sign-off that the information presented by the contractor in the special or non-routine audit or study meets criteria established by the Department.

## ATTACHMENT C

### SCOPE OF WORK:

1. The Contractor shall have responsibility for:
  - 1.1. forwarding recommendations for partial preliminary payments or contingent receivables within 90 days of receipt of cost reports in accordance with Department guidelines,
  - 1.2. performing and forwarding of desk review of provider cost reports as specially requested by the Department to determine their acceptability,
  - 1.3. performing and forwarding final audits or amended final Title XIX final audits within 90 days of receipt of Medicare (Title XVIII) final amended audits,
  - 1.4. performing any special non-routine audits or studies relating to cost reports, and disproportionate share payments/qualifications as necessary to calculation of Title XIX reimbursement including disproportionate share payments and uncompensated care costs calculations, as requested by the Department and agreed to by the Contractor. Agreement by the Contractor is not to be unreasonably withheld for such tasks requested by the Department,
  - 1.5. providing to the Department a copy of the audit matrix which determines the scope of each review under Title XVIII and arrange for appropriate consultation between the Department and the Contractor to assist the Contractor in arriving at a decision regarding the need for or scope of any audit. The Contractor shall assist the Department in developing audit requirements specific to Title XIX reimbursement as needed. Unless otherwise agreed to by Department and Contractor, any audit-scope determination made by the Contractor for Title XVIII, shall be deemed acceptable for Title XIX,
  - 1.6. performing interim rate adjustments as requested by the Department or as permitted under Title XVIII. Rate adjustments shall be forwarded after each final settlement if change is greater than 10% from previous rate. Interim per diem adjustments, if performed, will be based upon interim cost reports submitted by the hospital(s) for Title XVIII/XIX purposes with the Contractor performing desk reviews of such cost reports. Requests for interim adjustments must be routed to the Department for authorization.
2. The Contractor, after performing any audit or study (routine or special) shall report to the Department its findings or results in writing. The Contractor shall take no subsequent action with regard to any of its findings or results obtained from performing its duties under this Agreement without authorization/instruction from the Department.
3. The provisions of the Agreement shall be applicable in connection with the desk review and field and medical audits of those providers which are located in Louisiana and which receive reimbursement under Title XIX, and any other such provider under the Title XIX program that the Department and Contractor may hereafter agree by addendum to this Agreement to be subject to the provisions hereof.