

# OFFICE OF THE CONTROLLER

Mark Pinsley, MBA Nanton John, CFE COUNTY CONTROLLER

**DEPUTY CONTROLLER** 

TO: Final Report Distribution

FROM: Mark Pinsley, County Controller

DATE: March 13, 2025

RE: Compliance Audit – Contract for Professional Services (PrimeCare Medical, Inc.)

We have completed a compliance audit of the Lehigh County Department of Corrections' Contract for Professional Services with PrimeCare Medical, Inc. for the period August 1, 2022 thru July 31, 2024. Lehigh County uses PrimeCare Medical, Inc. to provide comprehensive Medical, Dental, Medication Assisted Treatment (MAT), Mental Health and related services to the inmate/patient population in the custody and control of the Department of Corrections. Our audit report #25-07 is attached.

We thank the Lehigh County Department of Corrections and Prime Care Medical, Inc. for their cooperation during the audit.

#### The results of our audit are:

- A significant portion of the \$1,576,275 total medical service claims, during the contract year 8/1/23 through 7/31/24, have not been thoroughly reviewed by the Department of Corrections for accuracy and authenticity.
- Four contract accounts payable/billing discrepancies were found totaling \$46,884.59.

Attachment

# COUNTY OF LEHIGH, PENNSYLVANIA INDEPENDENT AUDITOR'S REPORT

Compliance Audit – Contract for Professional Services (PrimeCare Medical, Inc.) For the period August 1, 2022 thru July 31, 2024

# Table of Contents

	<u>Page</u>
Background and Financial Information	1-2
OPINION OF MARK PINSLEY, LEHIGH COUNTY CONTROLLER	3-5
Schedule of Audit Findings and Recommendations	6-7
Department of Corrections – Director of Correction's Response	8-9
PrimeCare Medical, Inc. – Chief Executive Officer's Response	10-12

### Background

PrimeCare Medical, Inc. is a private correctional health care company that has been in existence since 1986. Lehigh County has been using PrimeCare Medical, Inc. to provide comprehensive Medical, Dental, Mental Health and related services to the inmate/patient population in the custody and control of the Department of Corrections since 2004. As a result of regulatory and public oversight relating to mental health concerns, on June 22, 2023, the County of Lehigh and PrimeCare Medical, Inc. entered into a new agreement, beginning August 1, 2023 and ending July 31, 2025, to implement a "Medication Assisted Treatment program" in addition to their existing comprehensive Medical, Dental, and Mental Health services for inmates/residents in custody and control of the Department of Corrections. As a result, main features of the new agreement are noted below:

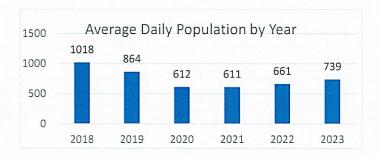
- 1) Added Medication Assisted Treatment (MAT) services (I.e., Program). The provider will be responsible for the implementation of a MAT Program at Facility.
- 2) Provider will add a MAT Coordinator, a MAT D&A Counselor, and additional hours of a MAT Nurse.
- 3) Modified that provider shall be responsible for the costs of all medications, subject catastrophic limits.
- 4) Modified that the provider liability for cost associated with hospitalization from \$25,000 per year, per inmate to the first \$1,000,000 per contract year for all medical services (I.e., Catastrophic Limits).
- 5) Shortened contract term from five to two years ending 7/31/2025, with an additional year conditioned upon the written agreement of both the County and Provider.
- 6) Contract Compensation costs and billing practices were revised. See table below.

#### Contract Comparison (For illustrative purposes only)

Contract Year	Current Staffing	MAT Staff	Mental Health Staff	Operational Cost	Annual Approved Contract Price	Monthly
08/1/22- 07/31/23 *					\$5,376,035.18	\$448,002.93
8/1/23-7/31/2024	\$4,110,858.85	\$482,351.97	\$342,288.42	\$2,404,265.83	\$7,339,765.08	\$611,647.09
8/1/24-7/31/2025	\$4,234,184.62	\$496,822.53	\$352,557.07	\$2,476,393.81	\$7,559,958.03	\$629,996.50
8/1/25-7/31/26**	\$4,361,210.16	\$511,727.20	\$363,133.78	\$2,550,685.62	\$7,786,756.77	\$648,896.40

<sup>\*</sup> Extended the original 8/1/18 contract for the first time for an additional one-year period.

#### **Inmate Population**



Source: Criminal Justice Advisory Board Data Committee Report Year End 2023

<sup>\*\*</sup> The renewal for contract year 3 shall be conditioned upon approval of the renewal by the Board of Commissioners via motion.

## Financial Information

# General Ledger Allocation of Contract Expenses (Contract Period 8/1/23 thru 7/31/24), as of 9/19/24

Medical Services - Office of the Jail	\$ 5,478,460.96
Medical Services - Community Correction Services	716,663.76
Medical Services – Opioid Settlement Fund	320,000.00
MAT Services – PCCD Grant	482,352.00
MAT Medications – Opioid Settlement Fund	98,828.13
Mental Health Services – Office of the Jail	181,814.83
Mental Health Services – Community Correction Services	22,471.50
Catastrophic – General Insurance (Catastrophic Medical)	130,157.83
Catastrophic – Opioid Settlement Fund	230,329.10
Catastrophic – American Rescue Plan	143,678.10
Total	<u>7,804,756.21</u>

### Summary by Services (Contract Period 8/1/23 thru 7/31/24), as of 9/19/24

Contract Services	(	Contract Compensation 2023-2024	Amount Paid 2023-2024	Amounts Paid 2022-2023
Medical Services (Current				
Staffing & Operational Cost)	\$	6,515,124.72	\$ 6,515,124.72	\$ 5,376,035.18
MAT Staff	\$	482,352.00	\$ 482,352.00	\$
Mental Health Staff	\$	342,288.42	\$ 204,286.33 (3)	
MAT Medications	\$		\$ 98,828.13	
Catastrophic	\$		\$ 504,165.03 (1)	\$ 15,715.47 (2)
Total Amount	\$	7,339,765.14	\$ 7,804,756.21	\$ 5,391,750.65

- (1) Excess amount over \$1 million aggregate cap per year for certain designated medical services.
- (2) Excess amount over \$25,000 aggregate cap per year, per inmate.
- (3) Contract price discounted due to unavailable of staff.

# Summary of Catastrophic Medical Services (Contract Period 8/1/23 thru 7/31/24), as of 10/14/24

Catastrophic Medical Service	A	Amount Billed		
Pharmacy	\$	742,048.92		
Medical Claims (2,050 claims)	\$	714,734.23		
Xray	\$	49,531.00		
Laboratory	\$	46,879.39		
Eye Care	\$	23,082.75		
Total Amount *	S	1,576,276.29		

<sup>\*</sup> Due to medical services performed during the contract period, but not billed to the County and paid for, additional costs may be realized (I.e., As of 11/24/24, total billed and paid as of 12/5/24 totaled \$1,585,406.85).



# OFFICE OF THE CONTROLLER

Mark Pinsley, MBA Nanton John, CFE COUNTY CONTROLLER

DEPUTY CONTROLLER

### INDEPENDENT AUDITOR'S REPORT

Janine Donate, Director of Corrections Department of Correction 38 North Fourth Street Allentown, PA 18102

Thomas J. Weber, Chief Executive Officer PrimeCare Medical, Inc. 3940 Locust Lane Harrisburg, PA 17109

#### Report on Compliance

#### **Opinion**

We have audited the Department of Corrections' contract for professional services with PrimeCare Medical, Inc., approved via Resolutions 2022-38 and 2023-26, for compliance with the billing transactions related to the provision of comprehensive healthcare services to the inmate population, for the period August 1, 2022 thru July 31, 2024.

In our opinion, the Department of Corrections complied, in all material respects, with the compliance requirements referred to above that are applicable to the contract for professional services for the period August 1, 2022 thru July 31, 2024.

### **Basis for Opinion**

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Department of Corrections and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion. Our audit does not provide a legal determination of the Department of Corrections' compliance with the applicable compliance requirements.

#### Responsibilities of Management for Compliance

Management of Department of Corrections is responsible for compliance with the requirements referred to above, and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the Department of Corrections.

#### Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the applicable compliance requirements occurred, whether due to fraud or error, and to express an opinion on the entity's compliance with the applicable compliance requirements based on the compliance audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the applicable compliance requirements is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Department of Corrections' compliance with the requirements of the provisions of the contract for professional services.

In performing an audit in accordance with GAAS and Government Auditing Standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the entity's compliance with applicable compliance requirements and performing such other procedures as the auditor considered necessary in the circumstances.
- Obtain an understanding of Department of Corrections' internal control over compliance relevant to
  the audit in order to design audit procedures that are appropriate in the circumstances and to test and
  report on internal control over compliance in accordance with the provisions of the contract for
  professional services with PrimeCare Medical, Inc., but not for the purpose of expressing an opinion
  on the effectiveness of Department of Corrections' internal control over compliance. Accordingly,
  no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that the auditor identified during the audit.

#### Other Matter

We noted compliance deficiencies or other management issues that are described in the accompanying "Schedule of Audit Findings and Recommendations".

### Report on Internal Control Over Compliance

A deficiency in internal control over compliance 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, noncompliance on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a compliance requirement will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the "Auditor's Responsibilities for the Audit of Compliance" section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

### Management's Response to the Audit

If provided, the Lehigh County Director of Corrections and PrimeCare Medical, Inc.'s Chief Executive Officer response to our audit is included in this report. We did not audit the Lehigh County Director of Corrections and PrimeCare Medical, Inc.'s Chief Executive Officer's response and, accordingly, we do not express an opinion on it.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the provisions of the contract for professional services with PrimeCare Medical, Inc. . Accordingly, this report is not suitable for any other purpose.

This report is intended for the information and use of management, Phillips Armstrong, County Executive; Edward Hozza, County Administrator; Timothy Reeves, Chief Fiscal Officer, Board of Commissioners; and others within the county and is not intended to be and should not be used by anyone other than these specified parties. However, this report is a matter of public record and its distribution is not limited.

MARK PINSLEY

County Controller

Allentown, Pennsylvania February 27, 2025

Audited by: Allan Vavra

xc: Board of Commissioners
Phillips Armstrong, County Executive
Edward Hozza, County Administrator
Carol Sommers, Deputy Warden of Treatment
Chris Miller, Lead Accountant
Timothy Reeves, Chief Fiscal Officer

### Schedule of Audit Findings and Recommendations

#### 1. <u>Unsubstantiated Medical Service Claims</u>

### Condition

A significant portion of the \$1,576,275 total medical service claims, during the contract year 8/1/23 through 7/31/24, have not been thoroughly reviewed by the Department of Corrections for accuracy and authenticity. Therefore, we are unable provide assurance that the County payments of \$576,275 to Prime Care Medical was appropriate without the County substantiating the first \$1,000,000 in medical services costs reported and paid by PrimeCare.

## For example:

- A major portion of the unsubstantiated claims were from costs associated with the Pharmacy charges & other vendor services for laboratory, x-ray, and eye care included on the Catastrophic Balance Record spreadsheet totaling \$861,542.06. No supporting documentation was on file.
- All other medical service claim amounts, prior to reaching the \$1 million aggregate cap, have not been reviewed to validate the amount and details supporting the claim. No supporting documentation was on file.
- Medical claims after reaching the \$1 million aggregate cap, have not been fully examined by the County due to difficulty in locating the medical service claims listed on the Catastrophic Balance Record spreadsheet to the Health Insurance Claim Forms accompanied with the invoices.

Without an adequate and effective review process to substantiate the claims, errors and irregularities may not be detected to reduce the risk of overpayments.

#### Recommendation:

We recommend the Department of Corrections implement a claims validation process to ensure the legitimacy of medical service costs applied by PrimeCare. Within 90 days, management should:

- Dobtain and review all the pharmacy, laboratory, x-ray, and eye care vendor's supporting invoices and detailed information by examining the patient's name, types of medicine, applicable service performed, and cost, which were included on the Catastrophic Balance Record spreadsheet.
- All other medical service claim amounts, prior to and after reaching the \$1 million aggregate cap, should be reviewed to validate the amount and details supporting the claim to identify potential errors and irregularities. Procedures should include at a minimum all large and unusual amounts, along with a sample of smaller amounts recorded on the Catastrophic Balance Record spreadsheet to determine if the charges are valid, accurate, and agrees with the contract terms.
- Test the Catastrophic Balance Record spreadsheet calculations and data for accuracy and integrity by performing periodic data integrity testing of the Catastrophic Balance Record spreadsheet using computer assisted techniques. These include sorting, filtering of dates outside the contract service range, searching for invalid dates, excessive amounts, duplications, etc.

- Coordinate with PrimeCare ways to improve both the County's and PrimeCare's accounting systems for receiving, recording, and paying invoices (I.e., Improve timing, recording, and error resolutions disputes handling).
- The County should require an external review of PrimeCare's financial transactions and/or units of service by an independent auditor, as allowed under Audit section 07.C. of the contract. This should be provided by the end of the calendar year.
- Establish written policies to perform periodic validation testing of invoices listed on the worksheet (Stratified sampling, or other analytical or computer-generated techniques).

### 2. Contract Accounts Payable/Billing Discrepancies

# **Condition**

Four payment and or billing discrepancies were found, which resulted in recovering \$46,884.59.

A billing overcharge discrepancy of \$11,119.65 was detected during the Controller's Office weekly vendor check review. Lehigh County paid \$26,381.77 on 5/30/24, but was only credited \$15,262.12 on the Catastrophic Balance Record spreadsheet. PrimeCare was contacted and they agreed to adjust it in the future billing. On 11/13/24, the overpayment was reduced from invoice #53772.

PrimeCare billed the County for 88 catastrophic medical claims totaling \$4,607.91 dated outside the contract service dates. Detection was identified by the Department of Correction's accountant and disputed before the payment was made. Service date entries from 8/1/24 thru 8/21/24 were removed on 10/24/24. The dispute was remediated on 11/13/24.

Two medication assisted treatment (MAT) medication credit amounts totaling \$1,777.28 were not applied against catastrophic pharmacy vendor's charges. Further review is being performed by the department of corrections.

A duplicate Mental Health Services invoice of \$29,379.75 was paid on 9/26/24. This came to our attention during the second year of the contract while the audit was in process. Detection was not identified by either party. To remediate the overpayment, management decided to skip the next monthly payment in October.

#### Recommendation:

To prevent, detect, or reduce the risk of financial losses, the Department of Corrections should implement stronger controls to enhance their billing review and payment processes in order to mitigate a wide-variety of errors or irregularities that may occur. Within 90 days, management should:

- Establish a formal written policy outlining invoice verification and payment procedures.
- Perform and document monthly and annual reconcilements of invoices billed to contract approved amounts and general ledger posting for accuracy and timeliness.
- > Implement other recommendations as described in finding number one above.



# LEHIGH COUNTY JAIL 38 N. FOURTH STREET ALLENTOWN, PA 18102

### MEMORANDUM

TO: Mark Pinsley, Controller

FROM: Janine Donate, Director of Corrections

DATE: March 11th, 2025

RE: Response to Audit Findings & Recommendations

The Department of Corrections, exercises care in our scrutiny and review process before the submission of any Request for Payments given the resources we have. All medical service claims, both prior to, and after reaching the \$1 Million Aggregate CAP were reviewed to confirm that the date of service fell within the contract period. Further, we have requested of the vendor to provide us their worksheet(s) to verify there is no duplication of charges for the same vendor/service, and for the same inmate. As the auditor(s) can now confirm, we have an abundance of medical service claim forms to review for our population. One of the challenges is that the claim forms sent with the invoice do not coincide to the invoice charges. This is a due to a timing difference in the monthly invoices we receive and the various provider expense details being behind. Unfortunately, this makes it more difficult and time consuming to locate each form and match it to the correct invoice. Additionally, the auditor has more accounting programs at his disposal and spent months sorting through the information.

The Department of Corrections reached out to Prime Care and were informed that they can provide all the vendor details (i.e. pharmacy) supporting invoices, but they were not contacted by the auditor to review those documents. Upon our review, the pharmacy detail, for just the month of January 2025, is ten pages in length, and only a little over two of those pages are medications specifically assigned to a particular inmate. The bulk of our pharmacy is stock medications. These medications are identified by brand-name and generic, the milligrams, the number of tablets or injections, and the cost for the month.

During the first year of our current contract, we exceeded the \$1 Million Aggregate CAP prior to the year ending. In fact, before the halfway mark into the first year we exceeded the CAP. Of course, this was very concerning because we reviewed the 4 years prior to making the decision and based upon that data, we would have saved money over the course of the contract, which led us that selection. Thus, I reached out to Prime Care and requested an examination of the first half of the contract year (Aug. 2023-July 2024). In June of 2024, I

received an analysis of all non-routine expenses outside of MAT related expenses. One of the single biggest drivers of our overage was related to HIV patients that were admitted to our facility. The analysis included the top twenty of our largest medication expenses, and seven of those were related to HIV treatment. Between August of 2023 and April 2024, the cost of HIV medications alone totaled \$311,882.95, versus the entire previous contract year of \$319,854.35. We projected exceeding that total by almost \$100,000 for HIV treatment alone, given the current trend. Additionally, the top five individual patient expenses (excluding HIV positive patients) totaled just shy of \$180,000.

Unfortunately, there is no way to predict the medical needs of our population coming into the facility, and while they are here under our care. However, the savings that the county does benefit from is due to the establishment of Act 22 of 2011. The first contract year, invoices amounting to \$5,306,067.91 went through claims processes, wherein Prime Care contractually acts as the county's agent, resulted in (after those discounts) a total expense of \$480,697.05.

Finally, three of the four conditions listed on the audit were not audit discoveries during the course of the audit, but were previously mitigated by DOC staff and were brought to the attention of the auditor. As for the \$1,777.28 of MAT medication credit amounts, the DOC is unclear of this reference.

We certainly appreciate the opportunity to work with the Controller's office, and the auditors, who are always professional and diligent in their processes. We also welcome the support and scrutiny of such an enormous and comprehensive professional contract and expense to the county.

**JMD** 

cc: Carol Sommers, Assistant Director Chris Miller, Lead Accountant DOC File



PHONE: 717.545.5787 | 1.800.245.7277

QUALITY CORRECTIONAL HEALTH CARE

March 11, 2025

## Via email (MarkPinsley@lehighcounty.org)

Mark Pinsley, Lehigh County Controller Lehigh County Government Center 17 South Seventh Street Allentown, PA 18101-2400

Re: Compliance Audit – Contract for Professional Services (PrimeCare Medical, Inc.)

# Dear Controller Pinsley:

Please consider this correspondence PrimeCare Medical, Inc.'s (PrimeCare) response to the draft audit report prepared by your office of the financial aspect of the services PrimeCare provided to the Lehigh Department of Corrections for contract years August 1, 2022 through July 31, 2024. We will address the draft audit utilizing your formatting.

#### Background and Financial Information

Although the audit is stated to be for a two contract year period; August 1, 2022 through July 31, 2024 the majority of the financial information set forth is focused on contract year August 1, 2023 through July 31, 2024 (as of September 19, 2024).

We believe when reviewing the compliance of the financial operations between the Lehigh County Department of Corrections and PrimeCare it is important to recognize the enormity of the health care operations. Allow us to provide a sampling of the statistical data available that helps frame some of the care rendered. During the period of the audit there were:

8,607 new patients processed into the facility.

19,969 medical sick calls were completed

2,111 patients presented or were diagnosed with chronic care conditions requiring regular treatment and follow-up

148 patients required hospitalization for a total of 498 hospital days

There were 1,441 completed outside appointments

1030 EKGs were performed in-house

1349 x-rays were performed in-house

193 patients were treated for HIV

8,685 COVID-19 tests were administered

Over 50% of the patient population received medical medications

28,500 Behavioral Health sick calls were completed

Over 40% of the patient population received psychotropic medications

#### 2601 dental visits were completed

In terms of the financial impact of all operations, invoices for outside claims totaling \$16,679,205 were received by PrimeCare. After claims processing the amount paid was reduced to \$1,142,352, representing savings to the tax payers of Lehigh County of 93.6%. The total amount invoiced by PrimeCare to the County for the audit period totaled 13,323,540.

# Independent Audit's Report

Since the Audit was of the Department of Corrections compliance, we do not feel it appropriate nor necessary to comment on the determination the Department did in fact comply with all material compliance requirements.

# Schedule of Audit Findings and Recommendations

#### 1. Unsubtantiated Medical Service Claims

The audit determined there was a lack of supporting documentation for claims satisfying the Catastrophic limit of \$1,000,000.00 as well the claims exceeding the limits. Complete supporting documentation does exist. Due to its volume it was not always provided historically but it was always retained by PrimeCare to answer any questions raised and substantiate the amount invoiced.

In addition, PrimeCare and the County discussed and resolved this issue during a November 12, 2024 meeting. Copies of all vendor invoices and claims received are now sent monthly. The excel version of the catastrophic balance report is provided monthly as requested

#### 2. Contract Accounts Payable/Billing Discrepancies.

The audit found <u>4</u> payment or billing discrepancies totaling \$46,884.59. This represents 0.35% of the total of all invoices issued during the audit period. The largest such discrepancy (\$29,379.75 or 63%) was the inadvertent paying of an invoice twice by the County. This has since been rectified. PrimeCare does not currently receive any a remittance advice from the County for ACH payments issued. If the County wants to issue remittance advices with payments detailing the invoice numbers being paid, payment application discrepancies can be mitigated. Typically, all PrimeCare clients carry some aged accounts receivable. As a result, an isolated "overpayment" does not result in a negative balance. When this does occur on an infrequent occasion contact is made with the County to determine how to handle the amount moving forward.

The remaining discrepancies totaling \$17,504.84 have also all been rectified and would benefit from the implementation of a remittance advice.

Thank you for the opportunity to assist your office with the audit. In that PrimeCare was not the subject of the audit (even though its services were) and it did not receive an engagement letter. it does not consider it proper to execute the proposed representation letter. However, we will

continue to cooperate with the Department and your office to ensure the County is satisfied with the services we provide and the responsiveness we promise to all our clients.

Very truly yours,

Thomas J. Weber, Esq. Chief Executive Officer

cc: Janine Donate, Director of Corrections