# MERCY CARE SUB-CAPITATED EXPENSES REPORT

Contract Year Ended September 30, 2020

## SUB-CAPITATED EXPENSES REPORT

Year Ended September 30, 2020

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### INDEPENDENT AUDITORS' REPORT

To the Board of Directors of

## **MERCY CARE**

## **Opinion**

We have audited the sub-capitated expenses report of *Mercy Care* (the "Organization"), as defined in the Complete Care, ALTCS, DDD and Regional Behavioral Health Authority contracts between *Mercy Care* and the Arizona Health Care Cost Containment System ("AHCCCS") for the contract year ended September 30, 2020.

In our opinion, based on our audit and our reports on *Mercy Care's* financial statements for the years ended June 30, 2021 and 2020, dated November 10, 2021 and November 20, 2020, respectively, the sub-capitated expenses report for the contract year ended September 30, 2020 referred to above presents fairly, in all material respects, the activities of *Mercy Care* for the contract year ended September 30, 2020, as defined in the AHCCCS contracts referred to in the first paragraph.

## **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Organization and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## Responsibilities of Management for the Sub-Capitated Expenses Report

Management is responsible for the preparation and fair presentation of the sub-capitated expenses report in accordance with accounting principles generally accepted in the United States of America and the AHCCCS contracts and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of sub-capitated expenses report that are free from material misstatement, whether due to fraud or error.

In preparing the sub-capitated expenses report, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern for one year after the date that the sub-capitated expenses report is available to be issued.



## Auditors' Responsibilities for the Audit of the Sub-Capitated Expenses Report

Our objectives are to obtain reasonable assurance about whether the sub-capitated expenses report is free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. 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 will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the sub-capitated expenses report.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the sub-capitated expenses report, 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 amounts and disclosures in the sub-capitated expenses report.
- Obtain an understanding of internal control relevant to the audit in order to design audit
  procedures that are appropriate in the circumstances, but not for the purpose of expressing
  an opinion on the effectiveness of the Organization's internal control. Accordingly, no such
  opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the sub-capitated expenses report.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern for a reasonable period of time.

## Other Matter

The accompanying sub-capitated expenses report has been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("US GAAP"). The format of the accompanying sub-capitated expenses report has been presented in accordance with the AHCCCS financial reporting guidelines as defined in the AHCCCS contracts with Mercy Care. Our opinion is not modified in respect to this matter.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Phoenix, Arizona November 1, 2022

Mayer Hoffman McCam P.C.

#### SUB-CAPITATED EXPENSES REPORT

Contract Year Ended September 30, 2020

Account	Account Description		ge <1	Age 1-20	Age 21+	Duals	SSI w/o Med	Prop 204 Childle		lts AO	C Total		Duals N	ion-Duals	ALTCS Total		Duals St	SI w/o Med	DDD Total		TXIX/XXI CMDP Child	TXIX/XXI SMI C	TXIX/XXI ther Child (Crisis) Othe	TXIX/XXI er Adult (Crisis)	Title XIX N	on-Title XXX/XXI	RBHA Total	MCA Total	Mercy Care Total
Sub-Capitated B 60199-01 60299-01 60399-01 60499-01 60599-01 60799-01 60899-01 60999-01 61100-01 61100-01	who sood Man Exponent: That Treatment Services That Treatment Services That Machine Services That I Services Tha	-																		01 01 01 01 01 01 01 01 01 01 01 01 01 0	11.123.307 S 10.148.239 S 797.366 S 18.868.208 S 2.141,952 S 32.452 S (49.058) S (1,920) S	23.766.643 S 42.055.240 S 20.416.629 S 86.026.792 S 30,518.179 S 9.733.769 S 1.684.990 S 1,803,499 S	(859) S - S (1,368) S		21.216.928 \$ 104.925.594 \$ 80,803.872 \$ 9.745.858 \$ 1.635.932 \$ 1,801,327 \$ \$	14.426.834 7.968.771 6.391.515 43.736.626 13,501,697 1.020.554 9.251.775 403,548 1.584.933	\$ 49.342.026 \$ 60.134.096 \$ 27.606.443 \$ 148.682.20 \$ 94.305.569 \$ 94.305.569 \$ 10.766.412 \$ 10.887.707 \$ 2,204.875 \$ 1.584.933 \$ - \$ 5 - \$ 6 - \$ 5 - \$ 6 - \$ 7 - \$ 6 - \$ 7 - \$ 7 - \$ 6 - \$ 7 - \$ 7 - \$ 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 -		\$ 49.342.026 \$ 60.134.096 \$ 27.508.443 \$ 148.682.220 \$ 94,305,569 \$ 10.786.412 \$ 10.887.707 \$ 2,204.875 \$ 1.584.93 \$ - \$ -
50105-01	Total Sub-Capitated Behavioral Health Expenses: d Hospitalization Expenses: Hospital Incatient		- \$	-	s -	\$ -	s -	s .	s	- s	-	s	- \$ 207.153 \$	51.302	s - s 258.455	s	- s	-	s -	\$	43,060,547 \$	216,005,740 \$	6,487,304 \$	41,656,437 \$	307,210,029 \$	98,286,254	\$ 405,496,283	s -	\$ 405,496,283 \$ 258.455
50110-01	1 Behavioral Heath Hospital Inpatient Total Sub-Capitated Hospitalization Expenses:	s	- \$		\$ -	s -	\$ -	\$ .	s	- s	-	s	207,153 \$	51,302	\$ 258,455	\$	- \$	-	s -	\$	- \$	- s	- \$	- \$	- \$	-	s -	s -	\$ 258,455
Sub-Capitated M 50205-01 50210-01 50215-01 50220-01 50225-01	Isolaci Compensation Expenses Primary Care Physician Services Behavicral Health Physician Services Retemal Physician Services PH FOLICIPIC Services Other Physicsonal Services		164.148	2.888.036	1.083.049	319.97					6.160.229		1.033.070	271.230 8			63.753	255.619	319.372		:	:	-	= = = = = = = = = = = = = = = = = = = =	:	-		1.138.824	S 8.922.724
Sub-Continued C	Total Sub-Capitated Medical Compensation Expenses: ther Medical Expenses:	\$	164,148 \$	2,888,036	\$ 1,083,049	\$ 319,97	\$ 175,68	\$ 1,085,9	8 \$ 443,	395 \$	6,160,229	\$	1,033,070 \$	271,230	\$ 1,304,300	\$	63,753 \$	255,619	\$ 319,372	\$	- \$	- s	- \$	- s	- \$	-	\$ -	\$ 1,138,824	\$ 8,922,724
50305-01 50310-01 50315-01 50320-01 50325-01 50330-01	Temeratoric Pacility Services PH Planmacy Laboratory, Radiology and Medical Imaging Outsident Facility Dunable Medical Equipment Dental Temporatoric Temporatoric		481,029 24.258 1,644,927	6,671,099 374.603 23,506,815	2,472,254 138.693	424,59 40.87 2,565,12	23.25	129.9	0 36	488	13,442,250 768.104 39,385,027		215,554 272.168 645,463	99,685 \$ 66.940 \$ 160,097 \$	\$ 315,239 \$ 339,109 \$ 805,560		68,580 1.172,772 405,436	490,622 4.649,865 1,604,558	559,202 5.822.637 2,009,995	s	- S	- S 863.603 94,341	- S	- S	- s - - - - - - - - - - - - - - - - - -		s	1,022,765 3,801,134	\$ - \$ 15,339,457 863,603 \$ 6,929,850 \$ 46,096,057
500335-01 50346-00 50348-01 50355-01 50355-05 50355-05 50355-07 50355-15 50355-15 50355-15 50355-21 50355-21 50355-25 50355-25 50355-25 50355-25 50355-25	Nation Facility. Home Natiff Care Threating. Permit And Professional Exact Powers to Provides Behavioral Health Care Process Behavioral Health Chick Intervettion Services Behavioral Health Chick Intervettion Services Behavioral Health Ministrations Services Behavioral Health Ministrations Services Concession Associated Threating Ministration All Chick Pethavioral Health Services RESERVED ACT OF SERVICES PRESERVED ACT OF SERVICES PRESERVED BESIEVED		277.798	3.766.618		25	53.262	2 140.0	6 35.	376	4.273.849		828.755	212.227	S 1.040.982		709	4.672	4.672			15,696			15.696		S 15.696	4.548.764	\$ 4.553.436
30370-01	Total Sub-Capitated Other Medical Expenses:	\$	2,428,012 \$	34,319,135	\$ 2,610,946						57,869,231	\$	1,961,940 \$	538,950	\$ 2,500,890	\$	1,647,497 \$	6,938,156		\$	- \$	973,639 \$	- \$	- \$	10,000	-	\$ 973,639	\$ 9,372,663	\$ 79,302,077
	Total Sub-Capitated Expenses:	s	2,592,161 \$	37,207,171	\$ 3,693,995	\$ 3,350,81	\$ 2,141,45	\$ 11,684,1	7 \$ 3,359,	381 \$	64,029,460	\$	3,202,163 \$	861,482	\$ 4,063,646	\$	1,711,250 \$	7,193,775	\$ 8,905,025	\$	43,060,547 \$	216,979,379 \$	6,487,304 \$	41,656,437 \$	308,183,668 \$	98,286,254	\$ 406,469,922	\$ 10,511,487	\$ 493,979,540

## NOTES TO THE SUB-CAPITATED EXPENSES REPORT

Contract Year Ended September 30, 2020

## (1) Nature of operations

Company operations - Mercy Care (the Plan) is a nonprofit corporation, whose sponsor organizations are CommonSpirit Health (Dignity) and Ascension, collectively the "Sponsors". Equality Health Foundation owns a 0.5% nonvoting interest in the Plan. Mercy Care provides medical care under various contracts with the Arizona Health Care Cost Containment System (AHCCCS), a department of the state of Arizona charged with administering health care for the state's indigent population. Mercy Care provides medical coverage, through contracts with providers of health care services, under the AHCCCS contract for the following populations:

- AHCCCS Complete Care (ACC) (effective October 1, 2018) Integrated physical and behavioral healthcare for members eligible under Title XIX Medicaid and Title XXI program requirements
- Arizona Long Term Care System (ALTCS) Provide institutional care, home and community-based services and behavioral health services to long term care members
- Arizona Department of Economic Security, Division of Developmental Disabilities (DES/DDD) provide medical services to eligible members
- Regional Behavioral Health Authority (RBHA) behavioral health care services to Medicaid eligible adults with serious mental illness
- Department of Child Services (DCS), Comprehensive Medical and Dental Program (CHP) (effective April 1, 2021) – integrated physical and behavioral health for children in foster care eligible under Title XIX Medicaid and Title XXI program requirements

AHCCCS requires the submission of the sub-capitated expenses report for each contract year for the lines of business included above. The report is a summary of sub-capitation expenses, by risk group, by individual expense line item, by date of service. The sub-capitated expenses report for the contract year ended September 30, 2020 is presented in accordance with the associated AHCCCS template. Sub-capitation is a fixed premium paid by Mercy Care to a provider of health care services with which Mercy Care has a contract. The provider is at risk for the designated services.

## (2) Significant accounting policies

The significant accounting policies followed by Mercy Care, referred to in these financial statements as the "Plan", are summarized below:

Basis of presentation - The accompanying sub-capitated expenses report has been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("US GAAP"). The accompanying sub-capitated expenses report has been presented in accordance with the AHCCCS financial reporting guidelines as defined in the AHCCCS contracts of Mercy Care for the lines of business described in Note 1.

**Management's use of estimates** - The preparation of the sub-capitated expenses report in conformity with US GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**Healthcare service cost recognition** - The costs of providing hospitalization, medical compensation, ancillary and other medical services, institutional, and home and community based services are accrued in the period in which the service is provided to eligible recipients based in part on estimates, including an accrual for services incurred but not yet reported.

## NOTES TO THE SUB-CAPITATED EXPENSES REPORT

Contract Year Ended September 30, 2020

## (2) Significant accounting policies (continued)

Mercy Care contracts with various providers for the provision of a full range of integrated healthcare services to eligible adults and children for Title XIX, Title XXI, and Non-Title programs, and physical healthcare services to Seriously Mental III Title XIX eligible adults. Healthcare services are purchased under fee-for-service or block purchase arrangements. Fee-for-service contract expenses are accrued as incurred. Healthcare services provided under block purchase arrangements are accrued based upon contract terms, including the measurement of encounter value. Block payments that do not meet the criteria for revenue recognition during the contract year may be subject to recoupment by Mercy Care from the healthcare provider. The accompanying Sub-Capitated Expenses Report for the contract year ended September 30, 2020 includes a reduction in expenses of approximately \$13,000,000 for underencountered block funding contracts with providers. From time to time, Mercy Care amends the provider contracts. The effects of these amendments are recorded in the period in which the amendment was executed.

The accompanying Sub-Capitated Expenses Report for the contract year ended September 30, 2020 includes expenses for contracts with entities affiliated with Equality Health Foundation, a related party, totaling \$8,900,000.

**Subsequent events** - The Company has evaluated subsequent events through November 1, 2022, which is the date the financial statements were available to be issued.