

Department of Health and Human Services

**OFFICE OF
INSPECTOR GENERAL**

**BLUE CROSS BLUE SHIELD
ASSOCIATION GENERALLY CLAIMED
ALLOWABLE MEDICARE
POSTRETIREMENT BENEFIT COSTS**

*Inquiries about this report may be addressed to the Office of Public Affairs at
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Gloria L. Jarmon
Deputy Inspector General
for Audit Services

September 2017
A-07-17-00521

Office of Inspector General

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The designation of financial or management practices as questionable,
a recommendation for the disallowance of costs incurred or claimed,
and any other conclusions and recommendations in this report represent
the findings and opinions of OAS. Authorized officials of the HHS
operating divisions will make final determination on these matters.

Report in Brief

Date: September 2017
Report No. A-07-17-00521

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF INSPECTOR GENERAL



Why OIG Did This Review

The Centers for Medicare & Medicaid Services (CMS) reimburses a portion of Medicare contractors' costs for postretirement benefit (PRB) plans. At CMS's request, the OIG, Office of Audit Services, Region VII pension audit team reviews the Medicare segment PRB costs to ensure compliance with Federal requirements.

Previous OIG reviews found that Medicare contractors have not always complied with Federal requirements when claiming PRB costs for Medicare reimbursement.

Our objective was to determine whether the fiscal years (FYs) 2011 through 2015 PRB costs that Blue Cross Blue Shield Association (BCBS Association) claimed for Medicare reimbursement under its fiscal intermediary contracts, and reported on its Final Administrative Cost Proposals (FACPs), were allowable and correctly claimed.

How OIG Did This Review

We reviewed \$340,000 of PRB costs that BCBS Association claimed for Medicare reimbursement on its FACPs for FYs 2011 through 2015.

Blue Cross Blue Shield Association Generally Claimed Allowable Medicare Postretirement Benefit Costs

What OIG Found

Although BCBS Association generally claimed allowable PRB costs for Medicare reimbursement under its fiscal intermediary contracts for FYs 2011 through 2015, it did claim some unallowable PRB costs for this timeframe. BCBS Association claimed PRB costs of \$339,722 for Medicare reimbursement for FYs 2011 through 2015; however, we determined that the allowable Federal Acquisition Regulation-compliant PRB costs during this period were \$271,117. The difference, \$68,605, represented unallowable fiscal intermediary contract Medicare PRB costs that BCBS Association claimed on its FACPs for FYs 2011 through 2015. BCBS Association claimed these unallowable Medicare PRB costs primarily because it based its claims for Medicare reimbursement on incorrectly calculated assignable PRB costs.

What OIG Recommends and BCBS Association Comments

We recommend that BCBS Association revise its FACPs for FYs 2011 through 2015 to decrease its claimed Medicare PRB costs by \$68,605.

BCBS Association stated that it accepted our recommendation. BCBS Association also stated that it had no means to adjust the FACPs for FYs 2011 through 2015, as the final FACP audits for these years have been conducted by the OIG and are now being closed. BCBS Association added that it understood that the Federal Government would present a closing agreement summarizing the Medicare PRB costs audit recommendation relating to its contract with HHS, including the recommendation in this report.

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INTRODUCTION

WHY WE DID THIS REVIEW

Medicare contractors are eligible to be reimbursed a portion of their postretirement benefit (PRB) costs, which are funded by direct payments to beneficiaries or contributions to a dedicated trust fund. The amount of PRB costs that the Centers for Medicare & Medicaid Services (CMS) reimburses to the contractors is determined by the cost reimbursement principles contained in the Federal Acquisition Regulation (FAR) as required by the Medicare contracts. Previous Office of Inspector General (OIG) reviews found that Medicare contractors have not always complied with Federal requirements when claiming PRB costs for Medicare reimbursement.

At CMS's request, the OIG, Office of Audit Services, Region VII pension audit team reviews the cost elements related to qualified defined-benefit, nonqualified defined-benefit, PRB, and any other pension-related cost elements claimed by Medicare fiscal intermediaries and carrier contractors and Medicare administrative contractors (MACs) through Final Administrative Cost Proposals (FACPs) and/or Incurred Cost Proposals.

For this review, we focused on one Medicare contractor, Blue Cross Blue Shield Association (BCBS Association). In particular, we examined the Medicare segment and Other segment allowable PRB costs (which for this report we will refer to as "PRB costs") that BCBS Association claimed for Medicare reimbursement on its FACPs.

OBJECTIVE

Our objective was to determine whether the fiscal years (FYs) 2011 through 2015 PRB costs that BCBS Association claimed for Medicare reimbursement under its fiscal intermediary contracts, and reported on its FACPs, were allowable and correctly claimed.

BACKGROUND

Blue Cross Blue Shield Association

During our audit period, BCBS Association administered Medicare Part A operations under cost reimbursement contracts with CMS until its contractual relationship ended on September 30, 2015.

The Association sponsors a PRB plan called the Blue Cross Blue Shield Association Retiree Life and Health Benefits Program. This plan is designed to provide medical, dental, and life insurance benefits to Association retirees and their dependents. The Association claimed PRB costs for Federal reimbursement on an accrual basis.

The Association participates in a Voluntary Employee Benefit Association (VEBA) trust for the purpose of funding annual PRB accruals. The Association established its VEBA trust and began funding it in January 1994. VEBA rules do not allow for the funding and reimbursement of key employees¹ through the VEBA trust. Accordingly, PRB costs for key employees that are not funded through the VEBA trust may be accounted for on a pay-as-you-go basis. The Association's CMS-approved accounting practice used accrual accounting for non-key employees and the pay-as-you-go basis for key employees.

Medicare Reimbursement of Postretirement Benefit Costs

CMS reimburses a portion of the Medicare contractors' annual PRB costs, which are funded by contributions that these contractors make to their PRB plans. For PRB costs of non-key employees measured on an accrual accounting basis, FAR 31.205-6(o) requires that to be allowable for Medicare reimbursement, PRB costs must be (1) measured, assigned, and allocated in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 715-60 (formerly Statement of Financial Accounting Standards (SFAS) 106) and (2) funded as specified by part 31 of the FAR.²

CMS also reimburses a portion of the pay-as-you-go costs related to key employees that are not accounted for on an accrual basis and are not reimbursable from VEBA trust assets. To be allowable for Medicare reimbursement, pay-as-you-go PRB costs must be assigned to the period in which the benefits are actually provided or to the period when the costs are paid to an insurer, provider, or other recipient for current-year benefits or premiums (FAR 31.205-6(o)(2)(i)).

HOW WE CONDUCTED THIS REVIEW

We reviewed \$339,722 of PRB costs that BCBS Association claimed for Medicare reimbursement on its FACPs for FYs 2011 through 2015.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our finding and conclusions based on our audit objectives.

Appendix A contains details of our audit scope and methodology.

¹ Federal statute defines "key employees" as a select class of highly compensated employees (26 U.S.C. § 416).

² Effective for financial statements issued for periods ending after September 15, 2009, the FASB ASC became the single source of authoritative accounting and reporting standards applicable for all nongovernmental entities. SFAS 106 is now referred to as ASC 715-60. Thus in 2010, BCBS Association began identifying its PRB obligations using ASC 715-60.

FINDING

Although BCBS Association generally claimed allowable PRB costs for Medicare reimbursement under its fiscal intermediary contracts for FYs 2011 through 2015, it did claim some unallowable PRB costs for this timeframe. BCBS Association claimed PRB costs of \$339,722 for Medicare reimbursement for FYs 2011 through 2015; however, we determined that the allowable FAR-compliant PRB costs during this period were \$271,117. The difference, \$68,605, represented unallowable fiscal intermediary contract Medicare PRB costs that BCBS Association claimed on its FACPs for FYs 2011 through 2015. BCBS Association claimed these unallowable Medicare PRB costs primarily because it based its claims for Medicare reimbursement on incorrectly calculated assignable PRB costs.

CLAIMED POSTRETIREMENT BENEFIT COSTS

BCBS Association claimed PRB costs of \$339,722 for Medicare reimbursement, under the provisions of its fiscal intermediary contracts, on its FACPs for FYs 2011 through 2015. We calculated the allowable PRB costs based on separately computed PRB costs for the Medicare segment and the Other segment. For details on the Federal requirements, see Appendix B.

UNALLOWABLE POSTRETIREMENT BENEFIT COSTS CLAIMED

We determined that the allowable PRB costs for FYs 2011 through 2015 were \$271,117. Thus, BCBS Association claimed \$68,605 of unallowable fiscal intermediary contract Medicare PRB costs on its FACPs for FYs 2011 through 2015. This overclaim occurred primarily because BCBS Association based its claim for Medicare reimbursement on incorrectly calculated assignable PRB costs. In addition, BCBS Association incorrectly allocated PRB costs to the Medicare segment.

The table on the following page shows the differences between the allowable PRB costs that we calculated and the PRB costs claimed on BCBS Association's FACPs and reflected in its accounting documents. Appendix C contains additional details on allowable PRB costs.

Table: Comparison of Allowable PRB Costs and Claimed PRB Costs

	Medicare PRB Costs		
Fiscal Year	Allowable Per Audit	Claimed by BCBS Association	Difference
2011	\$106,214	\$110,038	(\$3,824)
2012	59,060	92,607	(33,547)
2013	55,541	74,005	(18,464)
2014	24,623	18,147	6,476
2015	25,679	44,925	(19,246)
Total	\$271,117	\$339,722	(\$68,605)

RECOMMENDATION

We recommend that BCBS Association revise its FACPs for FYs 2011 through 2015 to decrease its claimed Medicare PRB costs by \$68,605.

AUDITEE COMMENTS

In written comments on our draft report, BCBS Association stated that it accepted our recommendation. BCBS Association also stated that it had no means to adjust the FACPs for FYs 2011 through 2015, as the final FACP audits for these years have been conducted by the OIG and are now being closed. BCBS Association added that it understood that the Federal Government would present a closing agreement summarizing the Medicare PRB costs audit recommendation relating to its contract with the U.S. Department of Health and Human Services, including the recommendation in this report.

BCBS Association's comments are included in their entirety as Appendix D.

APPENDIX A: AUDIT SCOPE AND METHODOLOGY

SCOPE

We reviewed \$339,722 of PRB costs that BCBS Association claimed for Medicare reimbursement on its FACPs for FYs 2011 through 2015.

Achieving our objective did not require that we review BCBS Association's overall internal control structure. We reviewed the internal controls related to the PRB costs claimed for Medicare reimbursement to ensure that those costs were allocable and allowable in accordance with the FAR.

We performed our fieldwork at BCBS Association in Chicago, Illinois.

METHODOLOGY

To accomplish our objective, we:

- reviewed the portions of the FAR and Medicare contracts applicable to this audit;
- reviewed information provided by BCBS Association to identify the amount of PRB costs claimed for Medicare reimbursement for FYs 2011 through 2015;
- used information that BCBS Association's actuarial consulting firm provided, including information on VEBA assets, PRB obligations, service costs, contributions, claims paid, claims reimbursed, investment earnings, and administrative expenses;
- examined BCBS Association's accounting records, PRB plan documents, annual actuarial valuation reports, VEBA trust statements, and Department of Labor/Internal Revenue Service Forms 5500;
- determined the extent to which BCBS Association funded PRB costs with contributions to the VEBA trust fund, accumulated prepayment credits, and direct benefit payments;
- engaged the CMS Office of the Actuary to calculate the PRB costs on the basis of the ASC 715-60 methodology applied in accordance with FAR 31.205-6(o);
- reviewed and verified the CMS actuaries' methodology and calculations and used this information to calculate the PRB costs for the Medicare segment for FYs 2011 through 2015; and
- provided the results of this review to BCBS Association officials on May 24, 2017.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our finding and conclusions based on our audit objectives.

APPENDIX B: FEDERAL REGULATIONS RELATED TO MEDICARE REIMBURSEMENT OF POSTRETIREMENT BENEFIT COSTS

If a contractor elects to use accrual accounting, Federal regulations (FAR 31.205-6(o)) require that PRB accrual costs be determined in accordance with ASC 715-60 (formerly SFAS 106) and funded by payments to an insurer or into a dedicated trust fund, such as a VEBA trust. The FAR states that accrual accounting may be used to determine the allowable PRB costs if the cost is measured and assigned (actuarially determined) based on amortization of any transition obligation. The FAR also states that allowable costs must be funded by the time set for filing the Federal income tax return or any extension thereof and must comply with the applicable standards promulgated by the Actuarial Standards Board.

Federal regulation (FAR 31.205-6(o)(2)(i)) requires that, to be allowable for Medicare reimbursement, pay-as-you-go PRB costs be assigned to the period in which the benefits are actually provided or to the period when the costs are paid to an insurer, provider, or other recipient for current-year benefits or premiums.

**APPENDIX C: ALLOWABLE MEDICARE POSTRETIREMENT BENEFIT PLAN COSTS
FOR BLUE CROSS BLUE SHIELD ASSOCIATION
FOR FISCAL YEARS 2011 THROUGH 2015**

Date	Description		Total Company	Other Segment	Medicare Segment
2010	Calendar Year Allowable PRB Cost	<u>1/</u>		\$22,870	\$63,499
2011	Contributions	<u>2/</u>	4,052,812	4,052,812	
	Discount for Interest	<u>3/</u>	(282,754)	(282,754)	
January 1, 2011	Present Value Contributions	<u>4/</u>	3,770,058	3,770,058	
	Prepayment Credit Applied	<u>5/</u>	299,561	299,561	
	Present Value of Funding	<u>6/</u>	4,069,619	4,069,619	
January 1, 2011	Funding Target	<u>7/</u>	3,717,882	3,717,882	
	Percentage Funded	<u>8/</u>		100.00%	
	Funded PRB Cost	<u>9/</u>		3,717,882	
	Unallowable Interest	<u>10/</u>		(45,428)	
	Allowable Interest	<u>11/</u>		179,185	
2011	Calendar Year Allocable PRB Cost	<u>12/</u>		3,851,639	
	Calendar Year Allocable Pay-As-You-Go Costs	<u>13/</u>		(6,121)	
	Total Calendar Year Allocable PRB Costs			3,845,518	3,845,518
	Headcount Percentage	<u>14/</u>		97.55%	2.45%
	Total Calendar Year Allocable PRB Cost	<u>15/</u>		\$ 3,751,303	\$ 94,215
	Medicare LOB* Percentage	<u>16/</u>		0.78%	88.70%
	Calendar Year Allowable PRB Cost	<u>17/</u>		29,260	83,568
2011	Allowable Fiscal Year PRB cost	<u>18/</u>	\$106,214	\$27,663	\$78,551

Date	Description		Total Company	Other Segment	Medicare Segment
2012	Contributions		1,646,039	1,646,039	
	Discount for Interest		(114,840)	(114,840)	
January 1, 2012	Present Value Contributions		1,531,199	1,531,199	
	Prepayment Credit Applied		378,117	378,117	
	Present Value of Funding		1,909,316	1,909,316	
January 1, 2012	Funding Target		1,555,473	1,555,473	
	Percentage Funded			100.00%	
	Funded PRB Cost			1,555,473	
	Unallowable Interest			(45,428)	
	Allowable Interest			60,134	
2012	Calendar Year Allocable PRB Cost			1,570,179	
	Calendar Year Allocable Pay-As-You-Go Costs			86,252	
	Total Calendar Year Allocable PRB Costs			1,656,431	1,656,431
	Headcount Percentage			97.54%	2.46%
	Calendar Year Allocable PRB Cost			\$ 1,615,683	\$ 40,748
	Medicare LOB* Percentage			0.76%	70.82%
	Calendar Year Allowable PRB Cost			12,279	28,858
2012	Allowable Fiscal Year PRB cost		\$59,060	\$16,524	\$42,536

Date	Description	Total Company	Other Segment	Medicare Segment
2013	Contributions	2,185,727	2,185,727	
	Discount for Interest	(142,991)	(142,991)	
January 1, 2013	Present Value Contributions	2,042,736	2,042,736	
	Prepayment Credit Applied	380,381	380,381	
	Present Value of Funding	2,423,117	2,423,117	
January 1, 2013	Funding Target	2,066,431	2,066,431	
	Percentage Funded		100.00%	
	Funded PRB Cost		2,066,431	
	Unallowable Interest		(42,597)	
	Allowable Interest		81,488	
2013	Calendar Year Allocable PRB Cost		2,105,322	
	Calendar Year Allocable Pay-As-You-Go Costs		188,490	
	Total Calendar Year Allocable PRB Costs		2,293,812	2,293,812
	Headcount Percentage		97.87%	2.13%
	Calendar Year Allocable PRB Cost		\$ 2,244,954	\$ 48,858
	Medicare LOB* Percentage		0.83%	85.37%
	Calendar Year Allowable PRB Cost		18,633	41,709
2013	Allowable Fiscal Year PRB cost	\$55,541	\$17,045	\$38,496

Date	Description	Total Company	Other Segment	Medicare Segment
2014	Contributions	578,766	578,766	
	Discount for Interest	(37,863)	(37,863)	
January 1, 2014	Present Value Contributions	540,903	540,903	
	Prepayment Credit Applied	381,653	381,653	
	Present Value of Funding	922,556	922,556	
January 1, 2014	Funding Target	407,689	407,689	
	Percentage Funded		100.00%	
	Funded PRB Cost		407,689	
	Unallowable Interest		(42,597)	
	Allowable Interest		-	
2014	Calendar Year Allocable PRB Cost		365,092	
	Calendar Year Allocable Pay-As-You-Go Costs		127,711	
	Total Calendar Year Allocable PRB Costs		492,803	492,803
	Headcount Percentage		97.79%	2.21%
	Calendar Year Allocable PRB Cost		\$ 481,912	\$ 10,891
	Medicare LOB* Percentage		0.74%	84.02%
	Calendar Year Allowable PRB Cost		3,566	9,150
2014	Allowable Fiscal Year PRB cost	\$24,623	\$7,333	\$17,290

Date	Description	Total Company	Other	Medicare
2015	Contributions	2,744,828	2,744,828	
	Discount for Interest	(161,460)	(161,460)	
January 1, 2015	Present Value Contributions	2,583,368	2,583,368	
	Prepayment Credit Applied	550,907	550,907	
	Present Value of Funding	3,134,275	3,134,275	
January 1, 2015	Funding Target	2,580,272	2,580,272	
	Percentage Funded		100.00%	
	Funded PRB Cost		2,580,272	
	Unallowable Interest		(38,302)	
	Allowable Interest		88,146	
2015	Calendar Year Allocable PRB Cost		2,630,116	
	Calendar Year Allocable Pay-As-You-Go Costs		70,717	
	Total Calendar Year Allocable PRB Costs	19/	2,025,625	2,025,625
	Headcount Percentage		99.36%	0.64%
	Calendar Year Allocable PRB Cost		\$ 2,012,661	\$ 12,964
	Medicare LOB* Percentage		0.60%	80.40%
	Calendar Year Allowable PRB Cost		12,076	10,423
2015	Allowable Fiscal Year PRB cost	20/	\$25,679	\$12,711

* Line of Business.

ENDNOTES

- 1/ We computed the allowable PRB cost as the CY PRB cost multiplied by the Medicare line of business (LOB) percentage. We obtained the calendar year (CY) 2010 allowable PRB cost from our prior BCBS Association PRB review (A-07-14-00434), issued May 21, 2014.
- 2/ We obtained the contributions from BCBS Association's actuarial valuation reports. The contributions included deposits made during the plan year (PY) and the discounted value of accrued contributions, if any, deposited after the end of the PY but within the time allowed for filing tax returns.
- 3/ We subtracted the interest that was included in the contributions deposited after the beginning of the valuation year to discount the contributions back to their beginning-of-the-year value. For purposes of this Appendix, we computed the interest as the difference between the present value of contributions and actual contribution amounts. Interest is determined using the expected long-term rate of return assumption as reported in the PRB actuarial valuation report.
- 4/ The present value of contributions is the value of the contributions discounted from the date of deposit back to the first day of the CY.
- 5/ A prepayment credit represents the accumulated value of premature funding from the previous year(s). A prepayment credit is created when contributions, plus interest, exceed the end-of-year funding target. A prepayment credit is carried forward, with interest, to fund future PRB costs.
- 6/ The present value of funding represents the present value of contributions plus prepayment credits plus direct benefit payments. This is the amount of funding that is available to cover the funding target measured at the first day of the CY.
- 7/ The funding target is based on the assignable PRB cost computed during our review. The funding target must be funded by accumulated prepayment credits, current year contributions, or direct benefit payments to satisfy the funding requirement contained in the FAR.
- 8/ The percentage of costs funded is a measure of the portion of the funding target that was funded during the CY. Because any funding in excess of the funding target is accounted for as a prepayment, the funded ratio may not exceed 100 percent. We computed the percentage funded as the present value of funding divided by the funding target. For purposes of illustration, the percentage of costs funded has been rounded to four decimal places.
- 9/ We computed the funded PRB cost as the funding target multiplied by the percent funded. If the percentage funded was less than 100 percent, we set the funded PRB costs to equal the present value of funding.

- 10/ The unallowable interest represents the interest cost attributable to the unallowable unfunded costs that was included in the current-period PRB cost, discounted to the beginning of the year at the long-term interest rate.
- 11/ We assumed that interest on the funded PRB cost, less the prepayment credit, accrues in the same proportion as the interest on contributions bears to the present value of contributions. However, we limited the interest in accordance with FAR 31.205-6(o)(4), which provides that interest costs are unallowable if caused by a delay in funding beyond 30 days after the end of each quarter to which they are assignable.
- 12/ The CY allocable PRB cost is the amount of accrual PRB costs for non-key employees that may be allocated for contract cost purposes.
- 13/ The CY allocable pay-as-you-go PRB cost is the amount of direct benefits paid for key employees (that were not funded or reimbursed from the VEBA trust) that may be allocated for contract cost purposes.
- 14/ We allocated the PRB costs to the Medicare and Other segments by the total number of participants in the PRB plan who were 40 years old or older. We determined the number of participants who were in the Medicare segment and Other segment and used those percentages to allocate costs to each segment. The term "Headcount Percentage" refers to this allocation.
- 15/ The total CY allocable PRB cost is the amount of PRB costs that may be allocated for contract purposes, which includes both the accrual PRB costs and the pay-as-you-go PRB costs.
- 16/ We calculated the Medicare LOB percentage based on information provided by BCBS Association.
- 17/ We computed the CY allowable PRB cost as the CY allocable PRB cost multiplied by the Medicare LOB percentage.
- 18/ We converted the allowable PRB cost to an FY basis (October 1 through September 30). We calculated the FY PRB costs as 1/4 of the prior year's costs plus 3/4 of the current year's costs.
- 19/ The Total CY 2015 allocable PRB cost is prorated for the period of January 1, 2015, to September 30, 2015, to reflect the termination of BCBS Association's fiscal intermediary contract on September 30, 2015.
- 20/ The FY 2015 allowable PRB cost is calculated for the period October 1, 2014, to September 30, 2015, to reflect the termination of BCBS Association's fiscal intermediary contract on September 30, 2015.

APPENDIX D: AUDITEE COMMENTS



August 24, 2017

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Patrick J. Cogley
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RE: Draft Audit Report Number: A-07-17-00521
Blue Cross Blue Shield Association Generally Claimed
Allowable Medicare Postretirement Benefit Costs

Dear Patrick,

Reference is to the draft audit report submitted to Blue Cross Blue Shield Association under cover of your letter dated July 10, 2017.

Following is the comment in the Recommendation section on page 4 of the report:

- We recommend that BCBS Association revise its FACP for FYs 2011 through 2015 to decrease its claimed Medicare PRB costs by \$68,605.

BCBSA accepts the audit recommendation listed above; however, we have no means to adjust the FACP for FY 2011 through 2015, as the final FACP audits for these years have been conducted by the OIG and are now being closed. BCBSA understands the Federal Government will present us a closing agreement summarizing the Medicare postretirement benefit costs audit recommendation relating to our contract with the Department of Health and Human Services, including the recommendation referenced in this letter.

I want to thank you and your staff for the professional manner in which this audit was conducted and for affording us the opportunity to discuss the various issues raised during the audit. This spirit of cooperation clearly facilitated the timely completion of the audit.

Sincerely,

Steve Mickelson
Executive Director - Financial Operations, Accounting & Reporting

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