Help Them Help Themselves—and You

Engaging Managers in Auditing, Monitoring and Education to Support Your Compliance Plan Goals.

Identifying the Needs of Your Compliance Plan

- All Compliance Plan Guidance from the OIG has the same seven basic components.
  - Conducting internal monitoring and auditing;
  - Implementing compliance and practice standards;
  - Designating a compliance officer or contact;
  - Conducting appropriate training and education;
  - Responding appropriately to detected offenses and developing corrective action;
  - Developing open lines of communication; and
  - Enforcing disciplinary standards through well-publicized guidelines.
Identifying the Needs of Your Compliance Plan

This presentation will focus on how to engage your managers in:

- Conducting internal monitoring and auditing; and
- Conducting appropriate training and education.

Large organizations are usually broken into operational units. Ask yourself:

- How is your company organized?
- What are your operational units (lines of business)?
- Who is responsible for the operational unit at
  - The corporate level (senior management)
  - The divisional level (middle management)
  - The site level (local management)
Identifying the Risk

- Within each unit:
  - What are the risk areas you are aware of?
    - OIG Audits
    - RAC Targets
    - Changes to the CMS IOM Manual Instructions
    - Articles in your Medicare Bulletin
    - Rejected claims
    - “Educational” letters from your Carrier/FI/MAC

Identifying the Risk

- What are the actual risks? vs. What are the perceived risks?
  - Educational letter – Actual
  - Audit of a local hospital – Actual
  - Department Director concerns about inadequate patient registration – Perceived
  - Pharmacy concerns about inadequate controls - Perceived
Identifying the Risk

- This is huge undertaking.
- How do you recruit Department Heads and management?

Departments may feel “Compliance is something ‘forced’ on us!”
- Here’s your chance to improve compliance and look at things that are really important to your Department.
- You are the subject matter experts.
- You are the front line operators.
- Your input and insights will create a meaningful and less intrusive plan.
Identifying the Risk

SURVEY SEZ!!

- On line surveys (Survey Monkey, eSurveys Pro)
- Initially ask for feedback
  - What Compliance Risks are there in their work place?
  - What Privacy Risks are there in their work place?

Survey II

- Gather responses and 'normalize'.
  - Diagnostic Services
    - “Orders from physicians get lost at registration.” AND “We have trouble getting orders back with the patient.” are the same problem.
    - Normalized “Patient orders for services not always received by technicians.”
Survey II

- Rank your results.
  - How many times was each item mentioned?
  - Review and rank the responses.
  - Send out your second survey:
    - Top 4-5 results in each Department or in each business line.
    - Send to responsible individuals in each Department, hospital management, other individuals that you want input from.

Survey II

- Ask:
  - How likely is this to happen?
    - Once a year
    - Once a month
    - Once a week
    - Daily
  - What is the risk?
    - Low
    - Medium
    - High
  - What are we doing to limit the risk currently?
  - What should we be doing to limit the risk?
Compliance Plan

- Based on the responses to the survey and your own analysis of the other risks (OIG, RAC, etc.) decide what issues need to be included in the Compliance Plan
  - What Department(s) does the issue affect
  - What information is currently available to monitor the issue
  - What information can be made available through ad hoc reports
  - What information should the audit or monitoring function provide

Example

- Orders for services don’t always make it back to the technicians performing the tests.
- Departments affected:
  - Radiology
  - PT/OT/SP
  - Rehab
  - Laboratory
  - Sleep Lab
Example

- Information that is available
  - None currently
  - Department recommends we use the "Additional information field" in the technician's data entry screen and post "order not received" on all patients who arrive without their orders.
  - Develop a report that shows the number of times the entry appears vs. the total number of procedures performed.

Example

- Information provided by the report:
  - What is the percentage of patients who arrive without orders?
  - Which departments have the most trouble?
    - Lab
    - PT
    - Radiology
  - Is there a pattern?
Example

- **Tools for your manager:**
  - Report to track the percentages across time.
  - Excel spreadsheet on a common drive OR e-mailed monthly.
  - Prepare the tool and provide it to the manager.
  - Educate on how to use the tool.

Tools for Your Managers

- **Keep tools simple**
  - What is the critical information you need to monitor the compliance program?
  - Provide lots of detailed instruction with the tool and in face-to-face education sessions.
Now What?

- You have risk
- You have developed your compliance plan based on your areas of risk
- You have identified the information from internal sources to evaluate that risk
- Your managers have a tool to supply you with the information.

Reducing Risk through Education

- What is the area of risk?
- Who is involved in the process?
- What education is needed?
  - One on one
  - Group
  - By job title
  - All staff
Reducing Risk through Education

- Which department(s) are involved?
- What is happening?
- What are the steps in the process?
- Who is involved at each step?
- What needs to happen?

Example

- Steps – What is happening, steps in the current procedure.
  - Patient arrives with an order for service OR order is received from hospital unit through in-house orders system.
  - Patient is registered as an outpatient OR patient is transported from inpatient unit to testing with their medical record.
  - Patients order is filed in the chart with the face sheet for outpatient billing and medical records OR patients medical record is left with admitting to enter required information for registration.
Example

Who is involved at each step?

- Out patient
  - Patient
  - Registration staff
  - Clinical staff
- In patient
  - Patient
  - Floor staff
  - Transport staff
  - Registration staff
  - Clinical staff

Example

What needs to happen?

- Orders need to get to the technicians/clinical staff.

Proposed Solution

Registration staff shall

- Copy order and give to the patient
to give to the technician or
- Print off the order from IP order system and give to the patient or transporter.
Education

- Registration staff may be under a different Department than the service lines they are registering patient’s for.

- Work with the Department Managers
  - Is this a good solution to the problem?
  - Is there another way to deal with the problem?
  - What difficulties does this solve for both parties?
    - Registration is constantly pulled away from registration to answer calls from technicians or to take orders back to the techs.

Education

- Registration proposes the techs be given access to the IP order system so they can look up orders on IP.

- Department Managers Agree!
  - Make registration responsible for finding and providing orders to technicians/clinical staff for all outpatients.
  - Educate technicians/clinical staff use the IP order system.
Track Success and Share

- Reports should show an improvement in the management of the risk you have identified.
- Publish successes
  - Hospital newsletters
  - Bulletin boards
  - Webpages
- Give ample credit to cooperation of Department heads and front line staff.

Next Year!

- Build on successes.
  - Department heads whose lines have benefitted from the Compliance Program.
  - Departments whose auditing, monitoring or educational requirements have been reduced or eliminated by working with the Compliance Program.
Next Year!

- Re-survey
- Fine tune
  - Documents
  - Requirements
  - Reporting
  - Tools

Questions?