THE COMPLIANCE-PRACTICE PARTNERSHIP: STRATEGIES FOR SUCCESS

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TODAY'S AGENDA

- Compliance as a Practice Resource
- The role of the Physician Practice Compliance Committee
- Auditing, Monitoring and Risk



We hired a new doc----YAHOO!



• However if this is the first you've heard about it.....

- The Realities:
 - Practice pace is different than compliance pace
 - Healthcare systems are complex and spread out
 - Negotiations with physicians don't always consider compliance
 - Private Practice Physicians don't appreciate compliance



- So what to do?
 - Communicate
 - Educate
 - Negotiate
 - Build a partnership



- Communicate with:
 - Physicians
 - Prior to acquisition and thereafter
 - Practice Leadership
 - Monthly scheduled meetings and informal hallway consults
 - The value of lunch
 - Practice Staff
 - Both physician office and administrative teams
 - Senior Leadership
 - Key stakeholders (CEO, COO, Board)





- Communicate how:
 - Don't scare anybody
 - We are a resource, not a speedbump
 - Listen before answering
 - Negotiate instead of saying no
 - Your first interaction needs to be positive
 - Be proactive



- Communication Strategies
 - Prepare a "real" orientation program
 - Focus on the physician practice
 - Have a communication packet
 - Code of Conduct
 - · Relevant signage
 - FAQs
 - Advisory Opinions
 - In-Services



- Communication Strategies
 - Get on Committees
 - Office Managers, Physicians, Acquisitions
 - Make sure compliance is an agenda item
 - Assist with Policies
 - Standardize, but be realistic
 - Recognize the operational differences
 - MSPs, NPPs, Notice of Non-discrimination, etc.
 - Challenge of the waiting room
 - · Coding and billing

- Communicate what:
 - Physicians
 - HIPAA "traps"
 - Treating self or family members
 - Curbside consults
 - Asking Grandpop for his co-pay
 - Office Staff
 - How to report issues
 - Call "Joe", not the Compliance Officer
 - Building personal relationships
 - Every member of the team

- Some Specifics
 - Develop a compliance liaison program
 - Education fairs
 - "Speed" education
 - Establish a Practice specific compliance work plan
 - In partnership with Practice leadership
 - "Sell" the Compliance Brand
 - · On-Boarding
 - Policies and procedures that work
 - · Auditing and Monitoring
 - Compliance week is the real deal



THE ROLE OF THE PHYSICIAN PRACTICE COMPLIANCE COMMITTEE

PHYSICIAN PRACTICE COMPLIANCE COMMITTEE

- Start with a charter
 - Committee function
 - Develop and oversee annual work plan
 - Review and approve policies
 - Review audit findings
 - Develop educational opportunities
 - Develop an annual risk assessment function
 - Determine effectiveness



PHYSICIAN PRACTICE COMPLIANCE COMMITTEE

- Competency Based Membership
 - Compliance staff
 - Not just leadership
 - Medical Staff
 - Practice Leadership
 - Include office management
 - Revenue Cycle
 - Other Departments
 - Risk Management, Legal, HR,, IT
 - Should senior leadership be there?



PHYSICIAN PRACTICE COMPLIANCE COMMITTEE

- Key Deliverables
 - Annually
 - Develop and complete the work plan
 - · Review all policies
 - Perform a risk assessment
 - Survey members for committee effectiveness

PHYSICIAN PRACTICE COMPLIANCE COMMITTEE

- Some Specifics
 - Have co-chairs (Compliance and Operations)
 - Operational co-chair can serve on the Organizational Committee
 - Invite Board Compliance Committee members and key Senior Leaders
 - Generate minutes that get sent to the Board
 - Give assignments to Committee members

- What to audit?
 - Look at controls in the practice
 - Business operations
 - Policies and procedures
 - Staff education and awareness
 - · Coding and billing



- Willie Sutton
- Follow the money
 - Open Payment Database
 - Relationships with Vendors
 - Make sure you have the data AND there are policies regarding relationships.
 - Insure there are controls in place



- Physician Contracts
 - Make sure there is one
 - Are terms being followed?
 - Audit expense allocations
 - CMEs, travel, vacation time
 - If productivity based incentives, review the accuracy of the data
 - Make sure FMV is current and includes total compensation
 - Look for other arrangements
 - Leases, Medical Directorships, On-Call, etc.



- HIPAA Issues
 - Access to records
 - Can access be audited?
 - Designated record sets
 - IT Security
 - Password protection
 - Physical Layout
 - Waiting rooms
 - Record storage/receipt areas



- You can't monitor everything
 - · Coding and Billing
 - Risk based to identify outliers
 - Myth of the 10 records per doc per year
 - Look for trends
 - Use of modifiers
 - Unusual coding patterns
 - Hours billed

- Monitoring leads to great educational opportunities
- Monitoring comes out of auditing
 - Self monitoring
- Much of what we monitor is external
 - Don't focus solely on dashboards
- Not everything can be monitored



- Monitoring
 - IT Solutions
 - Coding and Billing
 - "Snooping" Software
 - Contract Management
 - BAA Vendor Assessments
 - Sanction Checks
 - Share information with practices



- The Risk Assessment
 - Interview key stakeholders
 - "What keeps you up at night?"
 - Know the environment
 - OIG Workplan and other publications
 - Organization strategic plan
 - Professional journals, newsletters, e-mails, etc.
 - Engage your Compliance Committee and Compliance Liaisons
 - Look at prior year trends



- Compiling the Data
 - Stratify and Prioritize
 - Financial
 - Quality
 - Reputation
 - "Bang for the buck"

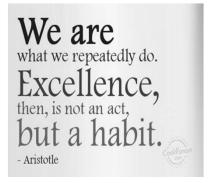


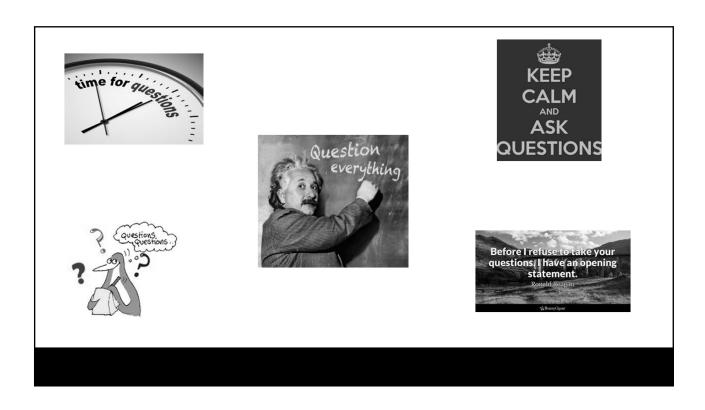
- · Consensus and team building
 - Basis for the annual Workplan
 - · Present often and enthusiastically
 - Board, Senior Leadership, Management, Staff
- Risk Assessments are organic
 - Keep your ear to the ground



IN CLOSING.....

- · Friction in the system is not a bad thing
- Trust is earned sometimes in adversity
- Be a resource
 - Understand the pressures of the physician practice
- Be consistent





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