Click 2017 Compliance Institute Health Care Compliance Association (HCCA)

Compliance Investigations 101:

CO Toolbox Essentials

Session Speakers



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Agenda

- Interviewing Basics: Strategies to get the information you need from the employees; while covering privacy, security, HR and legal aspects are important during and after the interview
- **Partnerships:** Knowing when to engage Legal for establishing privilege and possibly IT to collect substantial evidence; HR is a powerful ally and often, management too!
- Tools: Using SBAR (and other tools) to document the investigation using clear, concise, and legible structure

The Interview Before The Interview





Stages of a Complete Compliance Interview

- Introduction / Rapport
- Free Narrative
- Drawing
- Follow-Up Questions
- Reverse Order Technique
- Challenge Questions

Source: Michael Johnson, CEO, Clear Law Institute (http://www.clearlawinstitute.com)

Introductory Question #1

To whom does the compliance officer report to at your organization:

- a. CEO
- b. CFO
- c. GC
- d. Board
- e. Other

Introductory Question #2

How does your organization determine compliance risks?

- a. Conducts a separate interview based compliance risk assessment
- b. Reviews the OIG Work Plan with compliance committee members
- c. Neither of the above
- d. Something other than the above

Available TOOLS

- Compliance Dashboard
- GAP Assessment
- HIPAA Investigation
- Sanction Score Card
- Phase 2 OCR Protocols



Kitchen Cabinet Report

- An Up-to-Date Report on everything regulatory
- Updated as of: MM/DD/YYYY
- · All entries must have dates

Item	Date	Department	Subject	Status	Leader	Follow up	Complete
1	2/4/16	Compliance	OIG Exclusion	List for January found the following hit 1/10/16 Report	Mary Delaney	Medicine Dr Walter Johnson – see attachment 2.1 Report finds MC suspension In Review with Finance, Legal and Chairmen as of 2/5/16. Follow up meeting 2/12/16	Open with follow up meeting on 2/12/16
2	2/4/16	Department of Cardiology	Audit on top ten billing codes	List of top ten codes billed for the past twelve months for review to HIM Coder and MD Billing. 2/4/16	Keith Jacoby	List forwarded to HIM and Billing Dept on 2/4/16. Follow up meeting scheduled for 2/14/16 to review findings. Final review scheduled for 2/24/16 Presentation at Ops Meeting on 4/5/16	Open with closing date of Z/24 and presentation to Ops on 3/5/16

Compliance Program – 90 Day Review

			End Of	End Of	End Of
			30 days	60 days	90 days
Charle air Ohioshian	Action Step	Danamaikia Dankia	Timefran	mpletion	
Strategic Objectives		Responsible Parties	Month 1	Month 2	Month 3
	Develop & Then Deliver Message from the CEO (all employee distribution) Develop & Then Deliver Message from Board (perhaps smaller distribution) Develop & Then Deliver Message from Board (perhaps smaller distribution) Message from Compliance Officer to Key Leaders (Program Managers) Introduction in Various Leadership Forums Revisit / Revise Compliance Committee Charter (if needed) THEN THE AWARENESS FITHE COMMITMENT TO Responsible Parties X TEO TO TO TO TO TO THEN THE AWARENESS Set (& hold) Calendar of Compliance Meetings with Compliance Officer TO TO TO TO TO TO TO TO TO T				
		CEO	x		
		Board	х		
		CEO	х		
	Introduction in Various Leadership Forums	Various	х		
		Compliance Officer	х		
REFRESH & STRENGTHEN THE AWARENESS	Create/Kick-off Compliance Committee	ссо		х	
AND IMPORTANCE OF THE COMMITMENT TO COMPLIANCE		Compliance Officer		х	
	Develop and promote Compliance Program "branding"	te Compliance Program "branding" Communications			
		CCO / Communications			x
		Compliance Committee			x
	Develop and Implement Quarterly "Do The Right Thing" Type of Recognition / Award	ссо		х	x
	Consider Refresh of Compliance Hotline & Awareness Posters	CCO			х

Compliance Program – 90 Day Review (continued)

			Month 1	Month 2	Month 3
	Develop departmental compliance program standards and expectations (7 element)	CCO & committee		x	
	Increase (Education and or Training) understanding of Compliance with C-Level Staff	cco		x	x
DEVELOP CONSISTENT DEFINITION OF AND		cco		x	
	S ACROSS THE Increase (Education and or Training)	cco		х	
	Establish leadership compliance competencies	ссо			х
	Provide detailed training of Compliance expectations for employees	cco			x
	Select and train departmental compliance liaisons	CCO & committee			x

Compliance Program – 90 Day Review

(continued)

			Month 1	Month 2	Month 3
	Assign individuals to assist with the development of department level compliance programs	Compliance Officer		x	x
	Select pilot department to proceed through the development process	Compliance Committee			x
INCREASE PROGRAM LEVEL AND DEPARTMENT LEVEL ACCOUNTABILITIES FOR PROGRAM DEVELOPMENT	Select department to develop and implement departmental compliance program	CCO & committee			x
	Direct additional departments to develop and implement departmental programs	CCO & committee			x
	Direct remainder of departments to develop and implement departmental programs	CCO & committee			х

Compliance Program – 90 Day Review (continued)

			Month 1	Month 2	Month 3
	Review Each of the High Risk Areas Identified for each program	CCO & Program Leader		x	
	Develop Monitoring Guidance Sheet - description of risk, variables measured, periodicity	Program Leader		x	х
	For Highest (or High) Risk Areas - Develop Monitoring Protocol - Ensure Implementation	Program Leader		х	x
AUDITING AND MONITORING / RISK ASSESSMENT	For Less Than High Risk - Ensure Mechanism to periodically assess	Program Leader			x
	Require Periodic Reporting on High risk monitoring metrics - Compliance Committee	CCO & committee			x
	Develop Overall Compliance Scorecard by Program for All Highest Risk Items	CCO & Program Leader			х
	Develop and Implement Corrective Action Planning Process / Format	CCO & Program Leader			x

Compliance Program – 90 Day Review

(continued)

			Month 1	Month 2	Month 3
	Review Existing Body of Compliance Policies to Ensure Comprehensive & Complete	cco			x
	Direct review of Program Level Compliance Policies to Ensure Adequate	CCO & Program Leader			x
POLICY REVIEW / TRAINING PLANS	Review Corporate Compliance Training Materials / Approach	cco			x
	Review / Develop Program Level Compliance Training / Content & Delivery / Tracking	CCO & Program Leader			х

SBAR

Situation - Background - Analysis - Recommendation

SITUATION

Situation: Clearly and *briefly* define the situation. For example, 'Mr. Jones has multiple prescriptions of Coumadin in his home and he is unclear as to which ones he is supposed to take.

BACKGROUND

Background: Provide clear, relevant background information that relates to the situation. In the example above, you should consider including the patient's diagnosis, the prescribing physicians, and the dates and dosages of the medications.

ANALYSIS

Assessment: A statement of your professional conclusion

RECOMMENDATION

Recommendation: What do you need from this individual? For example, 'Please clarify which is the correct dose of Coumadin for Mr. Jones to take and which physician will be responsible for managing his anticoagulant therapy?'

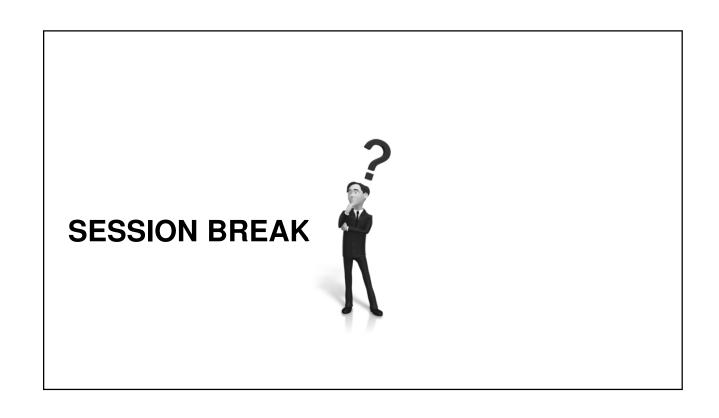
Source: Joint Commission

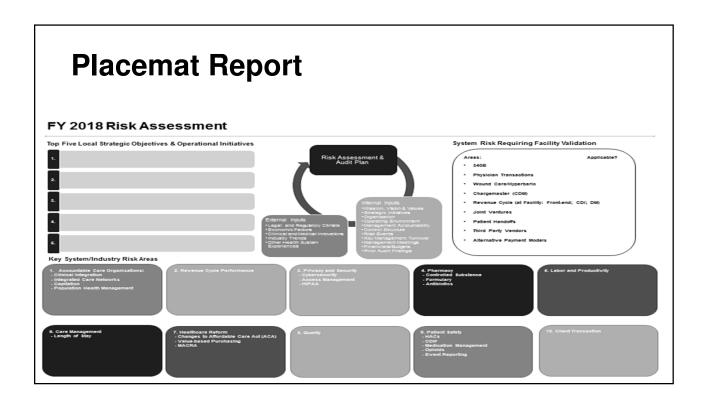
(https://www.jointcommission.org/at home with the joint commission/sbar %e2%80%93 a powerful tool to help improve communication/)

SBAR

Situation – Background – Analysis - Recommendation

SHUATION | Second Completed Second Comp





Placemat Report		
FY 2018 Risk Assessment, Continued		
We Spoke With CEO CFO	Top Risk Areas O	ur Company Should Look At
CNO	If Risk	*Application Charges *Bystem Access *Locally Managed Bystems
Additional Leaders Are there areas beyond the Audit Plan where Our Company may assist in addressing risl	Clinical Risk	
	Compliance Risk	*Regulatory and Gull Tem
	Operational/ Financial, Other	

OCR at ocrmail@hhs.gov:

- An entity that applies to receive Federal financial assistance (FFA) must sign and date and submit an Assurance of Compliance form (HHS 690) that commits them to compliance with <u>five civil rights statutes</u>, as listed in the Assurance form. This form can be found on the Office for Civil Rights website.
- If an entity receives or is applying to receive ONLY Medicare Part B FFA, that entity is <u>not</u> required to sign and submit an Assurance of Compliance, because Medicare Part B is not considered FFA. If the entity receives other FFA, however, such as Medicaid, then it is obligated to sign and submit an Assurance of Compliance.

- Section 1557 applies if you are a health program or perform health activities, which receive Federal financial assistance provided or made available by the Department, and every health program or activity administered by a Title I entity.
- Taglines mean short statements written in non-English languages that indicate the availability of language assistance services free of charge.
- § 92.8 Notice requirement next 4 slides

Section 1557 Checklist

- Has the entity taken appropriate initial and continuing steps to notify beneficiaries, enrollees, applicants, and members of the public of the following:
 - The entity does not discriminate on the basis of race, color, national origin, sex, age, or disability in its health programs and activities
 - YES NO Partial
 - Supporting documentation:

- The entity provides appropriate auxiliary aids and services, including qualified interpreters for individuals with disabilities and information in alternate formats, free of charge and in a timely manner, when such aids and services are necessary to ensure equal opportunity to participate to individuals with disabilities
- YES NO Partial
- Supporting documentation:

Section 1557 Checklist

- The entity provides language assistance services, including translated documents and oral interpretation, free of charge and in a timely manner, when such services are necessary to provide meaningful access to individuals with limited English proficiency (LEP)
- YES NO Partial
- Supporting documentation:

 The entity informs how to obtain aids and language assistance services

YES NO Partial

– Supporting documentation:

Email Protection Tool

One billion Yahoo accounts are hacked per the NY Times

-That's 9 zeros! 1,000,000,000

- SAN FRANCISCO Yahoo, already reeling from its September disclosure that 500 million user accounts had been hacked in 2014, disclosed Wednesday that a different attack in 2013 compromised more than 1 billion accounts.
- The two attacks are the largest known security breaches of one company's computer network.

Source: NYTimes.com 12/14/16

Email Protection Tool



PHISHING

- Appears to come from legitimate sources
- Directs recipients to a website or to divulge personal information
- Includes a sense of urgency for action

Sources: NYTimes.com 12/14/16 and Policy Patty Toolkit 12/29/16

Email Protection Tool - ALERT

	-Be alert to emails that:											
/	Come from unrecognized senders											
	 Ask you to enter, verify, or confirm personal information even if it appears to come from a company you do business with 											
	•Try to urge or scare you into acting quickly by threatening a bad outcome											
	-Be careful with links :											
	 Do not open or click on links, files, or 	attachme	nts from u	nknown s	enders							
	 Open attachments only when you exp 	ect them	& know w	hat's in th	nem							
	 Read email in plain text – readily expo 	ses URL	s that ima	ges point	to							
	 For HTML - hover over links to display 	/ actual U	RL									
	 Avoid emailing personal or financial information 	tion:										
	 Communicate personal info only via p 	hone ANI	Only if yo	ou initiate	the call							
	Provide info only after you confirm security of the site											
	-check for the lock icon on browser status bar, or											
	-https vs http - the S means secure											
	 Check your accounts & bank statements reg 	jularly to										
I I I	Confirm activity											
	•Ensure no unauthorized transactions	were mad	le									
	–Protect computer with these tips:											
	 Use safeguard – firewall, spam filters, 	anti-virus	software									
_	Update software regularly											
	Beware of pop-ups:											
•	-Never enter personal info in a pop-up screen											
	-Don't click on links in a pop-up											
	–Don't copy web addresses fror	n pop-up	3		-							
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Source: Policy Patty Toolkit 12/29/16

Open Discussion (Q & A)