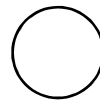


HCCA 2018 COLLABORATION BETWEEN COMPLIANCE, OPERATIONS & INTERNAL AUDIT

**K. Mark Jenkins, Compliance Officer, Adult Enterprise – Vanderbilt
University Medical Center**

Colleen King, AVP, Compliance – University of Louisville Health



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K. Mark Jenkins, CPA, CHC, CHRC, CHPC, CHCO, CIA, CFE, CGMA

**Vanderbilt University Medical Center, Compliance Officer,
Adult Enterprise**

- 25+ years experience in Compliance and Internal Audit
- 22+ years experience in healthcare
 - Hospitals (Acute, Psychiatric, Rehabilitation); Physician Practices; Retail Pharmacy; Reference Laboratory; Health Insurance Plan
 - For-Profit, Not-For-Profit, Academic



COLLEEN A. KING, RHIT, CHC, CDCE, CPCO, CPMA, CPCI, CPB, CEMC, CPPM, CPC

Colleen King-Dennis, Associate Vice President, Compliance – Coding, Billing, Education

UL Physicians UL Hospital UL Brown Cancer Center

- 30 years of experience in Healthcare
 - Academic & Private sectors of industry
- 15 years of experience in Compliance
 - Hospital and Physician
- Certified educator



OVERVIEW

- General Statistics
 - Vanderbilt University Medical Center, Nashville, TN
 - University of Louisville Health System, Louisville, KY
- How we know each other
- Effective Compliance Functions – General
- How the Pieces (Compliance, Operations, Finance) impact Effective Compliance
- How Collaboration between these areas leads to Effective Compliance



GENERAL STATISTICS

- Vanderbilt University Medical Center
- University of Louisville Health



HOW DO WE KNOW EACH OTHER?

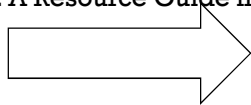


WHAT IS OUR GOAL AS COMPLIANCE PROFESSIONALS?

To develop and lead an **Effective** Compliance Program.

But what does that mean?

We've likely seen and read the Measuring Compliance Program Effectiveness: A Resource Guide from last year....



Measuring Compliance Program Effectiveness: A Resource Guide

ISSUE DATE: MARCH 21, 2017

HCCA-OIG Compliance Effectiveness Roundtable
Roundtable Meeting: January 17, 2017 | Washington, DC



EFFECTIVE HEALTHCARE COMPLIANCE

- Operate with the understanding that faculty and staff want to provide quality health care that is accurately documented and billed;
- Provide accurate, concise and current information and advice to clinical departments on proper documentation and billing of health care items and services;
- Conduct education programs that are interactive, diverse and relevant to providers and their staff;
- Conduct monitoring and auditing activities verifying compliance with applicable federal, state and private payer billing standards to identify and correct inappropriate billing practices;
- Foster and develop honesty, integrity, and respect;
- Promote collaboration between Compliance and the clinical departments and providers;
- Achieve and maintain expertise in knowledge of proper documentation, billing and regulatory impact to health care services;
- Think outside the box to provide options and alternatives in support of proper billing of health care services;
- Promote corrective actions that emphasize education, to support effective, consistent, disciplinary actions if required;
- Report known or identified fraud, waste and abuse swiftly.

Things we generally have in common as compliance leaders:

- Significant responsibilities.
- Limited resources
 - People
 - Funding
 - Technology
- Desire to provide **VALUE** to the organization

Finding we had in the Real-World:

- Being willing to ID and admit to limits and willing to work with others who may possess needed knowledge/ resources is critical to success.
- Seeking compliance professionals who are certified and experienced is a key to moving the function from basic to strategic.

MANAGING COMPLIANCE IN THE REAL-WORLD



CAN WE BE EFFECTIVE FUNCTIONING IN A SILO?

The short answer is:

NO

Why?

Silos are a really growing pains in most organizations. They prevent cross-functional solutions and often leads to ineffectiveness and inefficiencies that are not sustainable long-term.

As leaders we must recognize the ineffectiveness and inefficiencies and work to break them down.

I recently saw a quote that resonated:

“in the race to reform, collaboration wins”

Without evolving to a synergistic approach to handling the issues we face, we will **not** be effective in mitigating the risks to our organizations!



SILOS

Why do they exist?

- Lack of Leadership
- Lack of Organizational Goals/Objectives
- Cooperation and collaboration not seen as valuable



BREAKING DOWN SILOS

▪ Seems easy, right? What are some real world reasons why breaking down silos (barriers) to collaboration are difficult?

- Leadership does not see benefit
- Fear of losing power/influence
- Fear of loss of resources
- Fear of losing face time with senior leadership
- Others?



BENEFITS OF BREAKING DOWN SILOS

- More effective and efficient use of resources
- More accountability and transparency
- Collaborative environment where everyone in organization feel comfortable raising questions
- Teams are more results oriented, toward the common, organizational goals, not just independent area goals.
- Compliance team synergy draws experience and know-how and ensures the core mission of identifying and mitigating risk throughout the Enterprise!



WHO MONITORS COMPLIANCE? ALMOST EVERYONE!

- Commercial payers
- Comprehensive Error Rate Testing Contractors (CERT)
- Medicaid Integrity Contractors (MIC)
- Medicare Administrative Contractors (MAC)
- Medicare Coordination of Benefits Contractors (COB)
- Medicare and Medicaid Integrity Group (MIG)
- Office of Inspector General (OIG)

- Patient Advocacy Groups
- Patients
- Quality Improvement Organizations (QIO)
- Recovery Audit Contractors (RAC)
- Whistleblowers
- Zone Program Integrity Contractors (ZPIC)

That's just naming a few monitoring entities!



ALL EYES ON COMPLIANCE

At the HCCA 2016 Annual Compliance Institute conference, HHS Inspector General Daniel Levinson explained the OIG's bulletin; "Updated Criteria for Implementing Permissive Exclusion Authority Under Section 1128(b)(7) of the Social Security Act"

This bulletin outlined OIG decision making authority, factors including factor rating and 4 categories to be assessed.



COMPLIANCE ISSUE?

- <https://www.youtube.com/watch?v=UhEjxG3He3I#action=share>



WHO IS RESPONSIBLE FOR COMPLIANCE IN YOUR ORGANIZATION?

Typical answer from most stakeholders and employees:

Compliance Officer or Compliance Office

What is the reality?

Everyone!





WHAT WE FOUND....

- We work in dynamic, large healthcare organizations.
- We unfortunately do not have all the answers.
- We are constantly approached with new ideas of services to deliver, services we want to bill for, etc., that takes research and analysis to determine if we can and if so, how to do so compliantly.
- We are constantly challenged with concepts that are not easily determined to be compliant or non-compliant...often scenarios ride the grey, between black and white.
- To be effective, we had to break-down barriers, silos that often existed and seek collaboration/cooperation from various areas to reach successful results in a compliant manner



COLLABORATION! A TEAM APPROACH

- As we all know.....
 - Federal expectations for Compliance Programs continues to evolve.....
 - Just look at the DOJ expectation outlined in April 2017
 - Expectation: Compliance programs should be strong not just on paper – i.e. the always present department manual and outlined program elements
 - Nope! There is an expectation that Compliance Programs should be strong in PRACTICE
 - If your Compliance program has yet to change to Team approach now is the time! Leverage all the compliance knowledge into a “team”!
 - No silos, look at issues with 3 different takes on the problem and coalesce group into a Team!



- Compliance auditor delivering audit results to auditee and members of management.
- A question arose during the conversation, regarding how to bill Chemotherapy Dr. Y is infusing his patients.
- Investigation: Dr. yells at Infusion Clinic staff, who no longer want to work with him/his patients; Dr. does his own infusions, using Infusion Clinic Room, Infusion Clinic Equipment, etc. (paying no rent) and is receiving the drugs at 340-B pricing.
- Involved to Solve: Compliance, Legal, Internal Audit, Billing/Revenue Cycle, Real Estate, Human Resources/Faculty Affairs, contracting
- Could we have reviewed and solved alone in Compliance? Potentially
- What would have been barriers? Limited expertise in all the relevant areas; limited compliance resources to spend the time required to investigate;

REAL WORLD SCENARIO

We have changed the names and some of the details to help protect the unique situation....



- C

- Improper level of reimbursement
- 15 patients affected
- Improper documentation process

C

Our focus today deals with collaboration with other areas to help ensure potential issues are resolved fully and the organization is able to effectively reduce its risk.

- Information Technology
- Credentialing/Privileging
- Contracting
- Operations
- Revenue Cycle (coding, billing, collections)
- External Legal Counsel
- External Consultants
- Performance Improvement

OTHER AREAS THAT MIGHT COLLABORATE

What are some areas we may not have collaborated with that might provide an edge toward getting to the best answer to issues/questions that arise in our diverse organizations?



COLLABORATION & PROACTIVE COMPLIANCE – WHERE TO BEGIN?

Where does your compliance office begin the collaboration process? If you don't already have on-going relationships, begin building in 3 areas;

- Billing Compliance and Internal Audit
- Operations and Internal Audit
- HR, IT, and HIPAA/Privacy

Through collaboration and a team approach to an overall culture of compliance your Healthcare Compliance Team can prove their value in a post healthcare reform environment!



CHALLENGES

Most compliance programs were developed as an essential need to meet the regulatory requirements in the early 1990's.

Compliance today is expected to assist in:

- Delivering better patient centered care
- Protect the enterprise
- Assist in improving Rev Cycle
- Develop stronger educational format for employee engagement
- Solve problems that move across all areas of the Healthcare Enterprise



IS IT POSSIBLE TO OVERCOME COLLABORATION CHALLENGES?

- YES!
 - Requirements:
 - Transparency – share with each compliance arm what risk your group is assessing and steps that will be taken to mitigate that risk.
 - Brainstorming in a collaborative way will offer different perspectives for resolution or uncover additional areas of risk.
 - Recognize the strength and skill set of each group
 - Allows Department to combine talents to better support Enterprise wide compliance
 - Compliance as a whole can focus and prioritize areas of risk
 - The entire team can see how every role contributes
 - Sharing is caring – sharing the load will support faster resolution and improved follow-up



INTERNAL AND EXTERNAL ANALYSIS

- Compliance is usually the “go to” team for “final answers”. Partnering with Operations, HR and even Rev Cycle will offer a fresh perspective of:
 - On-going issues
 - Areas of Risk
 - Areas of Weakness



COLLABORATION DRIVERS TO INCREASING EFFECTIVE

- Billing Compliance Review Results and Internal Audit Review Results
- Continuous/On-Going Monitoring – Billing Compliance and Internal Audit
- Risk Audit Review Results – Billing Compliance and Internal Audit
- Operations Quality Reviews, Billing Compliance, Internal Audit, Legal, HR, IT
- Operations Honesty – Compliance Team, Legal, HR
- Guidance/Training/Policy/SOPs – Compliance Team, Legal, HR





COMPLIANCE & COMPASSION?

We are compassionate and know that death by power-point is not easy.....

So take a break and always give 100% percent! (unless you know your giving blood).



COLLABORATION THROUGH COMMUNICATION

Instead of “silo” thought, collaboration promotes an improved scope when identifying top risk areas:

- Medical necessity coded, billed, reimbursed appropriately
 - IA and Billing Compliance
- Internal tracking and measurements of denial trends
 - IA, Billing Compliance, Operations
- Quality standards audit and review
 - IA, Billing Compliance, Operations

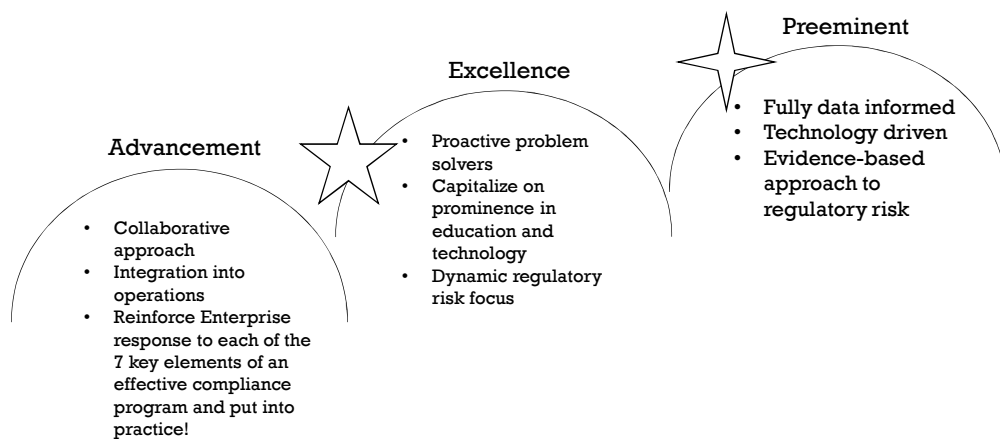


CULTURE OF COMPLIANCE

- What is it? A way of life at work and at home.
- How do you build it?
 - When you practice compliance everyday it becomes a routine, then it becomes second nature and second nature turn it to a Culture.



Collaborative Compliance – A PRACTICE PLAN WITH FOCUS ON EXCELLENCE



Independently:

Write down the areas your department (compliance, internal audit, etc.) has had to collaborate with in situations in the past?

As a group:

Share your answers to the above.

What are some differences?

Share with the Group....

BREAK OUT #1

Gather in groups of 3 – 5 around you.

Preferably not from the same organization.



Independently:

What are other areas (departments) in your organization that you should consider to involve in collaborative matters in the future? Think outside the box...are there areas who are critical to your operations that have not been involved in reviews, problem solving, etc. that could add value?

Share with the group.....

BREAK OUT #2

Keeping the same groups as Break Out #1:



What are you going to do differently?

Will you lead change to mitigate risks?

BREAK OUT #3

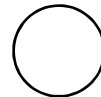
What barriers do you foresee in your organization?

Will you be an advocate to remove barriers and silos
and build the culture of compliance across your
organization?

**Remember, EVERYONE is
responsible for COMPLIANCE!**



ARE YOU GOING TO BE A LEADER FOR CHANGE?



CHALLENGES OF CHANGE

- In the John Kotter article, Guiding Principles for Leading Change.

Kotter states: ... "the single biggest challenge facing leadership in a change process is getting people to change their behavior".



COLLABORATION PROCESS - BEGINNING

- Don't forget the human aspect of change!
 - Communicate
 - Different expectations
 - Different way of thinking
 - Understand goal and mission are same



COLLABORATION PROCESS - BEGINNING

- Transparency
 - Be transparent and understanding about the challenges experience by your team as you combine areas of expertise.
- Reassurance
 - Listen
 - Respond
 - Support



AUDITOR



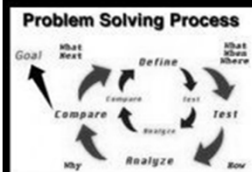
What my friends think I do.



What my mom thinks I do.



What society thinks I do.



What my boss thinks I do.



What I think I do.



What I actually do.

REMIND YOUR TEAM TO

.....

Embrace their inner compliance nerd~



Perception vs. Reality

THANK YOU!

