Building a Physician Practice Audit Program (That Your Physicians Will Appreciate!)

HCCA Compliance Institute 2020 Mary Curry and Sarah Couture



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### INTRODUCTION

# Speakers



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Springfield, IL

#### BILLING AND CODING AUDITING; MANAGING AUDIT TEAMS; PROVIDER EDUCATION

- · Certified Professional Coder and Certified Medical Auditor
- Certifications: CPC, CPMA, CEMA
- Billing Compliance expertise in academic medical center, physician practice.
- Over 20 years in the Healthcare industry in billing, coding, investigations and auditing.



Sarah Couture Senior Director at Ankura Chicago, IL

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#### HEALTHCARE COMPLIANCE; RESEARCH BILLING COMPLIANCE; CLINICAL AND MEDICAL NECESSITY AUDITING

- Registered Nurse
- Certifications: CHC, CHRC
- Compliance program expertise in academic medical center, hospital, physician practice, pharmacy, long-term care, and research settings, including program development and assessment, risk assessment, interim staffing, and training.
- Over 18 years experience in hospital, AMC, physician practice, pediatric, skilled nursing facility, Federally Qualified Health Center, and free clinic settings.

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INTRODUCTION		
How Can Your Physician Audit Progra	Im Make the Most Impact?	
Focus on <u>relationship</u> with providers		
Base the audit plan on risk		
Base the audit plan on <u>risk</u>		
Collaborate with <u>administration</u>		
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RISK ASSESSMENT - THE FOUNDATION OF YOUR AUDIT PLAN		
Risk Assessment - The Foundation o	F Vour Audit Plan	
Risk Assessment - The Foundation of	four Audit Flatt	
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Why is Auditing Based on Risk So	
"The starting point for a prosecutor's evaluation	on of whether a company has a well-
designed compliance program is to understar	nd the company's business from a
commercial perspective, how the company ha	s identified, assessed, and defined its risk
profile, and the degree to which the program	devotes appropriate scrutiny and
resources to the spectrum of risks."	
U.S. Department of Justice Criminal Division Evaluation	on of Corporate Compliance Programs
https://www.justice.gov/criminal-fraud/page/file/93750	1/download
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# Why is Auditing Based on Risk So Important?

- More effective at preventing Fraud, Waste, and Abuse
- May be helpful if wrongdoing does occur

"Prosecutors may credit the quality and effectiveness of a risk-based compliance program that devotes appropriate attention and resources to high-risk transactions, even if it fails to prevent an infraction in a low-risk area."

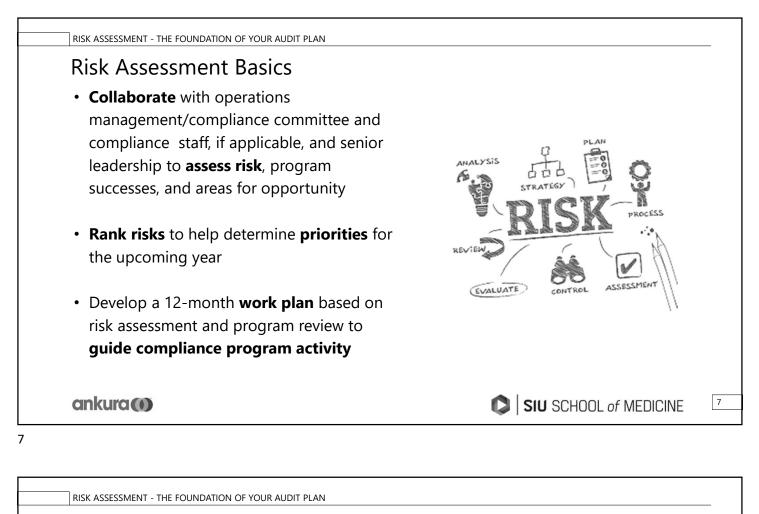
--U.S. Department of Justice Criminal Division Evaluation of Corporate Compliance Programs

- Payors are auditing based on risk! DATA-MINING
- Ensures appropriate utilization of audit resources

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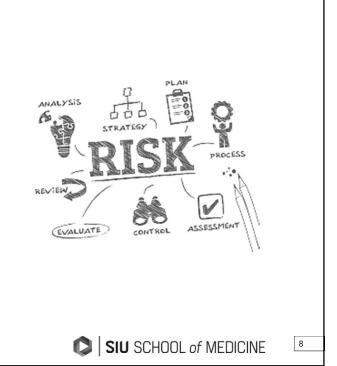
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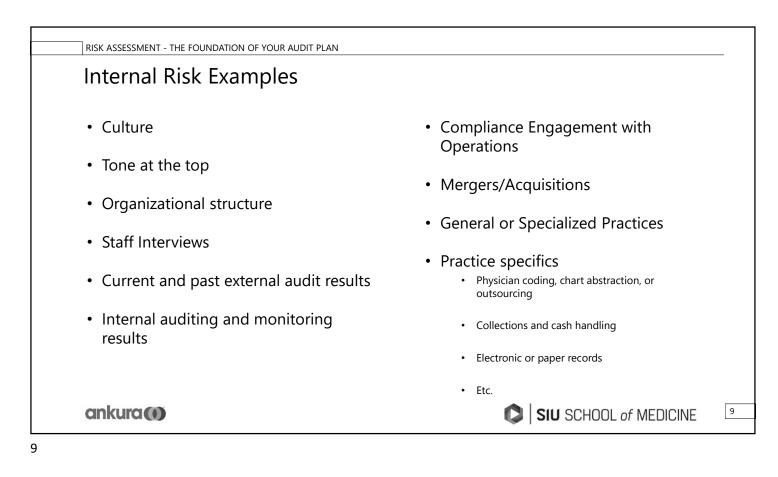


## **External Risk Examples**

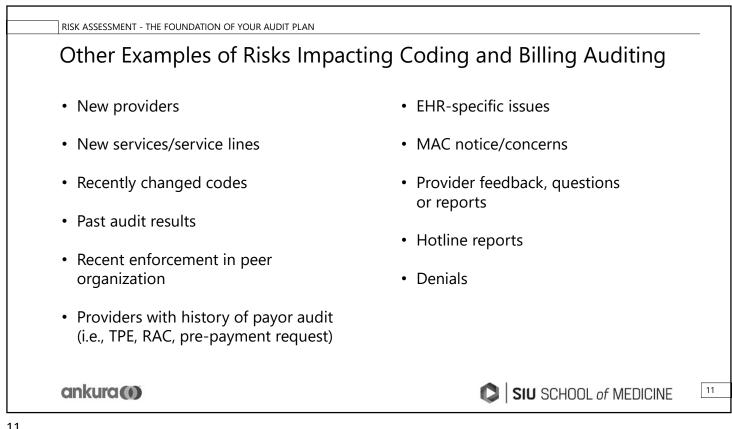
- OIG Compliance Program Guidance
- CMS Conditions of Participation
- OIG Work Plan
- Industry and regulatory changes
- Enforcement actions
- Relevant regulations
- Advisory Opinions
- Special Advisory Bulletins

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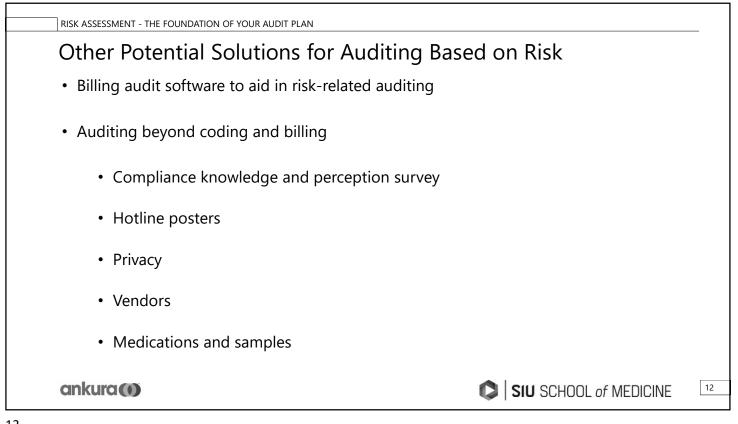




RISK ASSESSMENT - THE FOUNDATION OF YOUR AUDIT PLAN	
SIU Medicine Not-For-Cause/Ro	utine Provider Audits
<ul> <li>Teaching physician guidelines/SOM policy</li> </ul>	• Modifier 24, 25, 59
Over/under coding	<ul> <li>Incident to/Nurse visits</li> </ul>
	Split shared
<ul> <li>Duplicate payment/billing</li> </ul>	NCDs/LCDs
Unbundling	• ICD-10
Billing provider	
• Orders	<ul> <li>Time-based coding</li> </ul>
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STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN		
Structuring a Best Practice Physicia	n Practice Audit Plan	
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STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN Physician Audit Plan Overview		
New Provider Orientation		
Audit Program stops		
Addit Flogram steps		
Audit Program steps		

- Audit
- Peer/supervisor review
- Draft (formal report)
- Acknowledgment form
- Education (individual provider and departmental)
- Post review follow-up

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STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN	
New Provider Orientation	
<ul> <li>All billing providers must attend New bill for their services</li> </ul>	Provider Orientation before they can
<ul> <li>Topics discussed:</li> <li>How to level an E/M</li> <li>Teaching Physician Guidelines</li> <li>Incident-to and Split/Shared Guidelines</li> </ul>	delines
<ul> <li>Providers are then audited within 60 d they can begin to submit charges/bill</li> </ul>	lays of New Provider Orientation before
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STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN	
Audit Program Steps: Entrance	e Conference
• Reviews objectives and scope, and pro	ovides metrics from billing risk software

- Garners buy-in from division chief and department administration for upcoming
- Garners buy-in from division chief and department administration for upcor division review
- Informs division chief and department administration of items that will be included in the audit (i.e., teaching physician guidelines, incident-to, procedures, etc.) and benchmarked billing data
- Opens lines of communication with the division
- Provides an opportunity for the division to state other concerns, if any, that they would like included in the review

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Audit Program Steps- The Audit	
<ul> <li>Teaching physician guidelines/SOM policy</li> </ul>	• Modifier 24, 25, 59
	<ul> <li>Incident to/Nurse visits</li> </ul>
Over/under coding	
	Split shared
<ul> <li>Duplicate payment/billing</li> </ul>	NCDs/LCDs
Unbundling	
5	• ICD-10
Billing provider	
	<ul> <li>Time-based coding</li> </ul>
Orders	
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STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN	
Audit Program Steps- Peer/Supervisor Review	
<ul> <li>Peer and supervisor review of auditor's findings</li> </ul>	
• Ensures that more than one person fully reviews the documentation for accuracy	
• Can be a 1- or 2-step peer review process, depending on proficiency of auditor	
• Final supervisory review before the draft report is sent to the provider	
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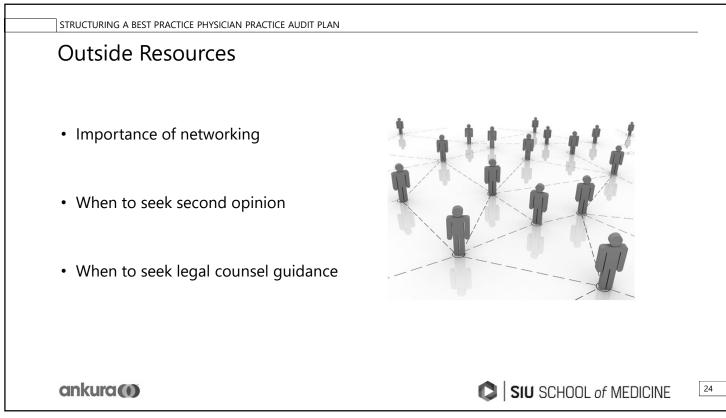
	STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN
	Audit Program Steps- Draft (Formal Report)
	<ul> <li>Summary of the charges reviewed and any errors found</li> </ul>
	If there are findings, the draft provides detailed background on the findings
	noted
	<ul> <li>i.e., detailed explanations as to what made the charges over-coded (what was missing)</li> </ul>
	(what was missing)
	<ul> <li>Provides recommendations for improvement to the provider</li> </ul>
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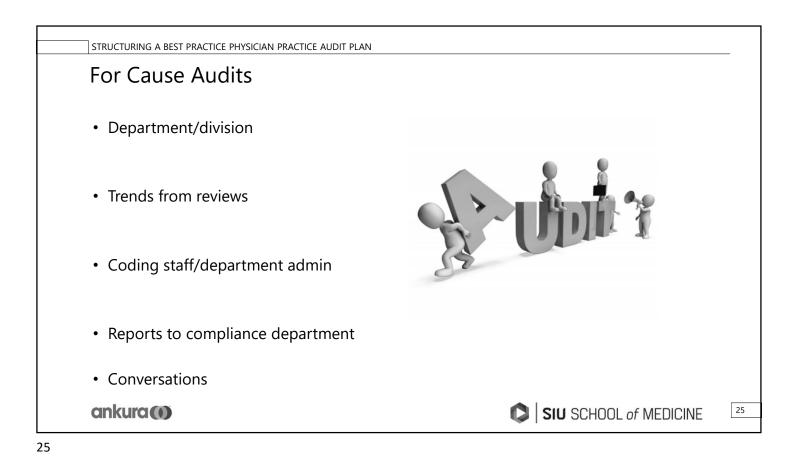
STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN	
Audit Program Steps- Acknowledgement Forr	n
<ul> <li>Acknowledgement that the audit was received by the provide</li> </ul>	der
<ul> <li>Acknowledgement that charges will be adjusted upon comp</li> </ul>	pletion of the review
<ul> <li>Gives the provider the opportunity to dispute any findings to is finalized, or to request a meeting to discuss</li> </ul>	pefore the audit report
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Audit Program Steps- Educatior	- Provider and Department
Addit Flogram Steps- Education	I- FIONUEI and Department
<ul> <li>Scheduled meeting with provider and co in the audit</li> </ul>	mpliance auditor to discuss specific errors
<ul> <li>Can be required by compliance based or provider</li> </ul>	n audit results, or can be requested by the
<ul> <li>Compliance provides detailed education providing Billing Compliance Alert education</li> </ul>	
<ul> <li>Billing Compliance team has developed on frequently seen errors and/or know</li> </ul>	d 25+ different educational handouts based n risk areas
Provides for consistent and documente	ed guidance to providers
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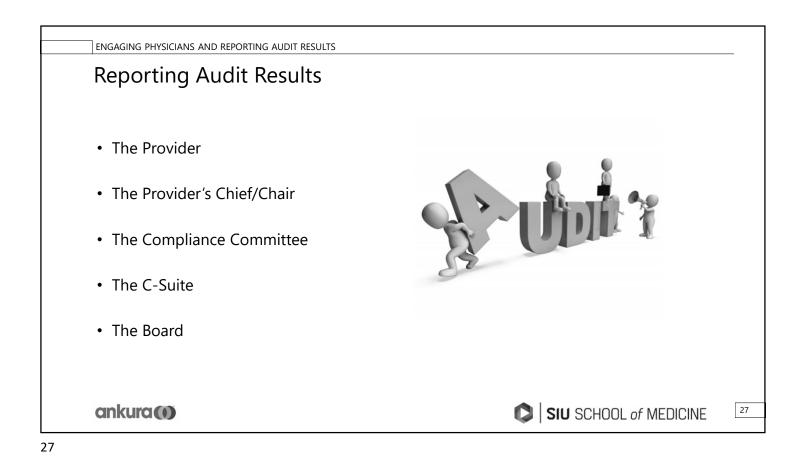
<ul> <li>Smoking Cessation</li> <li>Hospital Day Discharge Management</li> <li>Medical Nutrition Therapy</li> <li>Incident To</li> <li>Split-Shared Visits</li> <li>Annual Wellness Visit</li> <li>Initial Preventative Physical Examination Visits</li> <li>Critical Care</li> <li>99211 – Nurse Visits</li> <li>GC vs. GE Modifier</li> <li>GC vs. GE Modifier</li> <li>Scribe Guidelines</li> <li>Advance Care Planning</li> <li>Consult vs. Referral</li> <li>Chronic Care Management</li> <li>Electrocardiogram (ECG/EKG) Documentation</li> <li>Intensive Behavioral Therapy for Obesity</li> <li>Modifier 25 Fact Sheet</li> <li>Modifier 52Fact Sheet</li> </ul>	Audit Program Steps- Education Sample Topics	Diming compliance / lierts
Diabetic Self-Management Training     Modifier 52Fact Sheet	<ul> <li>Smoking Cessation</li> <li>Hospital Day Discharge Management</li> <li>Medical Nutrition Therapy</li> <li>Incident To</li> <li>Split-Shared Visits</li> <li>Annual Wellness Visit</li> <li>Initial Preventative Physical Examination Visits</li> <li>Critical Care</li> </ul>	<ul> <li>Scribe Guidelines</li> <li>Advance Care Planning</li> <li>Consult vs. Referral</li> <li>Chronic Care Management</li> <li>Electrocardiogram (ECG/EKG) Documentation</li> <li>Intensive Behavioral Therapy for Obesity</li> </ul>

STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN		
Audit Program Steps- Post Review Follo	ow Up	
<ul> <li>During educational session, provider is informed th will be conducted</li> </ul>	at a follow-up review	
<ul> <li>The follow-up review focuses only on the errors nor review</li> </ul>	ted in the previous	
• Conducted within 30 days of date of education		
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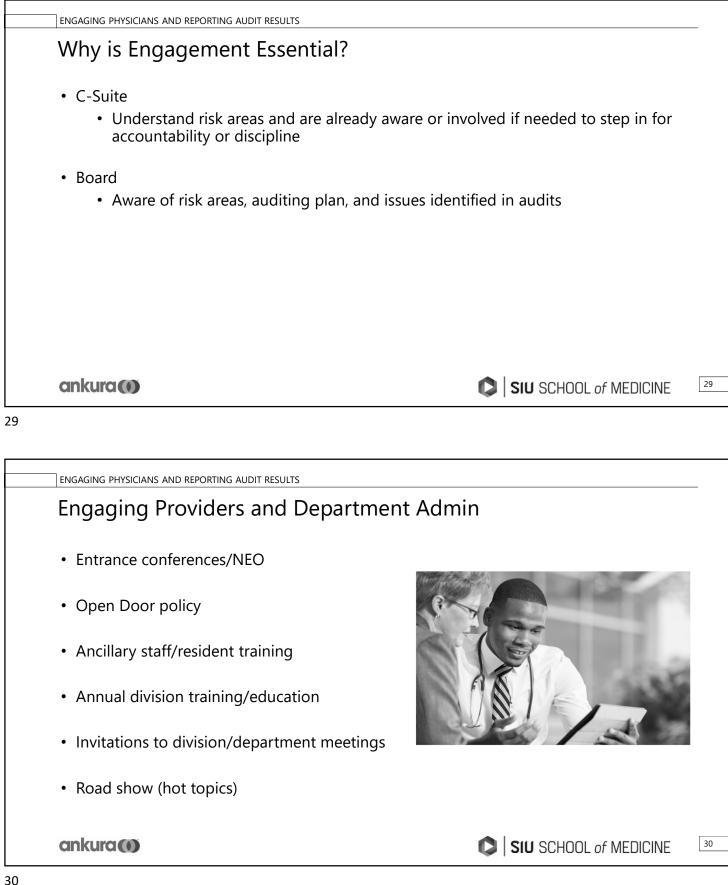




ENGAGING PHYSICIANS AND REI	ORTING AUDIT RESULTS	
Engaging P	hysicians and Reporting Audit Results	
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ENGAGING PHYSICIANS AND REPORTING AUDIT RESULTS	
Why is Engagement Essential?	
Providers	
<ul> <li>Risks are "on their radar" so watching for issues</li> </ul>	
<ul> <li>Education and auditing are desired to help prevent problems</li> </ul>	
<ul> <li>Can help decrease anxiety in cases of external audit</li> </ul>	
<ul> <li>More likely to reach out to compliance department if issues or concerns or when</li> </ul>	
they have questions	
Department administrators	
<ul> <li>More likely to come to compliance department for advice/guidance BEFORE they</li> </ul>	
start a new initiative	
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	STRUCTURING A BEST PRACTICE PHYSICIAN PRACTICE AUDIT PLAN		
	Tips For Engagement		
	<ul> <li><u>Right kind</u> of coding auditors</li> </ul>		
	• <u>Prioritize</u> the relationship(s) during the audit		
	Make your team <u>available</u>		
	• Use <u>onboarding</u> to start the Compliance Program's relat	ionship with physicians	
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<ul> <li>Physician and administration engagement is key</li> </ul>		
Auditing essentials		
<ul> <li>Base audit plan on risk</li> </ul>		
Conclusion		
CONCLUSION		



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