

TITLE: Compliance Review Action Plans

PURPOSE: When billing compliance reviews are finalized, the Office of Compliance (“Compliance”) requests that the departmental compliance leader collaborate with the business group, applicable clinic administrators, and other relevant practice plan staff to develop an action plan which addresses areas of non-compliance. The purpose of the action plan is to implement appropriate measures to minimize recurrence of any identified issue(s). There are many forms of appropriate action measures which include: creating or revising documentation templates, educating providers and/or billing staff on regulatory requirements, implementing system edits to allow for prospective review by a qualified coder, etc.

POLICY: The Action Plan is to be submitted to Compliance within thirty (30) days from review finalization.

When routine compliance reviews prompt more in-depth reviews, a self-disclosure of identified overpayments is warranted. Compliance must report when the improvement measures were implemented when disclosing the findings of a self-audit to government payers. The date when the action item took place also provides Compliance with a definitive end date for the charge universe included in the self-audit. It is important to understand that the longer it takes to implement appropriate improvement measures, the higher the risk of both recurrence and negative financial impact.

PROCEDURE: To ensure that identified compliance issues are being addressed, the Office of Compliance requires that the following be included in the action plan:

1. The date the finalized audit results were distributed to each provider.
2. At a minimum, the top errors identified in the Final Billing Compliance Audit Results Summary Memorandum (issued at the conclusion of reviews) will be addressed as well as those issues necessitating an additional (second level) review of any provider.
3. For each issue being addressed, the plan will specify the measure(s) implemented to curtail the issues(s), the date(s) of implementation, and the party (ies) responsible for implementing.
4. When educational sessions are held, the plan will note the date the session was held; the name of the provider/staff attending the educational session; the subject matter of the educational session; and the name of the individual who provided the educational session. If the corrective action plan calls for the provider/staff to complete additional Module A or Module C on-line training (i.e., in addition to annual requirements), the Module and the date completed will be included in the corrective action plan.

5. Applicable billing system edits/rules implemented as a corrective action measure will include the edit/rule specifics, the party responsible for implementation, and the date implemented.
6. Any changes to documentation templates will be reviewed by the Office of Compliance prior to implementation and the corrective action plan will contain the date the new/revised template was implemented.

When future reviews are performed, Compliance will re-evaluate the effectiveness of the action plan. If significant, recurring issues identified, Compliance may require more stringent measures to curtail problematic trends.

Compliance has created a standardized Excel spreadsheet that may be used to document improvement efforts.

REFERENCES: U.S. DOJ Criminal Division. Evaluation of Corporate Compliance Programs (1) (D). April 2019.

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