

# MU Health Care Compliance Report

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# Corporate Integrity Agreement

## Reporting Period 3 Annual Report

# CIA Reporting Period 3

- July 1, 2018 – June 30, 2019
- CIA Compliance Obligations
  - Outlined in Activities Summary and Completion Tracking Document (see handout)
  - Outline of materials reviewed during Board and/or Health Affairs Committee meetings (see handout)
  - All items completed on or before 30 June
  - Claims Review completed as of 28 August

# CIA Reporting Period 3

- Compliance Program Oversight
  - Board of Curators Health Affairs Committee
    - 4 presentations (*quarterly*)
  - Executive Compliance Committee (ECC)
    - 11 meetings (*all months, except November*)
    - Established regular reports from compliance units
      - Corporate Integrity Agreement Updates
      - Compliance Reports
      - Risk Assessment and Work Plans

# CIA Reporting Period 3

- Policy Review
  - COI
    - updated in collaboration with the MU Office of Research (program owners)
    - included process flow, job titles, committee names, portal links and gift values
    - training provided to leadership during live presentations by the Office of Research COI staff
  - Coding Compliance Plan
    - updated in collaboration with UP and departmental coding staff
    - included implementation of quality reviews and metrics; criteria for measuring coder performance; reporting schedule; and regular reports to OCC.
    - training conducted via live group sessions and as requested
  - Other
    - Updated name for Integrity & Accountability Hotline
    - Eliminated “Clinical Trials or Research Involving an Investigational Device Exemption (IDE)” and reassigned pieces to appropriate departments
    - Code of Conduct – minor editorial changes

# CIA Reporting Period 3

- Training and Education
  - No substantive changes to the training plan for RP3
  - 100% of Covered Persons completed training modules by 30 June, or were appropriately documented with exceptions\*
    - *\*tracking for completion upon return*
  - Continued live training session to educate leaders (managers and above) on the Code of Conduct
  - Ad hoc and focused training performed as identified per compliance reviews
    - Specifics contained in each report issued

# CIA Reporting Period 3

- Claims Review
  - Completed 28 August
  - Results Summary
    - Incorrect Coding Errors: 33/500; 6.6%
    - Documentation Errors: 7/500; 1.4%
    - Medically Necessary Errors: 0/500; 0%
    - Error Rate (overpayments/total paid claims): **3.58%**
      - Repayments being processed, but no extrapolation necessary
  - IRO Certification of Independence received

# CIA Reporting Period 3

- **Risk Assessment and Audit/Work Plan Results**
  - No changes to risk assessment process for RP3
    - Collaboration with UM System Internal Audit Services
    - Interviewed stakeholders from hospital and academic units
  - **Compliance Work Plan**
    - Topics included 340B; Primary Care Exception; Fellows Internal Moonlighting; Extended Women's Health Services; Student-Athlete Chaperones for Medical Care; Software Edits; JW Modifier; IRO/External Auditor Claims Reviews; Telehealth; Transcranial Magnetic Stimulation; Allied Health Professionals
  - **Internal Audit Work Plan**
    - Topics included Dep't. of Surgery Financial Processes; Vendor Master File Management; Controlled Substances Diversion Prevention; OCC Leadership Transition; Management of BAAs; Medical Staff Credentialing and Privileging



# CIA Reporting Period 3

- Reporting Outlets
  - Integrity and Accountability Hotline
    - FY19: 58 assigned to OCC
      - Transition to single hotline occurred Aug 2018
  - Direct Reporting to OCC
    - FY19: 170
  - Patient Safety Network (PSN)
    - FY19: 17 assigned to OCC

# CIA Reporting Period 3

- Exclusion Screening
  - Monthly checks conducted
    - Vendor software; Internal staff investigate potential matches
  - All issues cleared with no findings
- No on-going investigations or legal proceedings to report as part of the RP3 Annual Report

# CIA Reporting Period 3

- Aggregate Overpayments
  - Identified and addressed by fiscal teams during the year
    - Professional Services: \$267,641.84
    - Facility Services: \$1,698.04
- Reportable Events under CIA
  - FY15 Cost Report audit indicated overpayment
    - \$627,962.00
  - Reporting Period 2 Claims Review results; extrapolated overpayment
    - \$429,873.00

# CIA Reporting Period 3

- Certifications
  - All received
    - Executive Vice Chancellor for Health Affairs
    - Chief Compliance Officer
    - Management Personnel
      - Certifications of compliance must be made by management level personnel as identified in the CIA

# CIA Reporting Period 3: Resolution Language

*“The Health Affairs Committee of the Board of Curators of the University of Missouri has made a reasonable inquiry into the operations of the Compliance Program of MU Health (sometimes referred to as University of Missouri Health System or UMHS) including the performance of the Chief Compliance Officer and the Compliance Committee. Based on on its inquiry and review, the Health Affairs Committee has concluded that, to the best of its knowledge, UMHS has implemented an effective Compliance Program to meet Federal health care program requirements and the obligations of the Corporate Integrity Agreement.”*