Key Healthcare Audit & Monitoring Tools for an Effective Compliance Program

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Topics

› Overview
› Cost of Manual Compliance Programs
› Effective Lines of Communication
› Enforce Standards
› Internal Audit & Monitoring
› Corrective Action Plans
› Key Healthcare Audit & Monitoring Tools
› Compliance Solutions – Build vs. Buy
› Takeaways
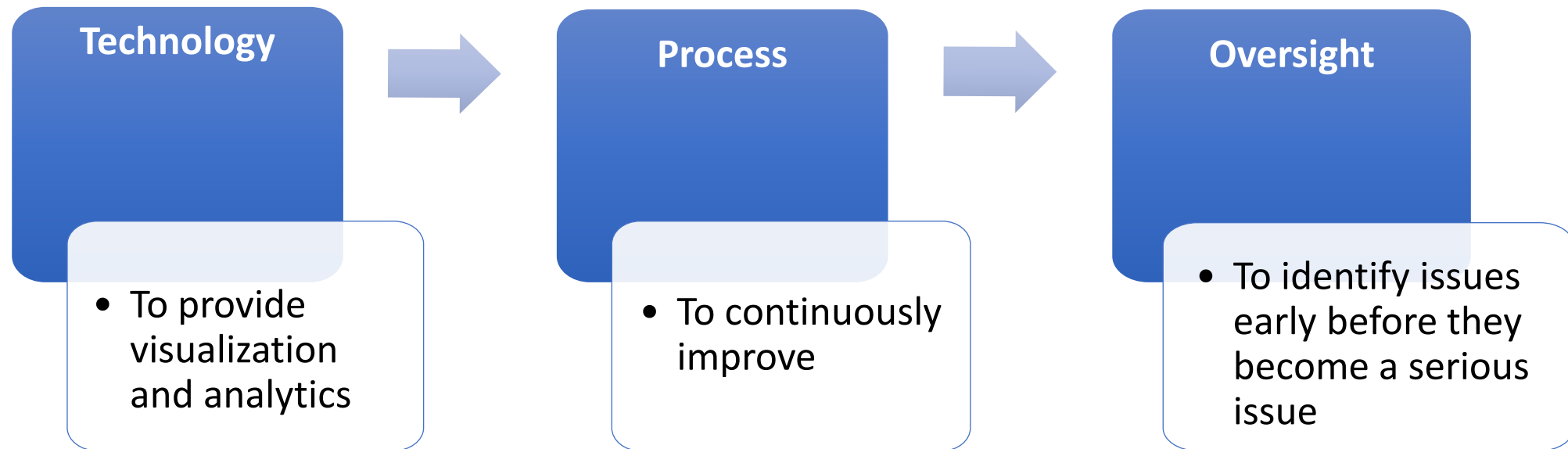› Compliance Trivia
› Q&A

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Overview

› Audits and continuous monitoring play a vital role in helping healthcare organizations identify and manage compliance risk areas

› Healthcare audit and monitoring tools provide health plans and organizations the proper resources to implement effective ongoing audit and monitoring processes

› Auditing and monitoring are critical for healthcare organizations to sustain compliance with federal and state rules and regulations

› Real-time automation of internal checks and reviews helps improve compliance program operations

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Cost of Manual Compliance

› One of the most arduous tasks healthcare organizations undertake is the manual, enterprise-wide creation and maintenance of an effective compliance program, especially those with first-tier, downstream and related (FDR) entities

› Many healthcare payers and providers have multiple divisions and departments, and each of them often operate as independent, siloed teams that don't use standardized tools to create an organized, centralized system of record

› Any change to ever-evolving CMS and state-level regulations requires integrated updates across the entire organization

› Noncompliance can result in fines and other potentially punitive actions

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Effective Lines of Communication

› Communicate regulatory requirements to foster an enterprise-wide culture of compliance

Technology	Process	Oversight
• To provide visualization and analytics	• To continuously improve	• To identify issues early before they become a serious issue

› Nurture greater interdepartmental collaboration

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Enforcement Standards

› Reliance on the quality of an organization's communications channels

› Outline disciplinary guidelines for issues of noncompliance

› Healthcare standards must be based upon the environment and regulations within which they operate

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Compliance Trivia Question 1

Detecting, correcting, and preventing fraud, waste, and abuse requires collaboration between:

A. **Beneficiaries**
B. **You**
C. **Providers of services**
D. **State and federal agencies**
E. **All the above**

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Internal Audit & Monitoring

The Health Care Compliance Association and the Association of Healthcare Internal Auditors pooled their expertise and jointly developed the **Seven Components Framework**.

1. Perform a risk assessment and determine the level of risk

2. Understand laws and regulations governing those areas to be monitored and possibly audited

3. Obtain and/or establish policies for specific issues and areas, define accountability in the policies, and develop procedures to support the policies

4. Educate on the policies and procedures and communicate awareness of key requirements

5. Monitor compliance with the laws, the Joint Commission on Accreditation of Healthcare Organizations guidance, and the organization's policies and procedures

6. Audit the highest risk areas

7. Re-educate staff on the law, policies and procedures, issues identified in the audit, and corrective actions planned or taken

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Corrective Action Plans

› For a corrective action plan (CAP) to be successful, healthcare organizations must be able to:

- Define the causes and effects of noncompliance
- Develop a management architecture to address
- Administer the CAP, and the compliance team must approve the approach

› Successful mitigation of issues include:

- Assigning individuals or teams to minimize a violation's impact
- Developing action steps with timelines to resolve the violation
- Providing progress updates to the compliance team to ensure timely resolution

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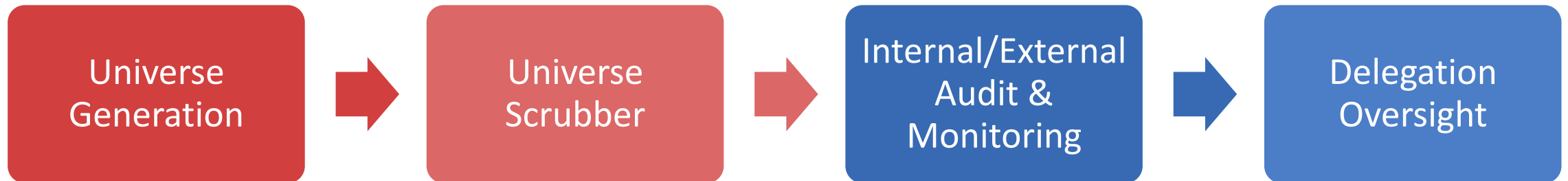# Compliance Solutions

Build vs. Buy

BUILD	BUY
› Customization of internal processes and procedures **BUT** time to deploy such solutions is time-consuming and costly › Saved costs on outsourcing to a third party **BUT** system data could be based on outdated information and requires staffing to systematically oversee and update requirements	› Healthcare compliance teams are now able to transform the effectiveness of their GRC processes and **ensure continuous compliance** through efficient use of real-time data › Robust compliance technologies that empower compliance and operational teams to move from a reactive to a **proactive environment** are available today › Vendor monitoring of regulatory updates provides an additional layer of oversight

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Key Healthcare Audit & Monitoring Tools

CMS Mock Audits

One of the most important activities that health plans can perform to get ready for CMS Program Audits is practice universe pulls and Mock CMS Audits.

Inovaare can assist the organization with preparation of universes, training of staff to present during the CMS Audits and provide subject matter expertise in each of the CMS Audit areas.

Universe Generation	→	Universe Scrubber	→	Internal/External Audit & Monitoring	→	Delegation Oversight

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Takeaways

› Manual compliance programs are less effective when relying on old data

› Despite inefficiencies, many health plans still execute compliance programs in silos with inconsistent data

› To be truly compliant with current regulations, health plans need to source the most current data

› Without real-time data, auditing, monitoring, and reporting results are suspect

› Forward-looking plans currently sustain continuous compliance by leveraging real-time systems

Compliance Trivia Question 2

A party that enters into a written arrangement, acceptable to CMS, with a Plan Sponsor to provide administrative services or health care services for a Medicare-eligible individual under the MA or Part D programs is called a:

A. Related Entity
B. Downstream Entity
C. First-Tier Entity
D. Plan Sponsor

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Thank You

Please feel free to reach out to us with any questions or requests at:

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