

HCCA Quality of Care Compliance Conference

October 11-13, 2009
Philadelphia, PA

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Quality of Care Conference

MEDICARE CONDITIONS OF PARTICIPATION ,
QUALITY, and SCOPE OF PRACTICE

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Key Principles Related to Compliance, Quality and Scope of Practice

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Governance Roles and Responsibilities

- A sound compliance program should provide a reasonable basis and a level of assurance to officers and directors in fulfilling their fiduciary duties
- In the healthcare industry, we are in an era with more emphasis on quality and patient safety; oversight of quality also is becoming recognized as a fiduciary responsibility of directors.

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Governance Roles and Responsibilities

- The Medicare Conditions of Participation, National Patient Safety Goals, and laws that regulate health care providers may affect quality.
- “Quality” can briefly be described and validated through programs and procedures to identify and reduce risks:
- Credentialing programs
- Performance measures
- Compliance indicators, including:
 - * Accuracy of coding and completeness of documentation
 - * Adherence to ‘medical necessity’ guidance from payors

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Medicare Conditions of Participation and Quality

- The “Conditions of Participation” (COP) are imposed on participating Medicare providers by the agreement signed between a provider and the Centers for Medicare and Medicaid Services (CMS)
- Thus, the COPs are the primary method for ensuring provider compliance with numerous requirements

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- This session will focus on quality and techniques for compliance with quality related conditions and events.
- Among those requirements are Core Measures and National Patient Safety Goals (built into the Joint Commission on Accreditation of Hospitals program)

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Joint Commission

Hospital Accreditation Program
2010: National Patient Safety Goals (NPSGs)

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- NPSGs have become more specific and detailed over time
- Elements of Performance (Eps) are tied to each NSPG

Examples:

NPSG .01.01.01

Use at least two patient identifiers when providing care, treatment, and services

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NPSG .01.03.01

Eliminate transfusion errors related to patient misidentification

NPSG .02.03.01

Report critical results of tests and diagnostic procedures on a timely basis

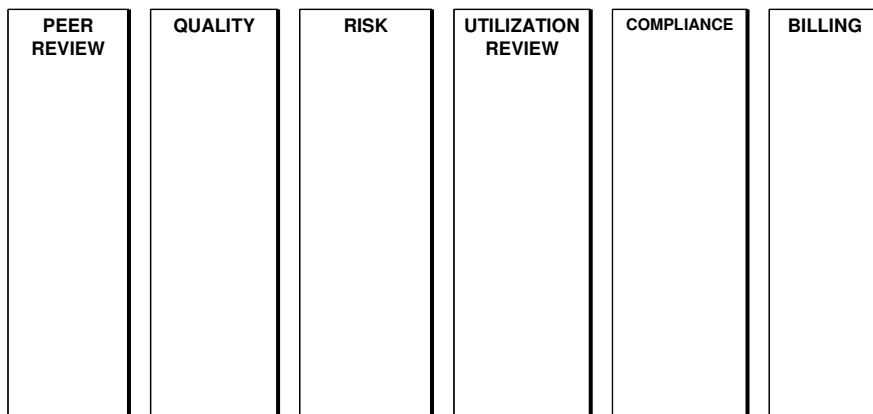
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Policies and Procedures Related to Quality Requirements

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Compliance and Quality Related Activities Under Current Structures

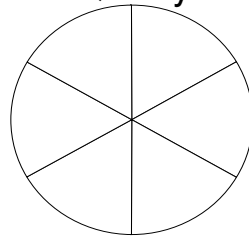
SILO Approach



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Recommended Solutions

■ Integrate Quality and Compliance



<input type="checkbox"/>	Quality
<input type="checkbox"/>	Risk
<input type="checkbox"/>	Utilization Review
<input type="checkbox"/>	Billing
<input type="checkbox"/>	Compliance
<input type="checkbox"/>	Peer Review

Be careful to maintain the privilege

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- Bill holds are critical
- Quality and risk management, compliance officer and legal determine accounts to write-off; use a case-by-case approach
- Write-off transaction codes for hospital acquired conditions (HACs) and “never events” should be unique in order to tract the amounts individually and as a combination
- Demonstrates impact quality has on bottom line

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Present on Admission (POA) Reporting and Monitoring

- Develop a report that tracks all indicators from claims – include all payors
- Audit and monitor those with “N” and those with “U”
- Develop documentation improvement strategies for “U”
- Compare cases with “N” status indicators and “Y” indicators to identify best practices in prevention

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POA Link to Never Events (cont.)

- POA indicators signify if a diagnosis or condition was present upon the patients admission to the hospital
 - Medicare will not pay for conditions reported with N or U, if it is the only CC or MCC on the claim
- Y = Present at time of inpatient admission
N* = Not present at time of inpatient admission
U* = Unable to determine based upon documentation
W = Condition is clinically undetermined
1 = Unreported/Exempt from POA

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Process Improvements

Proactive steps to prevent an event:

- Designate “never events” response team; include physician leadership, compliance officer, nursing leadership, operations management, quality and risk management, legal, HIM and Finance (allow for ad hoc involvement)
- Revisit sentinel events policies; assure all “never events” are included
- Assure policy addresses record security and confidentiality and places a hold or flag on the patient’s account

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Process Improvements (cont.)

- Post policies and response team contacts on nursing units/OR areas, etc.
- Increase awareness of “never events,” POA, HACs among all staff – include as part of new hire orientation – focus on patient safety and prevention
- Assure all associates are aware of reporting “never events,” as soon as possible, to enact “never event” response team
- Assure appropriate forms or occurrence reports are updated and available for use pursuant to policies and procedures

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Process Improvements (cont.)

If event occurs:

- Establish time frames for investigation and report completion
- Perform a root cause analysis
- Assure event is documented in the medical record
- Have a discussion with the patient
- Develop action plan to avoid recurrence

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Scope of Practice

Practitioner Type	Credentials	Educational Background	Certification	Licensed Y or N	Licensure Renewal Requirements	Approving Organization	CEU and Recertification Requirements
1 Medical Doctor	MD	Doctor of Medicine	Exam thru ECFMG (Educational Commission for Foreign Medical Graduates), USMLE (United States Medical Licensing Examination)	Y	Annually	KY Board of Medical Licensure	60 CEU / 3 years + AMA, AOA, etc.
2 Doctor of Osteopathy	DO	Doctor of Osteopathic Medicine	Exam thru NBOME (National Board of Osteopathic Medical Examiners)	Y	Annually	KY Board of Medical Licensure	60 CEU / 3 years + AMA, AOA, etc.
3 Dentist	DMD or DDS	Doctor of Medical Dentistry or Doctor of Dental Surgery	Specialty varies depending on scope of practice	Y	Annually	KY Board of Dentistry	30 CEU, 20 scient and 10 from local, state, regional or national meetings
4 Advanced Registered Nurse Practitioner	ARNP	Masters or Post-Masters Certificate (those who were grandfathered in)	Exam thru a national certifying organization such as AANP (American Academy of Nurse Practitioners) or ANCC (American Nurses Credentialing Center)	Y (RN)	Maintain current RN license (renew every year, ARNP may be renewed annually along with RN)	KY Board of Nursing	14 CEU or national certification + 5 ho pharmacology
5 Certified Nurse Specialist	CNS	Masters or Post-Masters Certificate	Exam thru ANCC (American Nurses Credentialing Center), CRRN-A (advanced practice rehabilitation nurse certification will end June 30, 2009), CCNS, etc.	Y (RN)	Maintain current RN license (renew every year, CNS may be renewed annually along with RN)	KY Board of Nursing	14 CEU or national certification + 5 ho pharmacology
6 Certified Registered Nurse Anesthetist	CRNA	Masters or Post-Masters	Exam thru CCNA (The Council on Certification of Nurse Anesthetists)	Y (RN)	Maintain current RN licensure (renew every year, CRNA may be renewed annually along with RN)	KY Board of Nursing	14 CEU or national certification + 5 ho pharmacology

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Thank you!

Questions?