

How to be Prepared for a CMS Audit



Margaret Drakeley
Director of Compliance

Kelsey Care Advantage

June 24, 2014

KelseyCare Advantage
★★★★★

Presentation Agenda

1. Introduction - Are you ready for an audit?
2. Compliance Department
3. CMS Audit Notice
4. Webinar and On-site Portions of the Audit
5. Best Practices

Introduction

- Company overview of our MAPD HMO plan
- Compliance Department coordinates the audit requests and uploads information to designated websites
- Majority of requested documents are for the Compliance Program audit

Compliance Department

- Compliance interacts with all departments.
- Department motto:
 - *Compliance is everyone's responsibility.*
- Have an Open Door policy where no question is dumb.
- *"We are in everyone's business."*
- Our goal:
 - *Stay ready so we don't have to get ready.*

Compliance Program

- Getting ready for a CMS audit starts with the Compliance Program.
- Workflows, oversight audits and corrective action have to be in place to successfully handle an audit.
- You need the detail to back up your Compliance Program and policies and procedures. Your program needs to be robust and able to detect areas needing improvement.

Compliance Workflows

- Complete the CMS Self Assessment tool as it will show gaps in your programs.
- Monitor and document employee, related entities and FDR Educational training.
- Track Code of Conduct reviews and dates.
- Maintain a computer system for FWA, audit activities, department meetings, OIG checks and HPMS memo distribution.

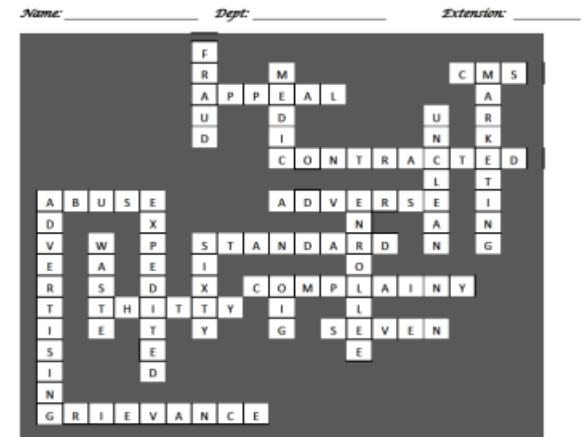
Compliance Self Assessment

ATTACHMENT V
MEDICARE ADVANTAGE AND PRESCRIPTION DRUG COMPLIANCE PROGRAM EFFECTIVENESS
SELF-ASSESSMENT QUESTIONNAIRE

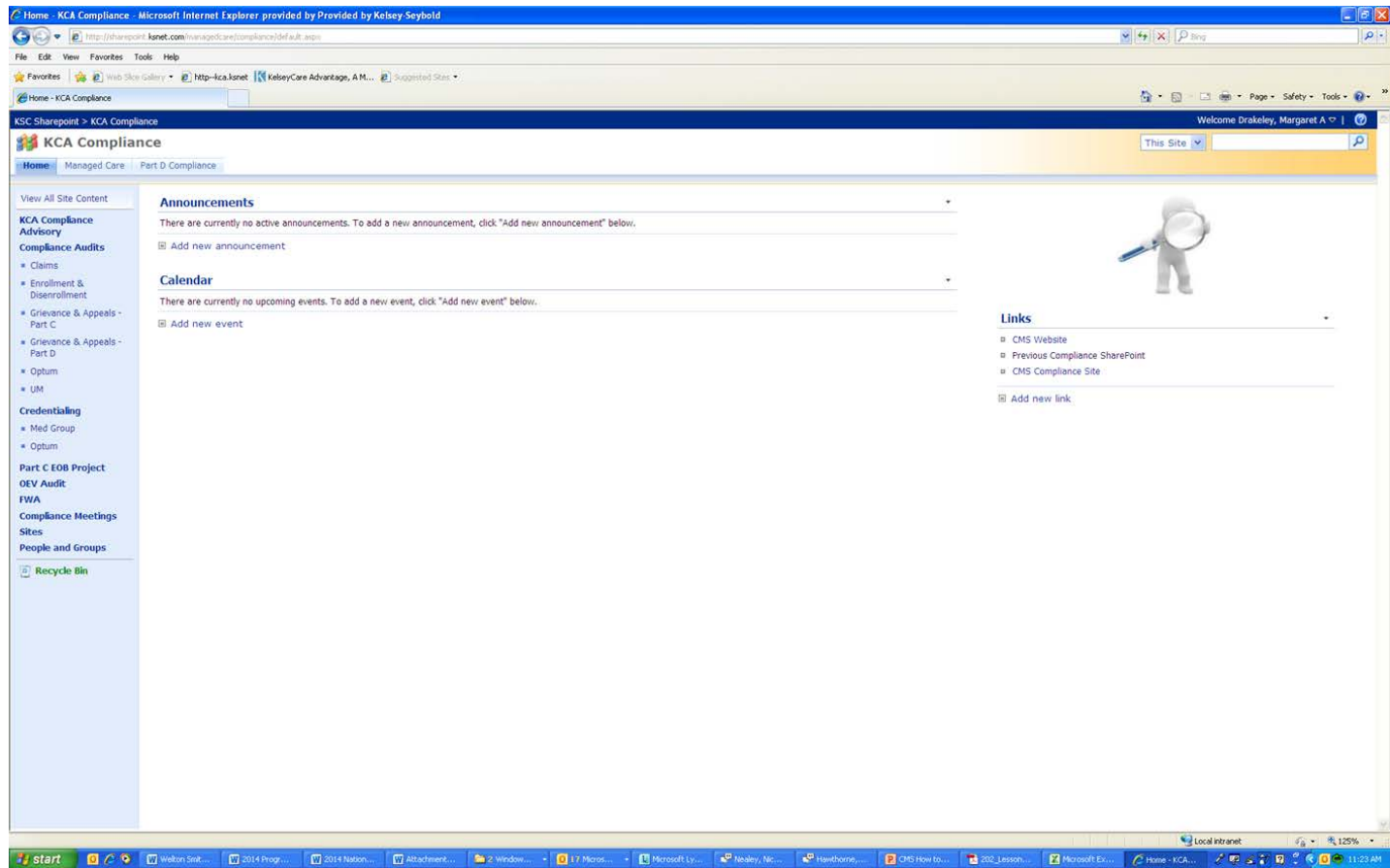
Element I: Written Policies and Procedures and Standards of Conduct <i>42 CFR §422.503(b)(4)(vi)(A) and 42 CFR §423.504(b)(4)(vi)(A)</i>					
	Description	Yes	No	Documentation	Responsible Party or Department
D.	Provide guidance to employees and others on dealing with potential compliance issues?	Y		Code of Conduct	Compliance
E.	Identify how to communicate compliance issues to appropriate compliance personnel?	Y		Code of Conduct Compliance Website Compliance Newsletter Employee Education including Compliance Week	Compliance
F.	Describe how potential compliance issues are investigated and resolved by the organization?	Y		Code of Conduct Compliance Policies	Compliance
G.	Include a policy of non-intimidation and no-retaliation for good faith participation in the compliance program, including but not limited to reporting potential issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials?	Y		Code of Conduct	Compliance

Compliance Education

- Our company uses Compliance Wire
- FDR Educational Training
- Compliance Week Activities
- Compliance hot line signs/posters
- Board Training



Compliance Sharepoint Site



Fraud, Waste and Abuse

- Compliance has monthly meetings with Appeals & Grievances, Claims, Utilization management, Member Services and Part D where FWA issues are discussed.
- Member Services will alert Compliance if a member is reporting billing for services not received, identify theft issues or other potential FWA.
- Attend the FWA CMS meetings.
- Follow-up and reporting on areas of concern.

Board of Directors

- Quarterly written compliance reports are presented at the monthly board meeting by the Compliance Director.
- CMS communications/letters are reviewed by the Board.
- Audits both on-site and via system uploads status and results are discussed.
- Potential issues with FWA are brought to the Board.
- Complete Board Education

Internal Audit Program

- Use CMS audit guidelines for internal audits as it gives practice in pulling Universe files.
- Audit areas not included in audit guidelines.
- Conduct internal audits on a monthly or quarterly basis using CMS sample size.

Internal Audit Program (cont.)

- Conduct a mock audit for each area based on CMS audit guidelines including pulling full sample for IT and department practice.
- Compliance staff should be strict on audit criteria for the samples in a mock audit.

OIG Checks



April 30, 2014


Dear

PreCheck, Inc. has performed a **Monthly OIG/GSA SanctionCheck** for individuals listed on the attached Exhibit. The search consists of checking individual names against the Department of Health and Human Services (DHHS), Office of the Inspector General (OIG), List of Excluded Individuals and Entities (LEIE), General Services Administration (GSA) System for Award Management (SAM), and the Texas Health and Human Services Commission Medicaid OIG Sanction List.

The 2,443 (two thousand four hundred forty-three) individuals named in **Exhibit A** are clear of any Sanctions.

The 1 (one) individual named in **Exhibit B** is a "possible match" that we are unable to resolve.

I certify that a **SanctionCheck** has been performed.

Signed: 

Vu T. Do, LPI

Vice President of Compliance

PreCheck, Inc.

Private Security Investigator License #527923

Issued by the Texas Department of Public Safety

Federal ID# 760489701

Nevada Private Investigator License No. 1618



800.999.9691

www.PreCheck.com

- System needs to be in place for OIG checks for employees and providers.
- FDRs have to provide same information.

HPMS Advisory Memo

- System to track distribution of HPMS memos.
- Follow-up at monthly meetings and document in minutes.
- Set up calendar reminders in Outlook for assigned staff.
- Track the communication on Sharepoint Compliance site.

CMS Audit Notification

- CMS email to CEO and Compliance Director
- Follow-up telephone call received to confirm receipt
- Clock starts ticking on audit preparation



So...CMS is Coming to Audit

- Get over the shock of your upcoming audit.
- Review the documentation.
- Send audit notice to all relevant internal staff.
- Notify your delegate entities and send them audit specifications, date needed to confirm staffing availability.
- Immediate internal meeting with key staff members to discuss preparation and responsible parties.
- Assign tasks; be very specific.

Ask CMS Questions

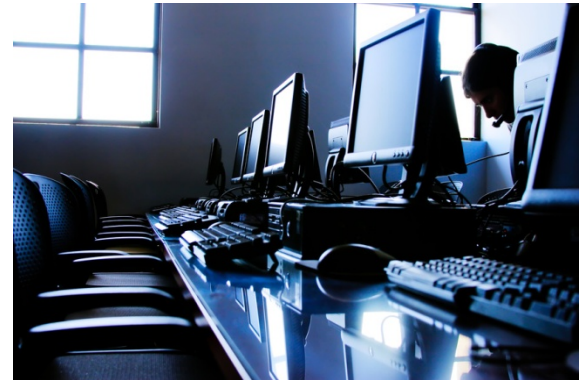
Question Number	Area (e.g. General, ODAG, CDAG etc.)	SO Questions	CMS' Response
1	ODAG: ET Payment Section 1.2	Should the following claims be excluded from the ET Payment Universe: Capitated Services?	No, please include capitated services in the universe
2	ODAG: CDM Payment Section 1.2	Should the following claims be excluded from the CDM Payment Universe: Administrative Denials (i.e., Timely filing, Additional Information, etc.) and Misrouted Claims?	No, please include in the universe
3	F&BA –Formulary Administration	Rejected claim universe - As of 1/27/14 we have >= 20,000 members as of 12/31/2013 we had < 20,000 members. Should we pull 30 or 60 days of rejected claims?	Sponsors with >=20,000 enrollees will pull a universe consisting of 30 days of rejected claims data with dates of service from December 27, 2013 through January 27, 2014
4	F&BA – Transition	The universes are due to CMS 2/7/2014. This universe requests Rejected claims for DOS in Jan and Feb 2014. Feb DOS will include Feb 1 - Feb 2. Is this acceptable?	It will be acceptable for the universe to include only the first 2 days of rejected claims
5	F&BA – Website Review	Please confirm CMS will review 2014 formulary documents	2014 formulary documents will be reviewed
6	F&BA – P&T	Our PBM's, Catamaran, P&T Committee is under a confidentiality agreement. Is it acceptable to provide Attachment I-A4 directly from the PBM to CMS?	Catamaran can send the documents to Jessica at Jessica.Robinson@cms.hhs.gov in a password protected manner.
7	ODAG & CDAG	Should CTM grievances be excluded?	Please do not include cases where the beneficiary filed a grievance with 1-800 Medicare unless the beneficiary also filed a grievance with Kelsey. CMS will not review CTM grievances, just regular plan grievances. If there are not enough grievances in the universe period, the ODAG team will request and review call logs (similar to CDAG's request for call logs).

IT Support

- Technical systems for audit webinar participation and telephone communication need to be addressed. The number of conference rooms will be determined based on audit schedule.
- Identify the IT support needed for each area's audit data pulls, even small.

IT Support (cont.)

- IT needs to make sure you can get into the webinars when you test with CMS.
- Make sure you have people available with Gentran or other specified system access to upload Universes.



Universes

- Need fast assessment of smaller Universes to make sure there is a full sample size. CMS has to be notified on audit acknowledgment if full samples do not exist.
- Don't assume everyone will read the instructions or understand them. Follow-up with each department to gauge progress on data pulls including FDRs. CMS may have changed Universe fields from previous audit guidelines.

Universes (cont.)

- Identify who will combine Universes.
- Data needs to be collected quickly, using reports already in plan and all information should be easy to retrieve.

Audit the Universes

- Key staff need to be available to audit the Universes before CMS uploads to make sure all required fields are completed.
- Begin practice sessions with each audit area walking through whole case, on-screen, using the system which will be shown on the webinar.

Audit the Universes (cont.)

- Make sure all documentation is available on screen; this may involve scanning some documents into your system.
- Delegated entities need to be included in the relevant practice sessions.
- Complete self-reporting to CMS for previously reported issues or other areas related to the Universes.

CMS Audit Webinar and Onsite

- Review and schedule staff for Audit sessions.
- Work with CMS to adjust times if staff need to be in multiple sessions.

CMS Audit

- Compliance to schedule webinars, rooms and ensure no conflicts with session participation.
- Invite all people, ensure webinar information and call-in numbers are on the invitations and confirm attendance.
- Be ready ahead of time.
- Make sure someone is looking for Universe sample requests from CMS.
- Have someone in the room to maintain sign-in sheet and take notes about needed follow-up.

CMS Webinar

- Show information in a organized manner without jumping around or scrolling too quickly through screens. Staff pulling up information need to be very familiar with system screens.
- If you have self-reported issues, be prepared to demonstrate the issue has been fixed during a webinar session.
- Audit team will request any follow-up documentation for non-compliant audit samples; having someone collecting information during session is helpful.
- CMS will give real-time feedback about audit issues and findings.

CMS Desk Audit Files

- Desk Audits - Determine what information needs to be gathered for each file; screenshots need to be organized so auditor can understand information.
- Organize and label each file with sample number for a Universe in the same order so it is easy to follow.
- Add clarification notes to explain screens if needed.

Onsite Compliance Audit

- Compliance staff will organize the sessions and be available but will not participate in most of the sessions.
- Board Minutes will be reviewed along with other requested information.
- Arrange all interviewees be available at the requested time.
- Notify CMS audit team if someone is sick or on vacation.
- Feedback will occur at the end of onsite activities.

Beneficiary Protection

- CMS audit targets areas of potential beneficiary harm including high-risk areas such as Part D transition supplies, cancer care or mental health.
- For an audit to be successful ,the Plan needs to demonstrate systems are in place to assist beneficiaries manage their care needs, such as scheduling appointments, resolving claims issues, answering drug questions, coordinating healthcare and providing general assistance.



Company's Best Practices

- Great Inter-Department Communication.
- CMS Best Practice Guidelines used as a guide for improving company performance .
- Involved with our members and arranging services; multiple outreach programs.
- Proactively problem solve through member services for appointments, drug coverage, organizational determinations and other issues.
- Multiple departments including compliance, review high-risk areas (appeals & grievances) at least monthly for trends and preventable problems.

Company's Best Practices (cont.)

- Internal Part D team is knowledgeable about our PBM's claims processing system. During the audit, team could demonstrate and discuss cases without PBM support.
- Part D team conducts daily, weekly and monthly reviews of the majority of PBM delegated functions.
- Part D team reviews 100% of transition and coverage determination letters each day.
- Part D team provides formulary oversight and tests system setup.

Company's Best Practices (cont.)

- Secret shopping for PBM customer service line, marketing and member service lines.
- Part D team works closely with member services on member drug issues.
- Relationship between claims and utilization management to review unauthorized services before claims decision made decreases denials.
- Enrollments only from internal marketing staff as beneficiary protection starts with them understanding their Plan and benefits.

Lessons Learned



- Continue to focus on our existing programs.
- Improve Compliance education to new employees including Code of Conduct reviews.
- Next time, have better IT support for Universes and better audit process.
- CMS are very helpful before, during and after the audit.

Teamwork

*Coming together is a beginning;
Keeping together is progress;
Working together is success.*

~Henry Ford