

Investing in Your Compliance Program



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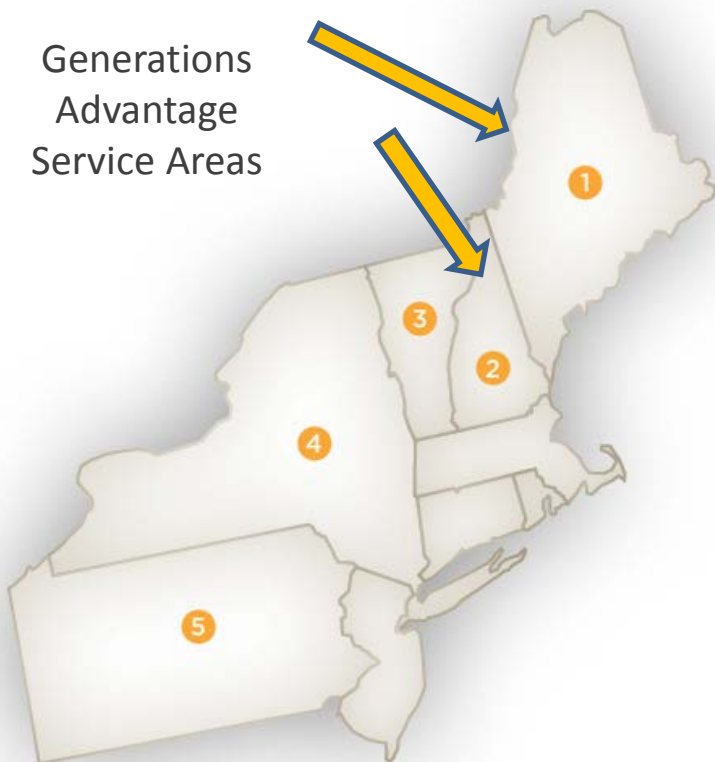
Martin's Point Health Care
Portland, ME

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Where We're Located

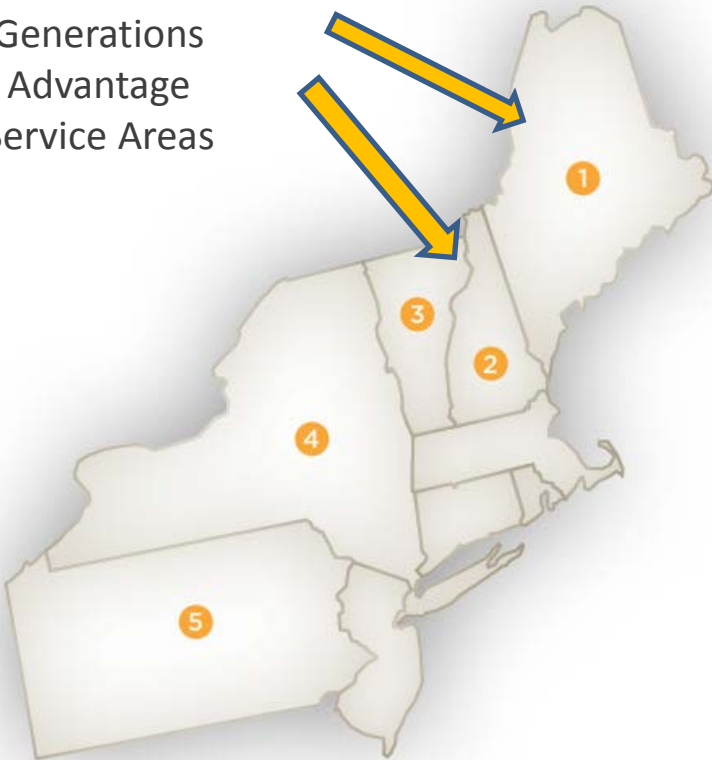
Generations
Advantage
Service Areas



- 1. Maine**
Operations, nine health care centers,
offer all health plans
- 2. New Hampshire**
One health care center,
offer USFHP, Generations Advantage in
two counties
- 3. Vermont**
Offer USFHP
- 4. New York**
Offer USFHP, four operations offices
- 5. Pennsylvania – Offer USFHP**

Where We're Located (cont.)

Generations
Advantage
Service Areas



- A not-for-profit organization based in Portland, Maine
- 750 employees
- 72,300 health plan members
 - 42,000 members – TriCare plan
 - 30,000 members – Medicare Advantage plan
- 9 health care centers, serving 75,000 patients

Evolution of Martin's Point's Medicare Advantage Program



Structure and Function of Compliance Program

- **7 Compliance Department Employees**
 - 4 of the 7 dedicated to Medicare Advantage plan
 - Medicare Compliance Officer and 3 Compliance Business Partners
 - Experienced in health plan operations, project management, customer service, compliance, law, research and writing, analytics, data management
 - Centralized

Structure and Function of Compliance Program (cont.)

- **Medicare Compliance Program**
 - Core team writes policies, trains and educates, audits, investigates, enforces and monitors
 - Meet monthly with functional areas to discuss audits, monitors, HPMS memo tracking, staffing, training and education needs

Structure and Function of Compliance Program (cont.)

- Collaborate on new initiatives, projects, member outreach programs, etc.
- Swing offices in all areas of operation
- Partner with Chief Compliance Officer, outside legal counsel and leadership to assess risk and execute CMS requirements
- Manual and automated processes

Communication from/with CMS

- **Communications from CMS**
 - Regulatory and sub-regulatory materials
 - Compliance receives, reads, interprets and considers impact
 - Compliance disseminates to operations via email immediately

Communication from/with CMS (cont.)

- Tracked for implementation and monitoring
- Small groups gather weekly to discuss impact, implementation and training needs
- Discussed during monthly meeting and summarized during quarterly Medicare Compliance Committee Meetings

Communication from/with CMS (cont.)

- **Communicating with CMS**
 - Monthly calls with CMS Account Management team
 - Record and track issues with CMS tracking log
 - Open channels of communication with regional and central offices

Getting Leadership on Board

- **Leadership Sets Ethical and Compliance Standards**
 - Strong commitment to patients, military families and community
 - Strong corporate culture – Great Place to Work® participant
 - Firm commitment to process improvement geared toward member, patient and employee satisfaction

Getting Leadership on Board (cont.)

- **Monthly Meetings**
 - Medicare leadership
 - Frontline staff
- **Quarterly Reports**
 - Chief Compliance Officer and Medicare Compliance Officer report to the Board of Directors
 - Medicare leaderships meet to discuss audits, monitors and to assess risks

FDR Oversight

- **FDR Monitoring and Oversight Program**
 - Continue to build, enhance and formalize this process
 - Integrate CMS and NCQA oversight programs
 - Regular audits of PBM and other FDRs
 - On-site audits - New England

This is an area of focus for 2014 and 2015. Projects have been assigned to enhance this area of our compliance program.