



Compliance Matters

Spring 2017

In this issue:

2 From the Junk Drawer

3 The Milieu Note: Make It Count!

4 1 + 1 = 10 (Part FOUR!)

5-6 It's Elementary...

7 Puzzling!



The past few months have brought a flurry of compliance activity including the 2017 staff roster project, the provider personnel attestation, and the implementation of extrapolation in large targeted audits. Our compliance staff is also participating in a multi-disciplinary tour of all CBH in network Residential Treatment Facilities. We do appreciate your responsiveness to these requests. Our hope is that through these and other activities, provider agencies are either enhancing or implementing internal control and monitoring mechanisms that incorporate the seven elements of an effective compliance program. In this month's edition of *Compliance Matters*, we introduce the sixth element of an effective compliance program: Consistent Discipline. The best compliance program holds little utility if it lacks consequences, for both positive and negative behaviors.

Enjoy!

- Donna E.M. Bailey
Chief of Staff & Compliance Officer

!POP QUIZ!

Winter Issue Answer:

Fairmount Park

Philadelphia, Pa

Spring Issue Question:

What is the average amount of rainfall Philadelphia receives in one year?

*Answer in our Summer issue.

From the Junk Drawer...

Heads Up!

CBH Compliance will be working with our partners in other CBH and DBH departments and our providers to hold a forum for per diem substance use providers. The forum will be geared at discussing documentation requirements for per diem providers and providing a space for our providers to discuss strategies for meeting these requirements. Be on the lookout for invites and additional information.

We are also in the early stages of planning the second annual CBH Compliance Forum that is tentatively scheduled for the Fall of 2017. If there are topics or other suggestions that you would like incorporated into the forum, please let us know by contacting Matt Stoltz.

Although the practice has been in place for some time, we would like to remind you that CBH Compliance will be utilizing electronic communication for all audit letters, reports, and other information. This will be done via email through Protected Trust[®]. If you do not have Protected Trust[®], do not be alarmed, you will be sent a specific pass code that can be used to access the email and attachments that are included. For files that require a response, there will be a section in the file reserved for the provider to enter their response. Once finished you can then save the file and send it back through the protected email.

We do ask that if there are any changes or updates to the contact person or their email address, please notify us so we can update our records to ensure that the information is being received.



Compliance Shines

Marie Raupp (Manager of Compliance) and Gretchen Murchison (Compliance Team Leader – RITU) both attended a recent Certified Fraud Examiner Training Course and both successfully passed their multi-day exam. Congratulations to both on becoming Certified Fraud Examiners!

Matt Stoltz (Compliance Analyst) and Jessica Streeter (Senior Data Analyst) presented on Extrapolation in a Behavioral Health Setting at the annual meeting of Managed Care Organizations' Compliance/Special Investigative Unit staff in Mechanicsburg, Pa earlier in May.

While at the annual MCO meeting, several compliance staff were introduced for the first time to the joy that is Sheetz. One long-time WaWa fan, who shall remain nameless, has seen the light following a taste test and concedes Sheetz ROCKS!



The Milieu Note: Make It Count!

One of the most common variance concerns for residential treatment providers is *Insufficient Documentation*. The content of the note does not give a clear picture of what is occurring during session, lacks interventions, or does not support the duration of time billed. All billed dates of service must have adequate documentation that reflects the treatment rendered according to CBH Provider Bulletin #10-02* dated January 11, 2010 which states, "Effective February 11, 2010 all residential treatment providers are required to have documentation on a daily basis that describes the treatment that was provided by the provider to the service recipient on that day. Providers are reminded treatment described must correlate with the individual's Treatment/Recovery Plan. This should include clear evidence that treatment is provided for every billed day."

Historically, many residential treatment providers struggle to document treatment on weekends, holidays, and anytime the schedule does not include a structured or "clinical" activity such as group or individual therapy. Even more, residential treatment programs tend to document more on weekdays (several notes for a date of service) given increased staffing (Clinical supervisors, Therapists, Psychiatrists, Nurses, etc) as opposed to weekends and holidays where a "daily note" or shift notes written by "non-clinical" milieu staff is the only thing on record.

CBH requires at least one note per day that documents the provision of behavioral health treatment. CBH does not dictate who should provide treatment or what treatment should look like. A behavioral health intervention can be provided by a residential line staff on a weekend and receive credit just the same as if treatment was provided by a clinician on a weekday. Often times, staff (regardless of

discipline or credentials) summarize what a member reports and/or what the staff observes but fail to document what the staff person did during the encounter to help the member address their behavioral health goals. Think ACTION! What interventions, strategies, and specific methods did staff use? What did the staff say or do to support the member in achieving his/her recovery plan goals? Train your staff (clinical and non-clinical) to write a progress note that gives them credit for the hard work they do each day.

CBH Compliance analysts are often asked if there is a preferred template or way to document that will prevent high error rates and repayment following an audit and the answer is no. The most important thing is what the staff member writes. The note should be an accurate record of what occurred; client presentation, any progress or lack thereof, response to treatment, behavioral intervention(s) provided by staff, plan(s) for continued treatment, etc. If the only note for the day is a milieu note, make it count! There should be evidence of treatment for every billed day. Good documentation is the best line of defense for avoiding repayment for services rendered.

- Malakeyla Reynolds,
CBH Compliance Analyst

* - The bulletin identified in this article may be difficult to locate on-line. If you would like a hard copy of the bulletin please contact Matthew Stoltz and we will send you a copy either electronically or via fax, whichever you prefer.

1 + 1 = 10 (Part FOUR!)

The hour is upon us. CBH Compliance staff has launched into the first series of audits what will use statistically valid, random samples and extrapolation of audit results. If your agency has not done so, PLEASE review previous Compliance Matters, bulletins, and notices related to Extrapolation. Check now to ensure that your medical records department can handle large chart requests on relatively short notice. As previously mentioned in a number of settings, the first extrapolation audits will focus on day of discharge billing for per diem providers and collateral family therapy billing across outpatient providers. In past issues of *Compliance Matters*, we have advised agencies to conduct self-audits and shared resources about how to do so. If you haven't already done so, now would be an appropriate time to complete a self-audit if you are a per diem agency or an outpatient agency billing collateral family therapy.

The final installment of this column will focus on the changes that agencies will see after the audit is completed. The most significant change will be the compliance report that is submitted following CBH Compliance Committee review. The report format will change for audits that utilize extrapolation. Changes that will be seen in the report include:

Discussion of the reason for the audit and use of extrapolation

This will provide the provider agency with a rationale for the use of extrapolation.

History of the concern and previous steps taken in an attempt to correct the problem(s)

This section will provide a concise discussion of previous efforts by CBH and/or partner agencies to correct the issue(s) being investigated. This will include references to available guidance via regulation, manuals, meetings, corrective action plans and/or previous audit results.

Detailed accounting of the scope of the audit

This section will provide details about several areas that may limit the impact or review of the charts included. These include, but are not limited to: audit review period, services/levels of care reviewed, error codes that will be utilized for variance concerns, and the ability of the provider to submit additional details following the audit.

Obviously, the report will also discuss the extrapolated financial impact generated from the chart reviews. This will be in addition to the actual observed financial impact. In this case, observed financial impacts will reference the overpayments identified in the charts reviewed by Compliance staff.

Providers will also be given additional information in the spreadsheets that accompany the compliance reports. Sample size calculations, seed numbers, and random numbers are examples of the additional information that will be included.

Several providers have already requested training on the use of Rat-Stats and Excel in conducting random and statistically valid samples for auditing. Please continue to contact Matt Stoltz to request trainings. In your request, please indicate if you would like CBH staff to come to your site or if you would prefer to have trainings in the CBH Computer training room here at 801 Market Street.

We will continue to provide updates on extrapolation as needed. Smaller updates will be made in the Junk Drawer section of *Compliance Matters*.

- Ken Inness, Director of Compliance

It's Elementary...

Compliance Matters will use this column to publish an article each quarter regarding one of the seven core elements of a successful compliance program, as outlined by provisions in the Patient Protection and Affordable Care Act 42 U.S.C. § 18001 (2010)

Next up on our tour of the Seven Core Elements of an Effective Compliance Program is a discussion of consistent discipline.

Let's start with a story....way back when, I was the proud owner of BOTH Millennium Falcon and Jawa Sand Crawler toys. They were AWE-SOME, I was the envy of the Burgundy Knolls neighborhood. I could fit Chewy, Han, Luke, Leia all in the Falcon and fly it around and destroy, time after time, the Sand Crawler (I did not feel it necessary to follow the movie script closely while playing). Sadly, I had (and my wife will tell you, continue to have) a bad habit of simply leaving things wherever I last used them. That meant my Millennium Falcon many times resided on the blind turn from the hallway to the living room, resulting more than once in a stubbed toe(s) and some colorful language from my mom. Finally, she had enough. I was told, clearly, if I left it out in the floor one more time, the next time she had to pick it up, she was depositing it in the trash. "Yeah...uh huh", I think was my response. Skip ahead a week (seriously...skip ahead a couple hours), and while I was out riding bikes (being Ponch on a bicycle was tough work), Mom had another encounter with the Falcon. When I went looking for it later on, I was told I would need to look for it in the dump. She had, in fact, thrown out my prized Millennium Falcon. A little later on, I left the Sand Crawler out, toe stubbed....Sand Crawler becomes worm food. Lesson learned. In reality, the lesson was shove everything under the couch/bed, no stubbed toes actually seemed to be the key.

Why were you just bored with a story from my fairly boring youth? My behaviors changed (again, my wife would point out



temporarily) because of my Mom's consistent discipline. I learned quickly and infraction of the rules led to me losing my favorite Star Wars toys. That changed my behavior to stowing said toys under the closest piece of furniture.

Through auditing, tips, etc, your agency will uncover instances when compliance related rules have not been followed. In many cases, this is simply an oversight or sloppiness. In others, more nefarious reasons are the cause. In order to be effective, the agency's compliance program MUST ensure that appropriate and consistent actions are taken to ensure that future violations are avoided.

A significant portion of deterring future problematic behavior is clearly discipline.

Continued on page 6

The United State Department of Justice (DOJ) Criminal Division published a guide for the Evaluation of Corporate Compliance Programs (<https://www.justice.gov/criminal-fraud/page/file/937501/download>) that discusses the need for accountability:

8. Incentives and Disciplinary Measures

“...What disciplinary actions did the company take in response to the misconduct and when did they occur? Were managers held accountable for misconduct under their supervision? Did the company’s response consider disciplinary actions for supervisors’ failure in oversight?...”

Consistent and fair are certainly terms that are open for some interpretations. Agencies have one clear option for helping to ensure consistency. That is through our old friend policies and procedures. Your agency should have policies and procedures that clearly outline what disciplinary steps will be taken based on the type of infraction. This can range from HIPAA violations to failure to sign clinical notes to fabricating encounters to enable fraudulent billing. Clearly, the discipline should be commensurate with the offense. Mitigating factors such as self-report, first time offense with the individual, newly hired staff, etc can have a role in the progressive discipline measures. It is important that all staff is held accountable. C-suite and middle management clearly should not be exempt from discipline when infractions occur. To the contrary, the DOJ clearly highlights the need for management

level staff to be held accountable for failures on their watch.

Thankfully, the DOJ also considers, “catching” good behavior as part of consistent discipline. This may take the form of rewarding individuals who:

- identify areas for improvement
- identify problem behaviors/actions (tipsters)
- offer suggestions that help improve the corporate compliance program

Agencies should not give “passes” because “she is such a nice person” or “he seemed really sorry about it”. In the end, uneven discipline and enforcement can be viewed as a sign of a failed compliance program and may lead to confusion and possibly resentment among agency staff. What is important is that discipline is applied consistently across situations.

- Ken Inness, Director of Compliance

In the next issue:

- **It's Elementary! – Corrective Actions**
- **The Return of NPAU Ka-Pow**
- **More Junk Drawer**
- **Puzzling!**

[Suggestions for future Compliance Matters features?](#)
[Want to subscribe \(it's FREE!\)?](#)

Contact Matthew Stoltz at Matthew.Stoltz@phila.gov

CONFIDENTIALLY REPORT FRAUD, WASTE, and ABUSE.

1-800-229-3050 or

CBH.ComplianceHotline@phila.gov

PUZZLING!

S O H W O T E M U R O F V F V
P N J Y Z L C M V U M X H E Q
L H X B D E T C E T O R P A L
I V I D A E N I H S N U S F G
Y Z B L I S B O U H L R I N D
G C M L L S E Y I D M U N V K
F A C M M I C B E T B Y C D S
N L F P J V E I A A C I E E R
F V M I A D F S P L Z A N U E
X I I Z Z I A J Y L L J T C W
Q N L H T G E Y I T I F I E O
N P I R S O B D B V M N V B L
K S E C I N O R T C E L E R F
Y C U B M G E V E R M X S A U
F P P H A N A T I C T W U B B

Word List:

Action	Calvin	Electronic	Incentives	Phillies
Barbecue	Certified	Flowers	Milieu	Protected
Baseball	Discipline	Forum	Phanatic	Sunshine