Simplifying Rural Health Clinic Compliance

2020 NRHA RHC CONFERENCE

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Discussion Points

- What exactly is Compliance?
- What does RHC Compliance look like? How is that different?
- What are the elements of a formal Compliance Plan?
- Where do we go wrong with Compliance?
- How do we make Compliance Practical and Manageable?
What is Compliance?

• Looking at the big picture before you get into the weeds.
• How is RHC compliance different from hospital compliance? How are they the same?
• Regulatory Compliance: Multi-faceted and yet straightforward.
• Who should lead in RHC compliance?
• Is compliance different for provider-based RHCs versus Independent RHCs?
Let's make it simple: Government control means uniformity, regulation, fees, inspection, and yes, compliance. --Tom Graves

Healthcare is a regulated industry.

The framework for compliance already exists.

Don’t re-invent the wheel. Use what we already know. And if we don’t know, learn and teach!
Compliance can include all these areas.

- HHS Regulatory Compliance
  - CMS Conditions of Participation
  - CMS RHC Conditions for Certification 42 CFR §491
  - CMS Guidance (IOMs and Appendices)
  - Office of Civil Rights/HIPAA
  - OIG Enforcement
- Other Federal Laws
  - Labor Laws
  - OSHA
- State Laws
- Local Laws (County and City)
Where do you start?

It can be overwhelming to either create or revamp a compliance plan.

What is needed for RHC Certification may be different from what is needed for the parent organization or to meet other regulations.

What is needed for RHC Certification is not everything needed for regulatory compliance.
Use the regulations as a compliance blueprint.

• Would you plan a house without a blueprint?

• Would your contractor build the house without ever looking at the plans?

• Federal, State and Local Regulations are the blueprint for any type of facility’s compliance.
Federal RHC/FQHC Regulations

42 CFR §491 Conditions for certification

42 CFR §405 Subpart X

42 CFR §413.65 Provider Based Status
Federal Hospital Regulations

42 CFR §482
Conditions of Participation

42 CFR §412
Inpatient PPS System

42 CFR §419
Outpatient PPS System
Federal Regulations
Critical Access Hospitals

42 CFR §485
Subpart F
Conditions of Participation

www.inquiseek.com
Federal Regulations
Medicare Program

42 CFR §405
Federal Healthcare for
the Aged and Disabled

42 CFR §420
Program Integrity-
Medicare

42 CFR §455
Program Integrity-
Medicaid
Electronic Code of Federal Regulations

e-CFR data is current as of October 9, 2019

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Title 1 - General Provisions

https://www.ecfr.gov/cgi-bin/ECFR?page=browse
Internet-Only Manuals (IOMs)

The Internet-only Manuals (IOMs) are a replica of the Agency's official record copy. They are CMS’ program issuances, day-to-day operating instructions, policies, and procedures that are based on statutes, regulations, guidelines, models, and directives. The CMS program components, providers, contractors, Medicare Advantage organizations and state survey agencies use the IOMs to administer CMS programs. They are also a good source of Medicare and Medicaid information for the general public.

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“The aim of the wise is not to secure pleasure, but to avoid pain.”
— Aristotle

Healthcare is a reactive industry by nature.

Taking time to be strategic and proactive is difficult but necessary.

Changing our mindset about compliance is the first step.
Creating Policies and Evidence for RHC Certification
Develop Written Policies based on your regulatory blueprints

- Written policies are required for RHC Conditions of Certification

- Written policies are needed to meet Conditions of Participation

- A formal Compliance Plan to prevent fraud, waste and abuse is needed.

- Accreditation Organizations may have other requirements.
Tips for Policy Development

- Don’t make policy writing more difficult than it needs to be. More is not more!

- Use broad language that established compliance without locking you into a rigid process or procedure that might change.

- Organize policies topically or in the order of the survey tags or standards.

- Policies should not be used to manage people but to ensure practical compliance.
A true professional not only follows but loves the processes, policies and principles set by his profession.” — Amit Kalantri

**Policies** are broad statements of compliance which are static unless there is a regulatory change. Less is More.

**Processes** are more defined by nature are dynamic. They are usually created internally or in conjunction with other guidance. Provide Clarity. Can Be addendums or supplemental documents.

**Procedures** are specific steps in performing a task. These are dynamic, promote efficiencies in workflow and ensure quality performance. Used for training and internal guidance. Promotes standardization of tasks.
- Systematically Organize Policies
- Number Policies
- Have Standard Format
- Show Effective Dates
Organizational Structure and Ownership

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Adopted or Revised Date: 9/27/2019

**Policy Declaration:** This is the Organizational Structure and Ownership Policy of the clinic. The clinic is identified as Crossroads Clinic.

**Policy Purpose:** The purpose of this policy is to disclose in a written document the organizational structure of the Clinic which is Rural Health Clinic (RHC). Furthermore, the policy is designed to give detailed information about the governance, management and staffing of the clinic.
RHC Evidence Documents

Identify Which “Evidence” Documents demonstrate Compliance

Organize these documents for easy retrieval.
“What can be asserted without evidence can also be dismissed without evidence.”
― Christopher Hitchens

Proof of compliance especially during a survey can be difficult if supporting “evidence” documents are not easy to retrieve.

Correlate supporting evidence to policy numbers or to survey tags or standards.

Refer to the SOM Appendices or the AO guidance to determine what might be needed.
Examples of Evidence Documents

- Licenses
- Certificates
- Inspection Reports
- Correspondence to/from CMS/Medicare Contractor
- Correspondence to/from state agencies
- Other Agency Correspondence
- Quality, QAPI, and Risk Documents and Forms
- Samples of Notices and Disclosures
- Proof of Education and Training
Identify Supporting Evidence Documents and Keep them Up-to-Date
“Wasted strokes, like missed deadlines, are preventable and costly.”
— Lorii Myers

Some policy or document management systems have a built-in tickler function.

Spreadsheets, calendars or tickler organizers can all work. Create a format that works for you and your facility.

Set reminders far enough in advance to allow for processing time, approval time, or scheduling.

Build-in accountability so that more than one person is aware of a deadline.