

This report is intended to provide the board [committee of the board] and senior leaders with regular insight into management’s execution of the compliance and ethics program as well as important metrics related to significant healthcare risks areas facing ABC Health System. In addition, it is intended to facilitate fulfillment of board and management obligations to effectively oversee the development and implementation of an effective compliance and ethics program under the Federal Sentencing Guidelines.

Questions regarding the scorecard or our performance are always welcome.

I. Compliance Program		Performance Metrics	Target	Q1	Q2	Q3	Q4	Comments
A.	Program Operation Leadership, Oversight and Governance	1. Compliance Committee meets quarterly with quorum	100%					
		2. Board receives quarterly Compliance metrics reports	100%					
B.	Integration of Compliance into Standards, P&P's	1. New or significantly modified Compliance P&Ps communicated to affected employees and contractors within 60 days	90%					
C.	Compliance Education and Training	1. Leaders complete required annual Compliance, Anti-Harassment and Privacy training by due date	98%					
		2. Employees complete required annual Compliance and Privacy education by due date	95%					
		3. New employees complete required Compliance and Privacy education within 60 days of hire	95%					
		4. Conflict of Interest attestations completed by due date	98%					
D.	Open Lines of Communication – Ethics and Compliance Line Reporting	1. Compliance related investigations closed within 30 days	75%					
		2. Privacy/Data Security related investigations closed within 30 days	75%					
		3. Number of calls to compliance hotline	N/A					
		4. Number of compliance calls closed “with merit”	N/A					
		5. Number of alleged privacy incidents	N/A					
		6. Leaders timely submit quarterly Legal/Compliance disclosure attestation	90%					
E.	Excluded Individual Screening	1. New hires are screened against OIG and GSA exclusion lists upon hire	100%					
		2. Existing employees and medical staff members screened against OIG exclusion list monthly	100%					

II. Substantive Compliance/Auditing and Monitoring		Performance Metrics	Target	Q1	Q2	Q3	Q4	Comments
A.	Admitting/Registration	1. Advance Beneficiary Notice (ABN)	95%					
		2. Medicare Secondary Payer (MSP)	95%					
		3. Medicare Rights Notifications	95%					
		4. Condition of Admission Documentation	95%					
		5. Medicare Outpatient Observation Notice	95%					
B.	Coding	1. Inpatient coding accuracy rate*	95%					
		2. Outpatient coding accuracy rate+	95%					
		3. IP auditor accuracy rate	95%					
		4. OP auditor accuracy rate	95%					
		5. Physician E&M coding accuracy rate	95%					
C.	Billing	1. Medicare credit balance report CMS-838 filed timely within 30 days of quarter end	99%					
		2. Government payer rebills/refunds completed timely (within 60 days)	95%					
		3. Number of voluntary refunds to government	N/A					
		4. Three-day window accuracy	95%					
		5. Government and patient credit balances resolved within 60 days	95%					
D.	Care Management	1. Medicare admissions reviewed for medical necessity within 24 hours of admission	90%					
		2. CDI/Coding queries appropriately worded	95%					
		3. Clinical denial rates below x	10%					
E.	Physician Transactions (anti-kickback, Stark, etc.)	1. No contract services until contract fully executed	98%					
		2. Payments consistent with contract terms	98%					
		3. Physician lease payments timely received	95%					
		4. New leaders complete Physician Transaction training within 60 days	95%					
F.	Privacy/Data Security	1. Average number of potentially malicious emails blocked each day	N/A					
		2. Average number of potentially malicious intrusion attempts detected each day	N/A					
		3. Number of significant security incidents	N/A					
		4. Number of confirmed privacy incidents	N/A					
		5. Number of patients impacted by confirmed privacy breaches	N/A					
G.	Internal Audit	1. Audit Corrective Action Plans implemented timely	90%					

*IP coding accuracy is measured by DRG accuracy (95%) and principal diagnosis, MCC, CC, Secondary DX, discharge disposition, procedure code, DOA accuracy and query accuracy (all 90%).

+OP coding accuracy is measured by facility E/M, facility CPS, modifier and ICD-10 accuracy (all 90%) individually, 95% overall.