Not for the Faint of Heart: Preparing CMS Tracer Case Summaries

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Preparing a Tracer

• Key considerations when developing a tracer case summary
• Successful strategies for engaging business owners in presenting tracers
• How to incorporate lessons learned from Plans who have been through CMS CPE Program Audit
• Testing oversight and accountability of FDRs involved resolving compliance and/or FWA issues
Tell the Story Using the 7 Elements

Prevention Controls and Activities
- Written Policies, Procedures & Standards of Conduct
- Compliance Officer, Compliance Committee, & High Level Oversight
- Effective Training and Education
- Effective Lines of Communication

Detection Controls and Activities
- Effective System for Routing Monitoring, Auditing, and Identification of Compliance Risks
- Sponsor Accountability and Oversight of First-tier, Downstream & Related Entities (FDRs)

Correction Controls and Activities
- Procedures for Promptly Responding to Compliance Issues

The Introduction

Summary of Tracer
- Issue Type
- List departments and/or FDRs involved in the issue
- Highlight of important details

High Level Timelines
- Bulleted Key Dates with Short Description
- Include dates for communications to CMS, compliance committee, senior leaders

How was the Issue Discovered
- System test, member complaint, or self-disclosed by business owner or FDR through monitoring or auditing activity

Root Cause
- Description of What Went Wrong or Failed to Occur
- Member Impact

Current State
- List of status of issue including monitoring and auditing activities currently in place
**Prevention Activities & Controls**

**Date Sent to Compliance**
- Outline who and how the issue was communicated to compliance

**Date CMS Account Manager Notified of Issue**
- Include reason why or why not (attach email or report in tracer)

**How Was the Issue Communicated to Senior Leadership and/or Members of the Board of Directors**
- Attach reports and/or compliance committee minutes in tracer

**Prevention Policies and Procedures (P&Ps) Related to This Issue**
- Highlight applicable P&Ps (attach in Tracer)

**Description of Employee and/or FDR Education Activities**
- Highlight job specific training addressing Medicare requirements related to the issue (attach in tracer)
- Additional training provided as result of the issue (attach in tracer)

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**Detection Activities and Controls**

**Detection Policies and Procedures (P&Ps) Related to This Issue**
- Highlight applicable P&Ps (attach in tracer)
- Highlight any revisions made to address the issue (attach in tracer)

**Risk Assessment**
- Describe how the issue is captured in risk assessment process and its related risk

**Auditing and Monitoring**
- Expand description provided in FTEAM, IA, or IM universes

**Oversight of FDR (if applicable to issue)**
- Describe process (attach in tracer)
**Correction Activities and Controls**

**Corrective Actions Taken**

- Reinforce prompt response to issue identification, investigation and issuance of corrective action plan (CAP) (attach applicable P/Ps)
- Timeline indicating CAP activities fully implemented OR if not fully implemented provide anticipated completion date
- Describe the steps for escalation, if applicable to issue
- Describe retraining activities (attach in tracer)
- Highlight any revisions made to P/Ps in order to address the issue (attach in tracer)
- Describe follow-up activities (audit) to validate effective remediation

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**Program Audit Most Common Findings 2016-2017**

**Compliance Program Effectiveness**

- Sponsor did not review OIG and GSA exclusion lists prior to hiring or contracting and monthly thereafter
- Sponsor was not able to demonstrate that its governing body, temporaries, volunteers and/or FDRs fulfilled training requirements
- Failure to establish and implement a formal risk assessment and an effective system for routine monitoring and auditing of identified compliance risks
- Failure to receive regular reports of audit and monitoring results and the status of the effectiveness of corrective actions being taken
- Failure to provide updates on results of monitoring, auditing and compliance failures to senior leadership
- Failure to maintain thorough documentation of all deficiencies identified and corrective actions taken
- Failure to develop and implement an effective system for corrective actions required of first tier entities
- Tracers did not have sufficient analysis to properly identify the underlying root cause to develop an appropriate corrective action plan
- Failure to have adequate and appropriate resources dedicated to FDR audit activities
- Sponsor did not provide evidence that it audits the effectiveness of the compliance program at least annually and that the results are shared with the governing body
Program Audit Most Common Findings 2016-2017

Formulary Administration

- Sponsor failed to properly administer the CMS transition policy
- Sponsor failed to properly administer its CMS-approved formulary by applying unapproved utilization management practices

CDAG

- Sponsor misclassified coverage determination or redetermination requests as grievances and/or customer service inquiries
- Denial letters did not include adequate rationales, contained incorrect/incomplete information specific to denials, or were written in a manner not easily understandable to enrollees

ODAG

- Denial letters did not include adequate rationales, contained incorrect/incomplete denial information or were not easily understandable to enrollees
- Sponsor did not fully investigate and/or take actions to appropriately address all issues raised in grievances

Questions?

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