



## HOW TO LEVERAGE THE STRENGTHS OF YOUR MARKET-BASED & ENTERPRISE TEAMS:

“HOW TO RALLY THE TROOPS: AUDIT PERFORMANCE AT THE READY”



**Josslyn Gillard   Susan Anderson   Cameual Wright, MD, MBA**

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## HOW TO find the “MORE” in the “LESS”

**2024 Goals & resolutions for many companies involve gaining efficiencies while cutting costs.**  
Unless you have an unlimited budget, you will certainly be asked to do more with less.

*How can your compliance team proactively contribute to efficiency?*

*How can you be strategic in maximizing limited resources?*

**We will give you some ideas today!**



# Presentation Objectives (Intermediate)

- ❖ Explore how to build a proactive project management approach to audits
- ❖ Explore efficiency savings while maintaining effective audit facilitation
- ❖ Discuss ways in which you can minimize the impacts of audits to your business operations
- ❖ Understand and communicate the complexities of Federal & State requirements
- ❖ Hear best practice tips for market & shared services collaboration
- ❖ Build effective processes to achieve optimal audit performance



**Susan J Anderson**

Chief Ethics and Compliance Officer



**Dr. Cameual Wright**

Indiana Chief Medical Officer



**Josslyn Gillard**

Indiana Plan Compliance Officer



# Susan Anderson



As **Chief Ethics and Compliance Officer for CareSource**, I am responsible for:

- Building and sustaining a highly effective Compliance Program which provides compliance and regulatory oversight related to our Government Program lines of business.
- Executing External Regulatory Audits with metric driven risk performance activities

## Education and Experience

- Juris Doctorate from University of North Dakota School of Law
- Previous Insurance Regulator
- Over 20 years experience in managed care holding positions in Legal, Compliance, Privacy and Quality with United Health Care
- Joined CareSource in 2020

## Personal Pursuits

- Lives in Minnesota
- Enjoys cheering on the Moorhead Spuds High School Hockey Team ( proud hockey mom), spending time in Mn Lakes country and laughing with friends and colleagues.



# Proactive Project Management



## Knowledge

- Types of Audits
- Process of your Audits
- Timing of your Audits
- Previous Risks
- Readiness Learnings



## Tools

- Execute your Playbook
- Forecast Calendar by Audit
- Forecast Calendar by Department
- Risk Assessment
- Communication Templates
- Communication Calendar



## Facilitation

- Centralized System Repository
- Consistent Filing Nomenclature
- Internal Due Dates
- Meeting Minutes
- Communication Cadence



**Command Center Console**



# Efficiency While Maintaining Effectiveness

## Efficiency Tactics :

- Centralized Staffing Model
- Line of Business Playbooks
- Communication Templates
- Universal Nomenclature
- Forecast Calendar
- Readiness Activity

## Results

## Enhanced Effectiveness :

- Allows flexibility in staffing
- Facilitates succession and alleviates burden to recreate the wheel
- Provides relevant data points in an expected format
- Supports efficient communication and improved understanding
- Prepares the business for focused readiness and enhanced performance



# Josslyn Gillard, MS, MPH



As **Plan Compliance Officer for CareSource Indiana**, I am responsible for:

- Responsible for ensuring and documenting Indiana has an effective ethics and compliance program including prevention, detection, and correction activities.
- Provide strategic leadership to ensure organizational compliance federal, state, CMS and applicable regulatory and accreditation requirements

## Education and Experience

- MS (Psychology) from Purdue University Global
- MPH from Capella University
- 15 years in State Medicaid Programs/State Child Welfare Programs/Foster Care Regulatory Oversight/Large Public Healthcare Systems/
- 4 years in Managed Care Regulatory & Compliance.

## Personal Pursuits

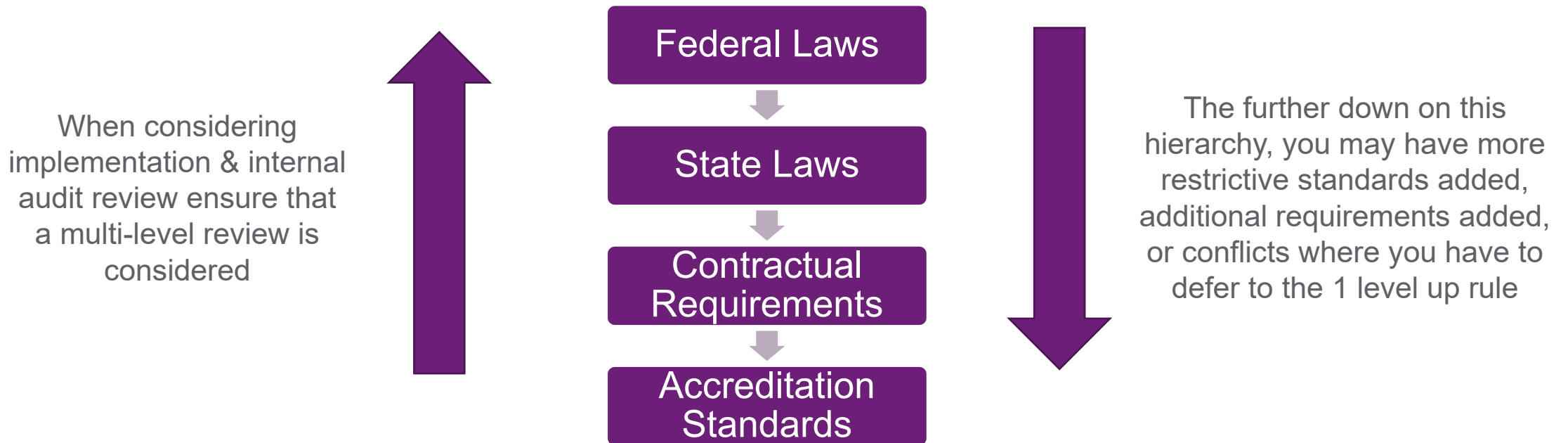
- My passions include perpetual learning, analyzing, strategy and growth
- I have the greatest pleasure of spending time with my 3 sons, my daughter, and my husband enjoying sporting activities, traveling, and planning new adventures



# Understanding & Communicating the Complexities of Federal & State Level Requirements:

When state law and federal law conflict, federal law displaces, or preempts, state law, due to the [Supremacy Clause](#) of the Constitution. [U.S. Const. art. VI., § 2.](#) Preemption applies regardless of whether the conflicting laws come from legislatures, courts, administrative agencies, or constitutions.

***How do you effectively evaluate and explain this to your business leaders?***





# How Do You Rally Your Troops?



## Prep Work:

- \*Scope
- \*People/Business Area
- \*Sending Notifications
- \*Sending Invitations
- \*Setting Up Communication Channels
- \*Creating Audit Plan Docs



## Kick-Off Meeting:

- \*Audit Team Intro
- \*Present Audit Plan
- \*Describe Methods & Objectives
- \*Area of Focus
- \*Explain: WWWW
- \*Establish Timelines of Deliverables
- \* Escalation Plan



## Follow-Up:

- \*Establish routine & order
- \*Designate a BO point of contact
- \*Ask questions/identify risk
- \*Strategize
- \*Leave wiggle room
- \*Prep for oral presentations
- \*Triple check the "delivery"



## Execute:

- \*Exceed Expectations
- \*Get ahead of numerous follow-up request
- \*Be precise & concise in responses
- \*Make it fool-proof



# “Real Audit Strategies ”:No Surprises Act

**Prep**: Determine whether the Federal IDR process or a state law or All-Payer Model Agreement (APMA) applies for determining the out-of-network rate.

**Prep**: Determine if your state opted into an SSL or your plan has a contract with OPM that defers to the state process.

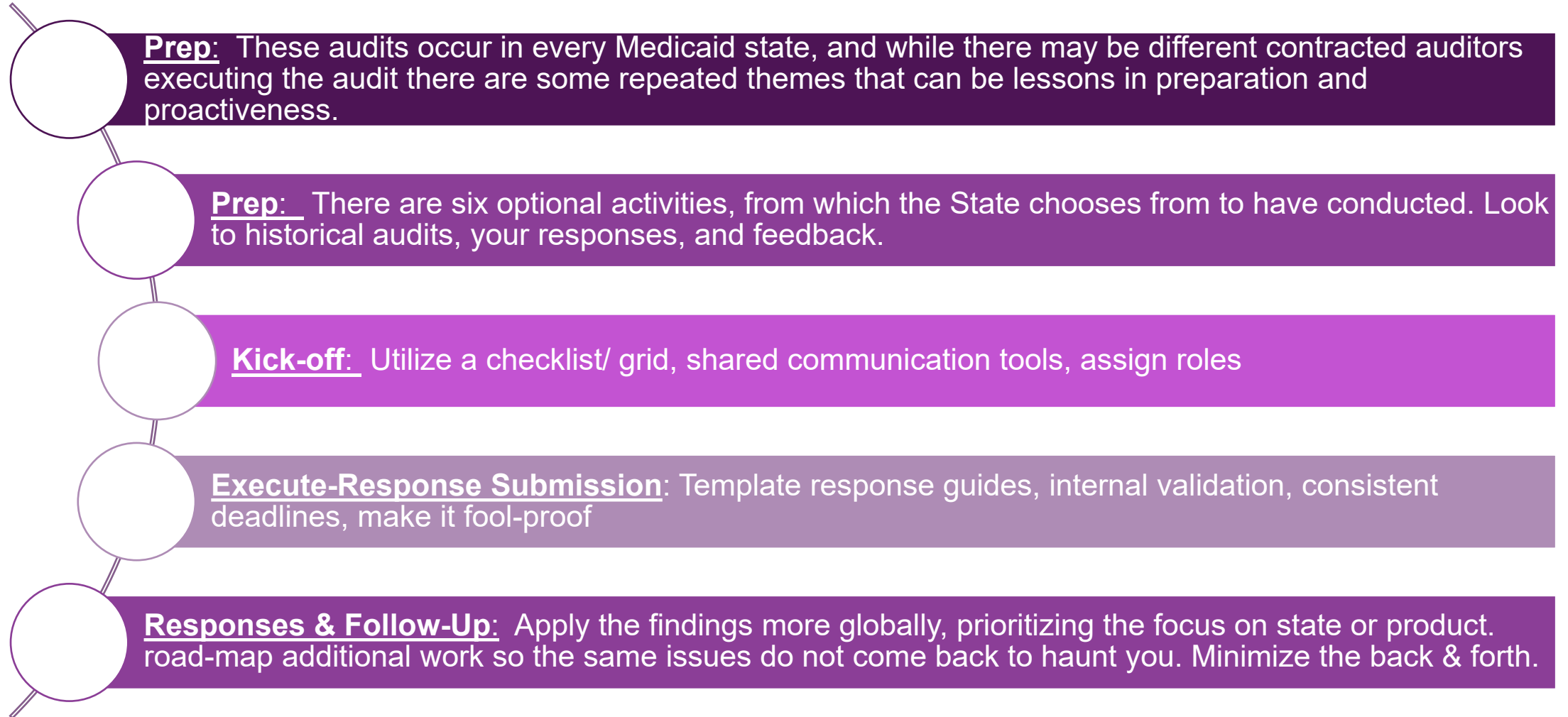
**Kick-off**: Utilize the state letters in explaining what rules take precedent and the subsequent checklist of steps that must be followed.

**Follow-Up**: Do not recreate the wheel, just make it spin faster/better.

**Execute**: Maximize the output, while minimizing the touchpoints.



# “Real Audit Strategies ”: External Quality Review Organization Audits:



# Minimizing Impact to your Operations

## Prep Work: Practice makes perfect

- Create “internal audit” readiness opportunities that mimic the real deal
- For example, in EQRO Audits: These 3 mandatory activities should be apart of a yearly strategy within all your Medicaid Markets on how to strategically prepare, respond, identify risk, and mitigate.

## Kick-Off /Strategy Meeting: Audit Response is a Muscle: “If you don’t use it, you lose it”

- Create an action plan that encompasses all areas that are touched regularly by certain audit, this creates muscle memory and bench strength with that business area

## Follow-Ups: Maximize the output, while minimizing the touchpoints

- Review your historical audits to establish the protocols the auditor has utilized, the layout, etc..
- Use this information to create a generalized checklist that can be applied across your Medicaid Markets, you can project management each protocol into a RACI matrix based on your organizational structure.

## Execute: Don’t recreate the wheel, just make it spin faster/better

- Be Strategic in your audit preparation approach, and the tools you select



# Cameual Wright, MD, MBA



As **Vice President, Market Chief Medical Officer for CareSource Indiana**, I am responsible for:

- Oversight of the development and implementation of all clinical policies, procedures and operations, ensuring adherence to regulatory and clinical care standards.
- Fostering effective relationships with healthcare providers, state agencies and community-based organizations

## Education and Experience

- MD from the University of Michigan Medical School
- MBA from Indiana University, Kelley School of Business
- Practiced Ob/Gyn for 15 years, holding multiple leadership roles, including Department Chair and Medical Staff President
- 7 years managed care experience with CareSource in clinical leadership

## Personal Pursuits

- Lives in Westfield, IN
- Enjoys traveling, wine tasting, dogs, and the arts.



# Chief Medical Officer Compliance Duties



- Ensuring the organization is compliant with all applicable local, state and federal laws.
- Ensuring compliance with all clinical requirements of the State contract and other State documents (RFP responses).
- Engaging with providers and providing subject matter expertise to provider relations and special investigations teams to recognize and mitigate clinical, billing or payment aberrancies.
- Assuring a good faith effort has been made to provide accurate reporting to all state, federal and accreditation agencies.
- Representing the organization at multiple State meetings to communicate plan performance with respect to contractual obligations.
- Monitoring quality of care to members and ensuring provider care and conduct is in accordance with state, federal and industry standards.
- Identification and reporting of any incidents of non-compliance.
- Leading the Quality Management and Improvement Program and adhering to state and federal guidelines, priorities and requirements in quality and patient safety. Ensuring clinical quality standards supported by all operational policies. Monitoring and reporting on quality metrics to relevant agencies.

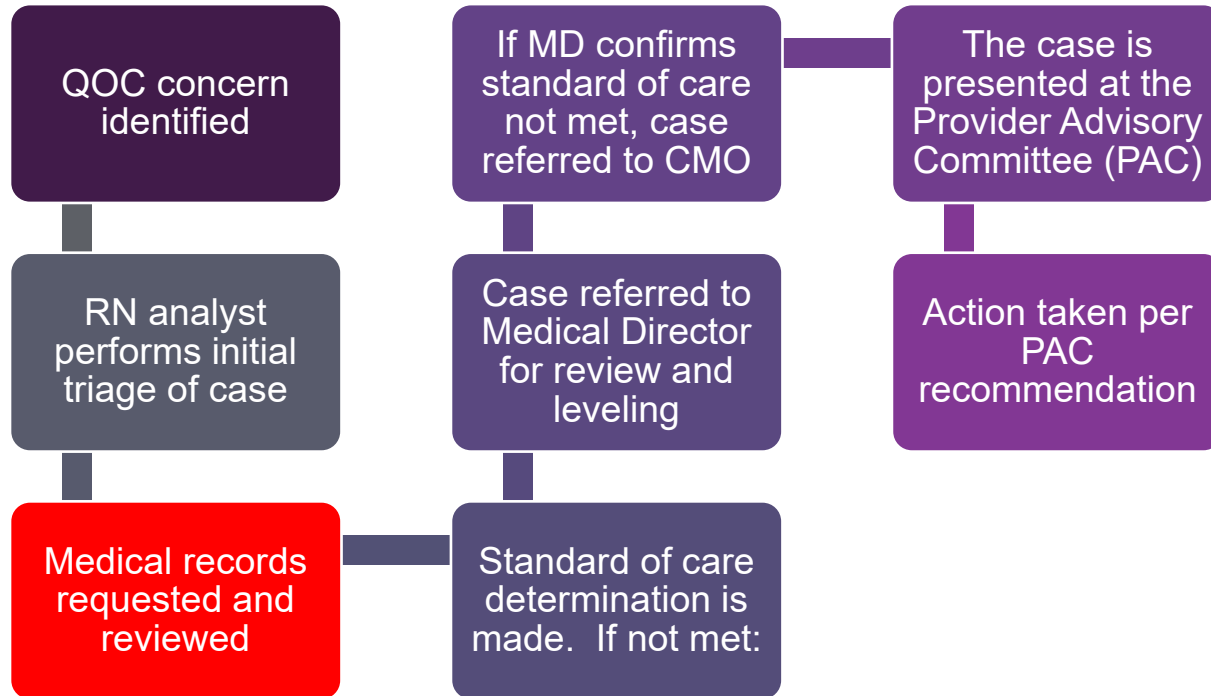


# The CMO and the Compliance Officer – "Battle Buddies"

- The Office of the Inspector General issued updated guidelines in November 2023 and noted several compliance risks that are under the purview of the CMO, including quality of care and oversight of contracted providers and vendors. Irregularities in these areas are subject to audit as they may cause member harm, overpayments and False Claims Act liability.
- Opportunities for the CMO and Compliance Officer (CO) to collaborate on the development and implementation of policies and procedures, provider engagement, vendor oversight and quality of care for members.
- Best practices include:
  - Touchpoints between the CMO and CO at a regular cadence
  - Inclusion of the Compliance Officer discussions regarding new initiatives and partnerships to identify regulatory considerations and potential risks
  - Collaboration between the CMO and Compliance Officer on issues regarding potential provider termination.
  - Consultation of the Compliance Officer by the CMO on acute health, welfare and safety concerns.
  - Incorporation of quality and patient safety into the compliance program.
  - Sharing learnings and best practices with the State to help improve processes, efficiency, and standardization between health plans.



# Refining the Quality-of-Care Process to Minimize Audit Risk

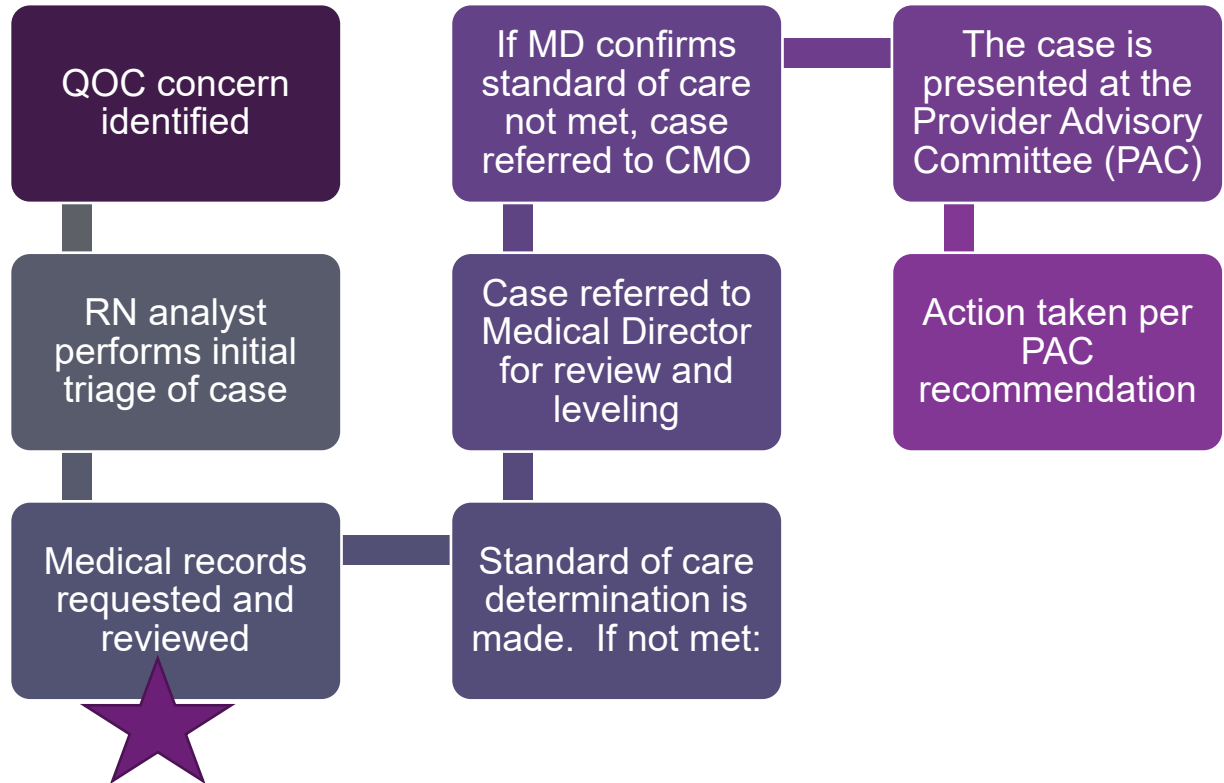


- We identified a challenge with obtaining necessary records from providers to properly evaluate quality of care (QOC) cases.
- A **cross-functional team, including the CMO, Compliance Officer, quality, provider relations, and special investigations unit, was assembled** to develop a strategy to improve enforcement of contractual obligations of providers regarding medical records.
- A new provider letter was drafted with relevant excerpts from the provider contract, as well as outlining potential future actions including prepayment review, practice site visits, reporting to credentialing, and/or contract termination. Letter to be sent certified to the Medical Director of the facility.
- **Standing meetings** were established with quality and provider relations to discuss outstanding medical record requests and plan outreach to relevant providers.
- This **new, collaborative process** can be leveraged for multiple other compliance-related business efforts, including audits, external quality review, etc.





# Refining the Quality-of-Care Process to Minimize Audit Risk



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- New provider letter was drafted with relevant excerpts from the provider contract, as well as outlining potential future actions including prepayment review, practice site visits, reporting to credentialing, and/or contract termination. Letter to be sent certified to the Medical Director of the facility.
- Standing meeting established with quality and provider relations to discuss outstanding medical record requests and plan outreach to relevant providers.



# Make the Investments Today to Yield Success in Your Performance Tomorrow



- **(E)fficiency:** Centralization, readiness, foundational knowledge and experience > muscle memory
- **(O)ptimization:** Streamlined facilitation, action-oriented activities prior to audit, effective and meaningful collaboration with business partners, measure your EOP annually. Risk identification applicable to other State or products.
- **(P)erformance:**
  - *Internal results* – dedicated savings, results in more with less, organization , onboarding savings - savings can be focused on organizational priorities, risk plan identification relevancy and quicker action.
  - *External Results* - Reduced findings, reduced penalty, increased trustworthiness, certain level of autonomy and influence on company priorities. Increased compliance program effectiveness through more effective risk identification and mitigation.



Questions?

