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# **Compliance Program Scorecard Development**

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### **Session Objectives**

- Understand the key elements of a compliance program scorecard
- Identify strategies to prioritize data to be reported based upon compliance risk mitigation
- Develop a baseline compliance scorecard

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### Why Scorecards?

- ✓ Effective Use of Data
  - ✓ Identify Key Performance Indicators (KPIs)
  - ✓ Aggregate Key Risk Data to Select KPIs
- ✓ Effective Management of Business Strategies
  - ✓ Visualization of Trend Shifts
  - ✓ Faster Response to Potential Issues
  - √ Concise Reporting Capabilities



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### Elements of a Scorecard

- ➤ Identified Metrics/Key Indicators
- >Thresholds for Improvement
- ➤ Reporting Periods
- ➤ Data Source
- ➤ Visual Presentation of Data

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### **Data Sources and Challenges**

- · Reliability and validity of data
- Ongoing data requirements
  - Ability to have data automatically reported to compliance vs compliance having to request data
  - Time and productivity element of data collection and reporting
  - Turf Issues related to data sharing (e.g, Risk Management, HR, IT etc)

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### **Key Indicators**

- Signed Acknowledgement Forms Submitted/Total Number of Employees
- General Training Completed/Total Number of Employees
- High Compliance Risk Training Completion/Total Universe Required
- LEIE Screening Completed at Time of Hire/New Hires during Period
- Provider Credentialing Completed/Number up for renewal

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### **Audience Participation**

- Identify key organization goals
- · Note rationale for determining goals
- · Identify Key Metrics
- · Determine ideal reporting timeframes
- Quantification and threshold identification
- Develop "draft" scope of data verification audits

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### **Case Study**

Mahalo Health System is a large, not-for-profit, multi-site health entity that includes 3 acute care facilities, outpatient services, HHA/Hospice, DME, behavioral health, SNF, rehab services, physician practice, and clinical research (in conjunction with University of Hawaii). The compliance officer (CO), in collaboration with the system internal auditor (IA), completed their annual compliance and audit risk assessment process that consisted of interviews with key leadership, review of internal and external surveys, audits and industry reports, and review of the OIG annual work plan. There were a number of risks identified, either subjectively through interview, or objectively through internal and external audit or survey results.

After consultation with senior leadership the identified risks were prioritized and a combined work plan was developed that included the prioritized risks as well as ongoing compliance program items.

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# Mahalo Compliance Related Risk Assessment Priorities

Non-Prioritized Risks	Priority 1-5
Clinical Research Billing Accuracy	
Compliance Culture – Fear of Reporting	
High Risk Job Specific Training	
HIPAA Privacy/Security Breaches - Potential	
Newly Acquired Cancer Center Operations	
Outpatient Department Billing	
Potential Stark Violations	
Use of Physician Extenders	
Priority Risk Value = 1-low to 5-high	


# Risk Ranking Compliance Risk Key Performance Indicators

Risk	KPIs	Timeframe	Milestone	Results
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## **Next Steps**

### **Evaluate Scorecard Effectiveness**

- 1. Annually review the currency of the indicator being monitored
  - ✓ Is it still relevant? Or has the problem been solved?
- 2. Update Scorecard with items of "value" to management and compliance
  - ✓ Based on risk assessment or identification of potential high area(s).

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