

Simply Compliance FY19/20, Episode 1

Simply Compliance has reached its second year with a new mission. This periodical will now educate providers regarding the focus of the Compliance Plan. The Corporate Compliance Officer annually solicits recommendations of critical compliance issues and prioritizes those issues to identify matters that are essential to our growth and success in the coming year. For this year, the Compliance Plan focus on two initiatives: i) the drafting of IPOS and Behavioral Treatment Plan documents that are truly “person centered”; and ii) consistent enforcement of disciplinary policies.

Quality Improvement, Utilization Management and direct care workers have all expressed a genuine concern regarding the formulaic language in the IPOS. Often, IPOS documents contain a broad recipe of services that seem to be tailored to the diagnosis and not the individual. The array of services must reflect the medical necessity of the individual as well as evidence based strategies linked to that person’s goals and objectives. Further, goals and objectives must be personal to the behavior and circumstances of the individual. For example, we all agree that an individual in SUD treatment should “work to change environmental triggers” but the IPOS should comprise a goal that is personal to the individual such as, “avoid known behaviors and individuals [such as...] that have repetitive links to substance abuse.” Similarly, the IPOS and any associated behavioral treatment plan must comprise consistent, plain language regarding the limitation that must be present in an individual’s environment. Of course, case managers play a critical role in the drafting of the IPOS but they are not alone in shouldering the responsibility to insure that providers and direct care workers deliver effective service.

Together, we have worked for a year to correct technical issues such as progress notes and CPT Code issues. Various departments of DWIHN have required corrective action plans with the understanding that providers will act in good faith to achieve compliance. Confronted with deliberate or negligent non-compliance despite education, quality improvement initiatives, and auditing and monitoring, we recognized that our compliance plan lacked accountability. Corporate Compliance in concert with Legal is working on a strategy to use remedies set forth in the Provider Contracts, such as withholding payments and discontinuing referrals, to facilitate timely responses from providers subject to corrective action plans. DWIHN must “maintain written policies that apply appropriate disciplinary sanctions on those officers, managers, supervisors, and employees who fail to comply with the applicable statutory and Medicaid program requirements, and with [DWIHN’s] written standards of conduct. These policies must include not only sanctions for actual noncompliance, but also for failure to detect non-compliance when routine observation or due diligence should have provided adequate clues or put one on notice. In addition, sanctions should be imposed for failure to report actual or suspected non-compliance.” DWIHN will consider mitigating factors such as the degree of intent, and whether the violation comprises a single incident or several purposeful or known incidents.