



Audit Protocol Workgroup

Rob Bremer

The Audit Protocol Workgroup has completed their BHO Auditing and Monitoring Procedures Recommendations document and associated audit tools. The recommendations were approved by the BHO Committee on October 19, and is pending final approval on October 26, by the CCQC Steering Committee. A training for all CMHCs and BHO high volume providers is scheduled for December 1. This training will outline requirements for CMHCs and providers to complete compliance plan self assessment and medical record documentation review. This training will also outline the new claims review process to be performed by the BHOs. Highlights of planned activities include:

Compliance Plan Self Assessment. This assessment will ask CMHCs and high volume providers to attest to the presence of an effective compliance program. The self assessment will cover the following elements:

Compliance policies and procedures	Role and duties of the Compliance Officer
Function of organization's compliance committee	Compliance training activities
Disciplinary policies related to compliance issues	Communication
Process to identify compliance risk areas	Non-retaliation
System for responding to compliance issues	

CMHCs and providers will need to certify this assessment and outline a plan for addressing any noted deficiencies. The purpose is to fully educate our providers about what elements a compliance plan requires. Providers who are able to attest to the existence of all elements will warrant less monitoring and oversight by the BHOs. We plan to ask CMHCs and high volume providers to complete this assessment in January 2012.

Medical Record Documentation. CMHCs and high volume providers will be asked to conduct their own peer review of five records randomly selected by their BHO. We currently plan to ask CMHCs and providers to conduct these reviews in May 2012. Another round is planned for October 2012.

Claims and Encounter Review. The BHOs will conduct a claims/encounter review of 50 randomly selected claims/encounters from each CMHC and high volume provider within our networks. These reviews include 14 elements related to the validity of the encounter/claim. Unlike the "411" audit, we will review the treatment plan's relation to the service. These audits will have a very definite technical assistance focus and are intended to help providers understand their potential audit risk from a state or federal claims audit. The first round is planned for April 2012 with a follow-up planned for October 2012. Based on federal rules, fatal errors will require the BHO to recoup the claim or reverse the encounter. CMHCs will not be required to pay for invalidate claims. Rather, the BHOs will reverse the encounter submitted to HCPF for rate setting.

The BHO are forming a Compliance Committee to execute the implementation of these recommendations and work together on common compliance issues. A key advantage of this committee is that all BHOs have agreed to accept the reviews conducted by their area BHO. This means that all CMHCs and high volume providers will only be reviewed by one BHO. The BHO Compliance Committee will continue working on concerns around the sharing of this information. No PHI will ever be shared. We only intend to share the results (i.e. scores) of the audits. This more efficient use of our resources will allow the BHOs to focus on higher risk areas.

We should emphasize that this is intended to be a learning process, not a punitive, "gotcha" exercise. It is intended to prepare us as a behavioral health system for State and Federal audits. Do not think that audits are not imminent. CMS is currently conducting its second review of managed care plans in Colorado. The last was on 2009. Additionally, Health Care Policy and Financing just executed its contract with their Recovery Audit Contactor (RAC). Section 6411 of the PPACA requires States to contract with RACs to identify and recover Medicaid overpayments.

The training on December 1, is also intended to answer questions about the process. Please be sure that your center is represented.

News Flash!!!!

The Department of Health Care Policy and Financing has awarded the Recovery Audit Contactor (RAC) contract to *CGI Federal, Inc.*, a nationally recognized vendor, to perform Colorado's auditing obligations under section 6411 of the Patient Protection and Affordable Care Act (ACA). Under the ACA, each state must contract with a *contingency-fee-based vendor* to review provider claims for overpayments and underpayments. CGI Federal will audit the following kinds of claims: Medicaid Fee-For-Service, Medicaid Waiver Service, Medicaid Managed Care and CHP+. Inpatient hospital claims are excluded. More information about the RAC program is available at <https://www.cms.gov/recovery-audit-program/>

Compliance Program Development

Erica Arnold-Miller

Audit requirements regarding federal sub-recipients: the workgroup reviewed the email on this topic from the HCPF Contract Manager, discussed and agreed there was no additional follow-up necessary on this topic. If there are any changes regarding oversight or auditing, Compliance Officers should be notified.

Policy on self-disclosure to BHOs regarding provider encounter errors or overpayments for services: Mary Thornton located a

policy regarding self-disclosure on the State of New Jersey's Medicaid Fraud Division website. The workgroup reviewed it together and agreed that the policy on the website could be adapted for use by the Colorado BHOs.

The policy is being adapted and will be sent to workgroup members for input, then to the BHOs for review/approval. The policy draft is scheduled to be completed prior to the end of October.

Board presentation on compliance: The workgroup reviewed the draft presentation, as well as input received on the presentation thus far. Several revisions to the presentation were made. Following final edits, the presentation will be sent to workgroup members for review and input. It will then be distributed to the BHO and Community Mental Health Center Executive Directors to be adapted for organizational use. The presentation is scheduled to be completed by the end of October.

Basic Documentation & Training Workgroup

Vicki Rodgers

The Basic Documentation and Training Committee has been very busy over the past couple of months completing training and manuals for distribution to all of the CMHCs and BHOs.

Train the Trainer Seminar for Documentation and Compliance – 77 people from across Colorado met in Colorado Springs for 2 days to work with Mary Thornton and this committee to be trained on best practices for clinical documentation. The goal is for the trainers to take this information back to their Centers or BHOs and train them using the materials in the next few months. The evaluation results of the event indicated that participants were very pleased with the materials, trainer, and overall train-the-trainer format.

The following work products from this committee have been posted to the CBHC website under the CCQC tab:

- Train-the-Trainer Manual including chapters on overview/key concepts, mental health services and payers in Colorado, recovery orientation to service delivery and documentation, laws and audits related to documentation and corporate compliance, narrative descriptions of clinical documentation based on the Golden Thread concept and inclusion of medical necessity, grids of problems/symptoms for adults and children, grids of Colorado documentation requirements and examples.
- Train-the-Trainer PowerPoint that can be modified for each center and BHO when they do training with staff.
- Clinician "mini" manual is set up so the trainers can print the relevant section(s) as needed for documentation training that best suits their staff and this is written in a more clinician friendly manner without the full background that was relevant to the trainers.

The remaining work for this committee is to follow up with the trainers on any remaining documentation requirements that are still being discussed.

I would like to take the opportunity to thank the members of this committee for their hard work and dedication to this project! This is also the team that put together the CCQC Regional Trainings for managers that kicked off this project. They have done excellent work and research to help us all reach new goal of compliance with clinical documentation. Also, thanks so much to Mary and Charlotte for their work with this group.

If you have any questions, comments or concerns, please contact:
Charlotte Yianakopolus-Veatch:
charlottey@spmhc.org
or Kari Snelson: ka-