

DEPARTMENT OF ANESTHESIOLOGY
CREIGHTON UNIVERSITY MEDICAL CENTER

COMPLIANCE PLAN

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Compliance Plan for Creighton University Medical Center Department of Anesthesiology

Introduction

The Department of Anesthesiology at Creighton University has developed this compliance plan in accordance with the Creighton University Compliance Plan for Health Sciences Billing and Patient Services. The purpose of this manual is to provide each faculty, CRNA and resident physician of the Creighton University Department of Anesthesiology with information regarding appropriate documentation requirements in the medical records that support the billing of all professional fees as well as other pertinent compliance standards.

This plan will cover all services performed by the department including inpatient and outpatient care at Creighton University Medical Center, acute and chronic pain management at Creighton University Medical Center and anesthesia and pain management services provided at any off-site facility that are billed under Creighton's tax ID number.

This plan will be reviewed every 2 years or more often as necessary due to changes in law, regulations or payer requirements and revised accordingly.

Internal audits by the Department will be conducted in accordance with Creighton University School of Medicine policy to ensure compliance. These are done quarterly by the Department Compliance Liaison Physician(s) or their designee.

The results of the quarterly audits are reviewed with the individual providers. These results are reported to the Creighton University Billing Compliance Office each quarter with a final report issued for the calendar year.

Compliance Oversight and Involvement

Department Physicians, CRNA's, and Support Staff are expected to follow compliance directives received from the Creighton University Compliance Director, appropriate designee and/or Compliance Liaison Physician(s). Any questions regarding compliance directives shall first be directed to the individual issuing the directive and if the issue cannot be addressed at the Department level then to the Creighton University Compliance Director (280-2107).

The Department of Anesthesiology Compliance Committee usually meets on a quarterly basis. The committee will consist of the Compliance Liaison Physician(s), the Department of Anesthesiology Billing Manager, the Department Chairman, and the Department Administrator or their designees. The committee members will decide the

time and place of the meeting. The committee will review the results of the audits during these meetings to ascertain trends or global issues of noncompliance or concern.

Compliance Liaison Physician(s)

The Compliance Liaison Physician(s) is responsible for compliance oversight for the Department of Anesthesiology and reports to the Department Chair. The Liaison Physician(s) is the department representative on the Creighton University Compliance Liaison Committee.

The Compliance Liaison Physician(s) is responsible for overseeing the Department's billing compliance plan, making recommendations regarding changes to the department practice to enhance compliance, updating the compliance plan, and submitting a quarterly compliance status report to the Creighton University Compliance Office. The Compliance Liaison Physician(s) has the authority to take corrective action where necessary.

The Compliance Liaison Physician(s) will be appointed by the department chair and his/her performance will be evaluated on an annual basis along with his/her FPC (Faculty Production Compensation) evaluation. If services provided by the Liaison are insufficient, the chair reserves the right to remove him/her from the position and appoint a new Liaison.

Teaching Physician/Medical Direction

The teaching physician is ultimately responsible for the patient care provided and for the assurance of accurate documentation and billing.

Anesthesia services documentation must include that the provider/teaching physician:

1. Performed a pre-op anesthetic exam and evaluation
2. Prescribed the anesthesia plan
3. Personally participated in the most demanding aspects of the anesthesia plan including induction and emergence if applicable.
4. Ensured that any procedure in the anesthesia plan that he or she did not perform was performed by a qualified individual.
5. Monitored the course of anesthesia at frequent intervals.
6. Remained physically present and available for immediate diagnosis and treatment of emergencies.
7. Provided indicated post anesthesia care.

The physician shall medically direct no more than four anesthesia services concurrently. The physician shall not perform any other services (exceptions noted below) while he or she is medically directing services so that all of the conditions for medical direction are met. The exceptions include the following: The physician can attend to medical emergencies of short duration and perform other limited services such as administering an epidural or caudal anesthetic to ease labor pain or periodic rather than continuous monitoring of an obstetric patient and still meet the criteria for medical direction.

The physician alone inclusively documents in the patient's medical record that the medical direction requirements have been met, specifically documenting that he or she performed the pre-anesthetic exam and evaluation, was present during the most demanding procedures including induction and emergence if applicable, and provided indicated post anesthesia care.

Non-Medically Directed CRNA Guidelines

A CRNA providing non-medically directed services must document in the medical record that he or she performed the pre-anesthetic exam and evaluation, prescribed the anesthesia plan, personally participated in the most demanding procedures in the anesthesia plan, including induction and emergence, if applicable, and provided post-anesthesia care.

E/M Guidelines

The appropriate level of E/M services should be based on the "1995 or 1997 Documentation Guidelines for the Evaluation and Management Services" developed by the American Medical Association and CMS. The classification of E/M services is divided into broad categories such as office visits, hospital visits, and consultations. Most of the categories are further subdivided into new patient or established patients. A new patient is one who has not received any professional services from the physician or another physician of the same specialty who belongs to the same group practice, within the past three years. A copy of the Creighton University Department Policies and Procedures regarding consultations can be found on the Creighton University Web Site at www.creighton.edu/billingcompliance. All other guidelines are strictly limited to what is provided in the current CPT book or payer guidance. This will also include guidelines and requirements necessary for the use of modifiers. The subcategories are then classified into levels of E/M services that are identified by specific codes. To determine the appropriate level to bill the physician needs to consider the extent to which the history is reviewed, the depth of the physical examination, and the difficulty of the decision making involved. If the level of service is not supported by documentation in the medical record, the claims filed may be considered fraudulent and may result in the need to refund payments, and other possible penalties.

The teaching physician must personally document in the medical records, either in writing or by dictated note, his or her participation in any service where a resident is actively involved, at the time the service was provided. The teaching physician is ultimately responsible for the patient care provided and for the assurance of accurate coding and billing.

Compliance Standards

Numerous federal and state laws and regulations define and establish obligations for the health care industry with which Creighton University employees and agents must comply. Any employee and /or agent who violates these laws and /or regulations not only risks individual indictment, criminal prosecution, and penalties, but also subjects Creighton University to the same risks and penalties. Any Creighton University

employee or agent who violates these laws may be subject to immediate termination of his or her association and/or employment with Creighton University.

Claims should not be submitted for reimbursement unless services provided are substantiated by documentation in the medical record according to payer guidelines. A qualified provider (Anesthesiologist/CRNA) of the Department of Anesthesiology will prepare and approve all bills submitted for coding. The accuracy and completeness of the documentation is the responsibility of the qualified provider of the Department of Anesthesiology.

Department Education and Training

The Creighton University Billing Compliance Office and the Department of Anesthesiology work collaboratively to ensure that faculty, CRNA's and staff receive the appropriate training regarding compliance issues.

The Creighton University Compliance Director provides new faculty, CRNA's and staff an overview of the Creighton University Compliance Plan during orientation. The Department Compliance Liaison Physician(s) provides new faculty, CRNA's and staff orientation to the Department of Anesthesiology Compliance Plan and guidelines for documenting. New employees are required to sign a compliance acknowledgement form, which is sent to the Creighton University Billing Compliance Office. New faculty are required to complete the initial teaching physician training and, as applicable, basic E/M documentation training. New faculty and CRNA's are required to complete the Department's most recent annual compliance training.

Residents affiliated with training programs outside of CUMC and those affiliated with training programs within CUMC shall be required to complete any mandatory compliance training at their home institution or home department.

The Compliance Liaison Physician(s) schedules at least one mandatory compliance in-service per year for faculty, CRNA's, and selected staff. Faculty, CRNA's, and staff shall attend other mandatory training as designated by the Department of Anesthesiology Compliance Committee or the Billing Compliance Office. Attendance is documented and sent to the Creighton University Billing Compliance Office. Mandatory sessions shall be made available via the University's on-line training site for those who are unable to personally attend the session. Those who are unable to attend must complete the training within thirty (30) days of the training date (unless otherwise waived by the Compliance Director) and provide verification to the Creighton University Billing Compliance Office. Faculty, CRNA's and staff who fail to attend mandatory compliance training will be subject to sanctions as described in the Corrective Action Plan – Mandatory Training Policy of the School of Medicine Policies and Procedures.

It will be the responsibility of the Compliance Liaison Physician(s) to identify those requiring remedial education and to make sure faculty, CRNA's, and staff receive updated information regarding compliance issues in a timely manner. The information would include coding references, carrier newsletters, Medicare manuals, Federal regulations, CMS interpretations, and materials published by the American Society of Anesthesiologists and other relevant professional societies. The Department of

Anesthesiology will compile this information and file it with the Compliance Plan for reference.

Department Monitoring

Regular Annual Audit: Random chart review will be at a rate of ten (10) charts per year per provider. If an audit score (for all errors, regardless of the responsible party) for a provider is 3 points or less in a calendar year, that provider's encounters will not need to be audited during the next calendar year. However, a provider whose audit score is 3 points or less will be audited at least every 2 years. The charts and charge tickets will be pulled at random by the billing office. The charts will be audited, on site, quarterly by the Compliance Liaison Physician(s) or their designee. All charts will be audited using the audit worksheets provided by the Creighton University Billing Compliance Office. All deficiencies will be noted on the Audit Face Sheet and copies of the chart notes, charge ticket and any other pertinent records will be forwarded to the Creighton University Billing Compliance Officer. A summation of the point system for regular annual audits is as follows:

0-6 points – Notification of findings, no additional action necessary.

7-12 points – Written notice will follow the review and additional training will be scheduled.

13-18 points – Written notice will follow the review, additional training will be scheduled, prospective audit by billing staff, and a re-audit in 60 days.

19+ points - Written notice will follow the review, additional training will be scheduled, prospective audit by billing staff, and a re-audit in 30 days.

Corrective Action Plan Audit: Anesthesia providers who receive thirteen (13) or more points on a quarterly audit will be re-audited according to the corrective action plan. The prospective audit by the billing staff will continue until the anesthesia provider receives less than thirteen (13) points. See Attachment A.

New Provider Audit: New providers will have their initial encounters audited prospectively according to Creighton University School of Medicine policy. Findings will be tied to the Corrective Action Policy. A copy of the findings will be given to the provider and all documentation sent to the Creighton University Billing Compliance Officer for review and permission to begin billing for the new provider's services.

If non-compliant conduct is suspected after a departmental review, the review will then be addressed by the Creighton University Compliance Director and the Creighton University General Counsel.

If an error is found for a charge that has already been submitted, the billing manager will be notified immediately so that corrective action can be taken.

A quarterly report of compliance activity will be sent to the Creighton University Billing Compliance Office. The quarterly report shall include a status report on department

monitoring activities, compliance issues/resolutions, department specific compliance policies/procedures/forms adopted during the quarter and any corrective actions taken related to compliance.

Reporting and Investigation of Non-Compliant Conduct

Issues of significant concern or identified billing errors are reported to the Creighton University Billing Compliance Office immediately. The Creighton University Compliance Director assists in the determination of the actions that should be taken by the Department.

Members of the Department of Anesthesiology are instructed to report any problems or non-compliant conduct to their immediate supervisor or the Compliance Liaison Physician(s). The Compliance Liaison Physician(s) will investigate and take appropriate action with assistance from the Department Chairperson to resolve the problem through education, training and refunding of any overpayment received and shall notify the Creighton University Compliance Officer of any pattern of non-compliance. If any problems cannot be resolved at the department level, they will be reported to the Creighton University Compliance Officer for resolution. In addition, any member of the Department of Anesthesiology may report suspected non-compliant conduct through the confidential Creighton University Billing Hotline (402) 280-2107. No one within the Department of Anesthesiology shall retaliate against anyone reporting any problems or suspected non-compliant conduct. Appropriate disciplinary actions will be taken against individuals engaging in such retaliatory behavior.

The Compliance Liaison Physician(s) and all members of the Department of Anesthesiology shall assist the Creighton University Billing Compliance Office in any internal investigation of suspected non-compliant conduct.