POLICY TITLE: CMP09 Routine Monitoring, Auditing and Identification of Compliance Risk



One Goal. One Priority. Your Healthcare.

REVIEWED BY: AZPC Compliance Officer

APPROVED BY: Compliance Committee

REVIEW DATE: | **EFFECTIVE DATE:** 11/09/2019 | 12/01/2019

APPROVAL DATE: 11/11/2019

PURPOSE:

To ensure that Arizona Priority Care's (AZPC) Compliance Plan contains an effective system for routine monitoring in order to identify potential compliance risks. In addition, this system evaluates AZPC's First Tier, Downstream & Related Entities' (FDR) compliance in accordance with State, Federal and other regulatory requirements by conducting both internal and external auditing in order to uphold its program effectiveness.

POLICY:

It is AZPC's policy to comply with applicable State, Federal and other regulatory requirements, including complying with CMS standards. AZPC routinely conducts risk assessments by monitoring and auditing for the possibility of noncompliance issues including potential Fraud, Waste and Abuse (FWA).

PROCEDURE:

The monitoring and auditing activities will consist of, but not limited to, the following processes:

- 1. Annual audit ensuring that all persons involved in the operations of AZPC, have completed the required training and testing in FWA, HIPAA, Cyber Security, Code of Conduct, Model of Care, Cultural and Linguistics, Harassment, and Injury & Illness Prevention.
- 2. Required audit confirming that all persons involved in the operations of AZPC have been checked against the OIG/GSA Exclusions lists before hire or contracting and monthly thereafter.
- 3. Review that all Business Associate Agreements explain the necessary requirements for achieving regulatory compliance, and that all Business Associates are monitored and held according to these expectations.
- 4. AZPC will annually audit at least 5% of its FDR population based on results of internal risk assessments, billing analysis, and/or a random sampling (refer to the HPN/AZPC FDR Auditing and Monitoring Tool). FDR auditing to include, but not limited to the following:
 - a. Annual FDR attestation indicating adherence to all CMS, state, and federal requirements;
 - b. Effective Compliance Program and related Policies & Procedures;
 - c. OIG/GSA screening prior to hire and monthly thereafter; and

POLICY TITLE: CMP09 Routine

Monitoring, Auditing and Identification of

Compliance Risk



- d. FDR and staff Compliance training conducted within 90 days of hire/contracting and annually thereafter on the following modules: CMS Fraud, Waste, and Abuse and Compliance, Code of Conduct, HIPAA, Cyber Security, Model of Care, and Cultural Linguistics.
- 5. Additionally, to monitor compliance and program effectiveness, all FDRs are required to annually provide AZPC with an attestation indicating adherence to all CMS, state, and federal requirements, including:
 - a. FDR maintains an effective compliance program;
 - b. FDR screens all employees, officers, and vendors against the OIG/GSA Excluded Persons Lists prior to hire/contract and monthly thereafter;
 - c. FDR and staff have completed all required and initial new hire and annual trainings (CMS FWA and Medicare Compliance, HIPAA, Cyber Security, Model of Care, and Cultural Linguistics).
- 6. Internal audits are conducted annually or more often as deemed necessary and include: regular monitoring that OIG/GSA Exclusions Lists are conducted prior to hire and monthly thereafter, privacy walk-through assessments, compliance program and policy adherence, and other areas deemed necessary by risk.
- 7. Audit findings and breaches of noncompliance are appropriately tracked and held as a basis for prioritizing compliance activities such as the need for retraining, changing and/or updating the Compliance Plan and AZPC's policies and procedures.
- 8. Results of such monitoring, auditing and any identification of compliance risks will be shared with committee members, sub-committee members, the Board of Directors, senior management, and health plans as required. Results will also be communicated during quarterly compliance meetings, or more frequently depending on the severity of the risk identified.
- 9. Recommendations, corrective action plans, and any disciplinary actions (if applicable) will be determined within 10 days of findings.

MONITORING AND REPORTING

Schedule of Reports					
#	Report Name	Description	Report		
			Frequency		
1	Compliance_FDR Attestation	To ensure FDRs attest to compliance	Quarterly		
	Collection_Report	standards annually.			
2	Compliance_OIG and GSA Exclusion	To ensure employees are screened Ad he			
	Screening_Report	prior to hire and monthly thereafter.			
3	Compliance_Training Roster_Report	To ensure all AZPC employees Quarterly			
		complete training timely.			

POLICY TITLE: CMP09 Routine

Monitoring, Auditing and Identification of

Compliance Risk



DEFINITIONS:

None

REFERENCES:

42 CFR §422.503(b)(4)(vi)(A-G) Medicare Managed Care Manual, Chapter 21

APPENDICES:

FDR Compliance Attestation Cover Letter Template FDR Compliance Attestation Compliance Program Location Incident Notification Log Internal Audit Tool Privacy Confidentiality Walk-Through Checklist Business Associate Agreement Template FDR Audit Tool

POLICY TITLE: CMP09 Routine

Monitoring, Auditing and Identification of

Compliance Risk



DOCUMENT REVISION LOG

Date	Document Modification (including deletions)	Page(s)	Location
11/2019	Transfer to AZPC template	All	All