
Annual Compliance Work Plan – Calendar Year 2017

Purpose and Organization

The Lake County Health Department and Community Health Center Compliance Program Work Plan (Work Plan) describes activities in support of the Agency's Compliance Plan during the calendar year 2017. It is used to provide a structured approach to implementing ongoing activities such as compliance program audits as well as "one time" projects intended to improve processes or program results. The Work Plan is organized to support the seven elements of a Compliance Plan.

Written Policies, Procedures and Standards

Policies Work Plan for Calendar year 2017

1. Deploy new policy focused intranet site for access by all staff – (Q1 2017)
2. As part of the communication to launch the Policies intranet page, assure that the message includes explanation for the connection to the Compliance Program. – (Q1 2017)
3. Following the rollout of all revised policies through the planned intranet site, meet with key staff to determine if further policy revisions or additions are necessary. – (Q2 2017)
4. Review and update relevant policies to meet changes in regulations, rules, and guidance from relevant government entities, associations, and partner organizations. Topics include, but are not limited to compliance, fraud, waste, abuse, information privacy, and information security. – (Ongoing in 2017)

Designation of a Compliance Officer and Compliance Committee

1. Evaluate the components in support of the Compliance structure, including the Compliance Officer, Compliance Committee, Compliance/Privacy/Security Group, and related administrative support to determine that adequate resources are devoted to administration of the compliance program– (Q2 2017)

Effective Training and Education

Develop/update training for the following compliance topics

1. Update or develop training on relevant compliance topics for all staff either as new employees or annually thereafter.
2. Develop/update training modules on the following compliance topics unique to staff roles:
 - Financial Policies with a focus on Revenue Cycle Project (Ongoing 2017)
 - Health Information Privacy and Security (Q3 2017)
3. Pending the approval of a Code of Conduct, prepare and distribute to all staff – (Q2 2017)

Communication between Compliance Officer and Employees

Communications Work Plan for Calendar year 2017

1. With the results of the quarterly Perception Surveys, determine strategies to help address any identified areas for improvement. – (Q3 2017)
2. Compliance Officer will attend meetings of at least ten sites or staff meetings. (Q4 2017)

Internal Monitoring and Auditing

Monitoring and Auditing Work Plan for Calendar year 2017

1. Complete and track Key Performance Indicators for the Compliance Program (Q1 2017)

2. Conducting HIPAA/HITECH audit and act on findings or recommendations (Q3 2017)
3. Review and audit provider's documentation and the assignment of accurate diagnosis and procedure codes to be performed on a monthly basis (Q1 2017)
4. Provide group and 1:1 training to improve provider documentation, coding accuracy and revenue cycle reimbursement based on deficiencies identified in monthly audits (Q1 2017)
5. Develop guidelines and reports to assure contracted pharmacy compliance with 340B requirements acting on our behalf (Ongoing 2017) Phase 2 of the project with the consultant is starting in February 2017. In their 2017 Work Plan, the Department of Human Services Office of Inspector General identifies states' managed care organization Medicaid drug claims as an area of focus.

Response to Violations and Development of Corrective Actions

Response and Corrective Action Plan for Calendar year 2017

1. The Compliance/Privacy/Security Group will assess alternatives for retaining and tracking identified issues, trends, resolution, and follow-up. Technology solutions will be optimized and shared with key staff to help assure awareness across operational areas. (Ongoing 2017)