

Using OIG Guidances for Long-term Success

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Change is a constant in the long-term care (LTC) industry. As one of the most highly regulated industries, it has undergone major transformations during the past 15 years, including a complete overhaul of the survey and enforcement process, implementation of the Minimum Data Set and the prospective payment system for Medicare reimbursement, plus many other significant changes.

Further, federal regulations and guidelines continue to be issued by Congress, the Health Care Financing Administration, the Office of the Inspector General (OIG), and state survey and Medicare agencies. One of the biggest challenges facing HIM professionals in LTC is keeping up with these changes and comparing regulations and standards to determine the most stringent.

The most recent set of guidelines for the LTC industry came from the OIG in the form of final compliance guidances, published in the March 16, 2000 Federal Register. According to the OIG, the compliance guidances will serve as a positive step toward promoting a higher level of ethical and lawful conduct throughout the healthcare industry. LTC HIM professionals embrace these guidances because they support the principles of accurate documentation and coding that we have always preached to LTC clinicians and administrators. This is a terrific opportunity for HIM professionals to demonstrate their skills when assisting LTC facilities with implementation of these guidances.

Where to Begin?

As an HIM consultant, director, or staff member in LTC, how do you begin to implement the compliance guidelines? With so many regulations and surveys facing the typical LTC facility, staff and administration may initially view the compliance guidelines as an unnecessary bureaucratic hassle because a compliance program is voluntary. Start by selling the positive aspects of a well-functioning compliance program.

Next, each HIM professional should determine with which elements of the compliance program they can provide assistance to the facility. Following are the seven elements of an effective compliance program as outlined by the OIG in the final compliance guidelines for LTC:

- implementing written policies, procedures, and standards of conduct
- designating a compliance officer and compliance committee
- conducting effective training and education
- developing effective lines of communication
- enforcing standards through well-publicized disciplinary guidelines
- conducting internal monitoring and auditing
- responding promptly to detected offenses and developing corrective action

Check Your Qualifications

HIM professionals are in a unique position to provide expertise related to many of these elements. However, each HIM professional must assess his or her own professional capabilities to identify strengths and areas of potential risk. Take a personal inventory by asking yourself the following questions:

- In which areas am I qualified to consult, review, or audit?
- Do I feel qualified to implement a facility-wide compliance program that would entail duties outside my scope or should I focus on one or two specific areas?

- What are my strengths?
- In which areas do I need additional training?
- What are my areas of responsibility and authority within the LTC facility?
- Am I interested in expanding my role within the facility?
- How much do I know about the billing process?

It is important that the HIM professional work only in compliance areas

in which he or she is trained and qualified to avoid exposure to risk areas related to legal and financial liability. Besides consulting or advising LTC facilities in areas in which he or she is unqualified, other actions that may expose an HIM professional to legal risk may include inadequate report writing, failure to thoroughly audit, and failure to adequately train staff.

Make a List

The next step in the HIM implementation of a compliance program is to list the items related to the program for which you are responsible. Based on an HIM professional's role as a consultant or staff member in an LTC facility, this checklist would primarily contain issues related to information flow, system, communication, coding, and accuracy and timeliness of documentation. Other audit tools related to documentation or billing audits could be used as well. For example, the checklist might include a review of diagnosis coding, which would include questions about who performs the coding, coders' credentials and training, and when the diagnoses are coded. Separate, specific audit tools for detailed review of medical records and billing forms to determine coding accuracy would be used in conjunction with the checklist.

Build a Manual

Every HIM professional responsible for any portion of a facility's compliance program should establish a resource manual or file. The resource manual itself is part of the compliance program because it demonstrates an effort to keep informed about the most current regulations and professional practice standards.

This manual should include at least the following documents: the OIG final compliance guidances as published in the March 16, 2000, *Federal Register*, the facility's compliance program, AHIMA publications related to coding and professional practice standards, fiscal intermediary newsletters and bulletins, PPS final rule, MDS 2.0 manual and subsequent updates from HCFA, current ICD-9-CM and CPT coding manuals, Medicare manual, and related facility policies and procedures. This file must be kept up to date. Further, consider bookmarking useful Web sites in your browser for reference, including the OIG Web site at www.hhs.gov/oig, for updates on OIG compliance activities including newly identified target areas.

Review the Policies

The compliance program needs to include a review of medical record-related policies and procedures. Facility policies must match the compliance program. For example, if the compliance program states that medical records will be retained for 10 years after final settlement of the Medicare cost report and the facility policy manual states that medical records will be retained for 10 years after a resident's final discharge, the policy manual must be updated to reflect the same policy as the compliance plan.

In the OIG final compliance guidances, the following policies/procedure subject areas are specifically mentioned: creation, distribution, retention, destruction, confidentiality, and complete and timely documentation. Update your policies and procedures to make them "compliance friendly" by including language found in the final compliance guidelines. The most important part of the compliance program, however, is ensuring that staff are actually following the policies and performing the procedures as outlined in the policy manual. A compliance program that looks great on paper but isn't actually implemented in day-to-day operations will put the facility at greater legal and financial risk than if there was no compliance program at all.

The OIG final compliance guidances for LTC support HIM professionals' long-standing commitment to accurate documentation and coding. More importantly, they provide structure and direction for HIM professionals to utilize their expertise in helping LTC facilities implement effective compliance programs.

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