Compliance Training Plan

CIA Reporting Period 3

In accordance with the University of Missouri Health System (UMHS) Corporate Integrity Agreement (CIA) at Section III.C, UMHS shall develop a written plan outlining the steps UMHS will take to ensure that all Covered Persons receive adequate training regarding the CIA, Compliance Program and Code of Conduct, as well as all appropriate Covered Persons receiving training to support reimbursement regulations and obligations.

**Executive Summary**

UMHS strives to provide high-quality compliance training to faculty and staff in an interactive and convenient format designed to encourage completion and retention. Topics include annual mandatory training on general compliance issues, as well as education for employees to identify and avoid fraud, waste and abuse situations. Specific training programs are designed to support those employees with particular job functions, such as medical record documentation, coding and billing practices, and research compliance. Online training modules are supplemented with instructor-led sessions in both general (new employee sessions) and specific groups trainings (clinical departments, coders/billers, physicians, organization leaders) based upon areas of service or regulatory changes.

In fall 2016 and in accordance with the CIA, UMHS documented the training activities into a written plan. This plan was submitted to the OIG for approval and returned without changes. In October 2017, UMHS took the opportunity to review the plan and proposed updates which were not modified by the OIG prior to implementation.

**Training Plan**

Mandatory on-line coursework is organized into three web-based curriculum libraries. UMHS delivers these courses through our learning management software platform, Saba, and the compliance content is provided by HCCS. UMHS was able to customize these curriculum sets with course selections from all three libraries of compliance training courseware. Covered Employees are assigned mandatory courses based on job duties and expectations, but have access to all courses in all libraries should they wish to complete additional training modules.

**Compliance Training Coursework**

In addition to the UMHS Code of Conduct and the CMS Fraud, Waste and Abuse modules, the compliance online training libraries are as follows:

**Corporate Compliance:** This course set is primarily aimed at the general work force. Courses contain an overview of the seven elements of an effective compliance program, the importance and evaluation of an effective programs, areas of
compliance risk, documentation and reimbursement compliance, and other risk areas such as confidentiality, conflicts of interest and illegal provider relationships, EMTALA, False Claims Act, and the OIG work plan. A competency quiz is provided after each module.

**Professional Services Compliance Course:** This set is designed for physician and non-physician providers, including residents. Coursework in these modules dive deeper into anti-kickback and Stark legislation, as well as training in documentation best practices. Additionally, a module on requirements for teaching physician supervision of services rendered by residents is included in this set. A competency quiz is provided after each module.

**Documentation for Quality Care:** This set is aimed at Covered Persons identified as performing billing and/or coding services on behalf of UMHS, as well as physicians and non-physician providers. This track focuses on best practices for medical record documentation, maintaining accurate and complete records, and risk areas such as copy-paste practices. A competency quiz is provided after each module.

**Categories of Covered Persons**

Identification of Covered Persons is based upon the definition contained in the CIA at Sections II.C.1. a, b and c. The UMHS Center for Education and Development receives employee data updates through a direct feed from UMHS’s Office of Human Resources. Because this feed contains all employees, the Office of Corporate Compliance works with the Center for Education and Development to review and confirm that the individuals meeting the definition of Covered Persons are included and to assign the appropriate compliance training modules.

**Training Assignments for Covered Persons**

Each Covered Person is assigned a set of courses based upon job responsibilities at UMHS. While certain courses are set as mandatory, our ability to incorporate all compliance modules into the library of available courses gives us flexibility throughout the year to identify and assign additional training as necessary to specific individuals – either as a result of a corrective action plan or simply to enhance their learning on a particular compliance topic.

Mandatory course sets are as follows:

- **All Covered Persons Set**
- UMHS Code of Conduct
- CMS Fraud, Waste and Abuse
- Professional Compliance: Compliance Program
- Corporate Compliance: Compliance Risk Areas
Physicians/Non-Physician Providers Set
All Covered Persons Set (described above)
Documentation for Quality Care: Best Practices for Medical Documentation
Documentation for Quality Care: Documentation Pitfalls
Corporate Compliance: Other Risk Areas
Professional Compliance: Teaching Physician Rules

Billers/Coders Set
All Covered Persons Set (described above)
Documentation for Quality Care: Best Practices for Medical Documentation
Documentation for Quality Care: Documentation Pitfalls

These mandatory sets are the base expectations to document completion of mandatory compliance training for Covered Persons. Additionally, the instructor-led compliance orientation for all employees and other training sessions discussed in the summary section above continue as part of the compliance education offerings for UMHS employees, faculty and staff. UMHS also added a specialized instructor-led session offered twice annually for new leaders in our organization.

In addition to the online and instructor-led training options, employees are encouraged to access the compliance website for more information on policies and procedures addressing areas such as coding and billing, medical record documentation, reimbursement statutes, other regulations and requirements, legal sanctions for violations of federal health care programs. This site also contains electronic versions of the UMHS Code of Conduct Manual and contact information for our office and the anonymous reporting hotline.

Length of Training

The length of training for each track varies depending upon job responsibilities.

- All Covered Persons are assigned the “All Covered Persons” set, which is expected to take approximately ninety-four (94) minutes.
- All physician, non-physician providers and residents are assigned the “Physicians/Non-Physician Providers” set, which is expected to take an additional sixty-six (66) minutes, for a total of 2 hours and 40 minutes.
- All Covered Persons with billing and/or coding responsibilities are assigned the “Billers/Coders” set, which is expected to take an additional twenty-eight (28) minutes, for a total of 2 hours and 2 minutes.

Schedule for Training

Compliance training is coordinated through the Center for Education and Development to coincide with the release of all other mandatory UMHS training. Data feeds from Human
Resources are completed daily and the Center for Education and Development assigns compliance training to new employees as part of their regular onboarding process.

**Format of Training**

The format for the courses outlined in this document is computer-based. The Center for Education and Development provides technical support for the training. The Office of Corporate Compliance supports content questions from participants completing the training modules, as needed. If necessary, questions may be directed to professionals with expertise in the subject matter within UMHS.

**Certifications**

Each individual completing the compliance training described above certify upon completion of all modules in the assigned set that training has been received and acknowledge that they agree to abide by UMHS’s compliance policies and procedures, including the Code of Conduct. These certifications are retained within the learning management system, and are accessible to the Chief Compliance Officer along with the related course materials.

**Ongoing Review of the Training Plan**

The Training Plan is reviewed annually and updated, as needed, to reflect changes in Federal health care requirements, issues identified during audits or the Claims Review process, or any other relevant information. Updates or revisions to the Training Plan will be provided to the OIG for review and approval prior to the implementation of a revised Training Plan.