



Compliance News

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DOJ to Soon Issue Sample Questions on Corporate Compliance

By Odom Che

Feb. 9 — The Department of Justice plans to release a set of questions in the coming weeks that companies implicated in wrongdoing can expect to be asked by investigators concerning their compliance programs.

Andrew Weissmann, chief of the DOJ Criminal Division's Fraud Section, told a group of attorneys meeting in Washington Feb. 9 that the department plans to publicize the list of sample questions to give the public and companies an idea of what investigators and compliance experts are concerned with. The list will be continually updated based on experiences officials have with companies, he said.

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"Make sure you don't lose the customers you've spent so much energy to acquire."

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Summary of CMS Five-Star Changes

From IHCA Newsletter 03/07/2016

Last week CMS announced the addition of new quality measures (QMs) to the Five-Star Quality Rating System. AHCA shared the following summary of the changes nursing facility providers can expect in 2016 and 2017.

- Six new quality measures will be added to Nursing Home Compare (NHC) by the end of April 2016; skilled nursing care centers will get a preview of the changes by accessing the QIES system.
- Five of the six QMs will also be added to Five-Star in July 2016 (NOTE: How the QMs are added or will impact your star rating have NOT been announced)
- The six new measures are as follows:

Short-Stay

1. Discharge to Community*
2. Emergency Room Use*
3. Re-hospitalization*
4. Improvement in Function since Admission*

Long-Stay

1. Decline in Mobility*
2. Use of Hypnotics/Anxiolytics

[* will be added to Five-Star in July 2016]

- See the CMS Five-Star Presentation: March 3, 2016 presentation. A summary of these measure specifications are available on the AHCA website.

NOTE: The Re-hospitalization, Emergency Room Use and Discharge to Community QMs posted in April 2016 will reflect care from July 1, 2014 through June 30, 2015. The other MDS-based measures (Improved Function, Mobility and Hypnotics/Anxiolytics) will be from the same time window as other MDS-based QMs on NHC.

- The five measures will be added to the QM component of Five-Star. NOTE: Currently, the QM component impacts your overall star ratings as follows:
 - o Add 1 star to QM component = 5 stars
 - o Lose 1 star in QM component = 1 star
 - o No change with QM component = 2, 3, or 4 stars
- The impact of adding these five measures to the QM component will depend on how CMS integrates these measures into the scoring system. Nonetheless, skilled nursing center performance on the new measures will likely change a center's ratings for the QM component.
- CMS has NOT announced changes to the scoring methodology in the QM component. For example, the agency has not announced if it has plans to rebase the scoring cut points to achieve 5 stars. NOTE: If and when that is known, we will let you know. We also will continue to advocate for no rebasing.

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- CMS plans to add additional quality measures to Five-Star in 2017 or 2018:
 - o Staffing turnover and retention
 - o Staffing levels based on data from mandatory staffing data collection from payroll - PBJ
 - o Other measures from the IMPACT Act

Here is a recording of the all-member webinar AHCA held last Friday to update members on the CMS announcement: AHCA Member Overview of CMS Plans for Five-Star - March 4, 2016. Also visit the AHCA Five-Star Quality Rating System webpage for more resources. AHCA will be providing additional information in the coming weeks.

The IHCA Spring Quarterly Education Conference on March 29-30 will include the session *Key Regulatory and Payment Issues Coming in 2016*. The session will cover the CMS Five-Star changes effective July 1, 2016. These changes will be available for nursing facilities to preview April 1, 2016 - prior to public release in July - in the QIES Portal that nursing facilities use for MDS submission.

What's New at BCG Research

By: Karen Steggerda

By now, most of you have experience with our new automated website system, that sends you documentation every month on the 22nd of your OIG and EPLS Exclusion List Checks for individuals and vendors. We seem to have all the kinks out of the system and I appreciate your patience with us during the transition phase. If you are not receiving from us documentation of your checks on the 22nd of the month, please verify that the box is checked on the page you have put the title of your report. Then let me know if you still are not receiving a report.

You may have also noticed that our website now provides you with Employee Information Forms, which are highly recommended to be signed and filled out every year by your employees. Please keep this paperwork in a file for OIG purposes, should they select your organization to review any requested paperwork.

There is also the audit tool available to check your I9's against your employee's identification and to verify that all names are spelled correctly. This is one popular way people, who are trying to allude the OIG Exclusion List Check and maintain a job, is to mis-spell their name on forms hoping no one will verify their form against their legal ID. If you do a lot of hiring across state lines, this audit should be done on a yearly basis.

The 7 Elements of Compliance: Element #1 Handbooks

By: Karen Steggerda

Every facility should have a staff handbook easily available for your employees. The staff handbook should contain your organizations Code of Conduct. The Code of Conduct should outline your organization's expectations on legal areas, finance areas, and operations of the facility. Legal areas could include laws/rules of your organization, such as the FMLA, Immigration and Nationality Act, Anti-kickback Law, background checks, substance abuse, and social media rules just to name a few. Finance could be your pay structure, benefit packages, insurance, education reimbursement, and PTO. Operations of the facility would include expectations of how the facility will be run, such as name tags, where to park, dress code, proper telephone etiquette, breaks, and designated smoking areas are a few ideas.

Remember to update your handbook regularly. It must be written in a language representing 40% of your staff. Have employees sign a certification page and keep the signed certification pages available in your OIG binder for easy access.