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### **Navigating and Surviving a Practice Audit**

Webinar Wednesday, November 16, 2016

2:30 pm-4:00 pm Eastern 1:30 pm-3:00 pm Central 12:30 pm-2:00 pm Mountain 11:30 am-1:00 pm Pacific

**Presented By:** *Judith P. Nelson* 

### 2016 Navigating and Surviving a Practice Audit Faculty and Planner Disclosure

The American Association of Oral and Maxillofacial Surgeons (AAOMS) is accredited as a provider of continuing medical education by the Accreditation Council for Continuing Medical Education (ACCME) and is recognized as a provider of continuing dental education by the American Dental Association Continuing Education Recognition Program (ADA CERP). The AAOMS adheres to the ACCME accrediation requirements, including the Accrediation Critiera, the ACCME Standards for Commercial Support and the ACCME policies, and the AAOMS adheres to the ADA CERP Standards and Procedures in its development and delivery of continuing medical and continuing dental education activities.

It is the policy of the AAOMS to ensure balance, independence, objectivity and scientific rigor in scientific/educational activities. All faculty and others who participate in the planning and execution of an AAOMS activity are required to disclose relevant financial relationships with commercial interests. A commercial interest refers to any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The principal intent of requiring disclosure information is not to prevent faculty with relevant financial relationships from the planning or delivery of content, but rather to ensure that AAOMS CDE/CME activities promote quality and safety, are effective in improving practice, are based on valid content, and are independent of control from commercial interests and free of commercial bias. Disclosure is required so that course directors may reasonably decide whether to make adjustments in the activity and its faculty, and so that participants in the activity may formulate their own judgments regarding commercial bias in the presentation in light of full disclosure of related information.

All faculty and others who participate in the planning and execution of an AAOMS educational activity have been informed of the AAOMS Policy on Disclosure of Relevant Conflicts of Interest. Faculty who have disclosed industry relationships have been counseled, in writing, of the necessity to deliver their presentations in a manner free of commercial bias. Written notification is made, in accordance with AAOMS Policy, to resolve and relevant conflicts of interest.

The following faculty have reported that they have no industry relationships to disclose:

Nelson, Judith

### **Planning Committee Disclosures**

In accordance with ACCME guidelines, the following disclosures are provided for members of the AAOMS Board of Trustees, AAOMS educational planning committees and AAOMS staff. Members of the groups identified below have participated in the planning, development and implementation of this educational activity.

### **Board of Trustees**

The following members of the AAOMS Board of Trustees have reported that they have no industry relationships to disclose:

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Lambert, Paul M., DDS
Nannini, Victor, L., DDS
Nelson, Steven R., DDS, MS
Nelson, William J., DDS
Rafetto, Louis K., DMD
Tiner, B.D., DDS, MD

### **Committee on Continuing Education and Professional Development (CCEPD)**

The following members of the CCEPD have reported the following industry relationship disclosures:

Kademani, Deepak, DMD, MD

Zimmer Biomet: Consultant; Vista Dental: Research Grant; Elsevier: Royalties

Miloro, Michael, DMD, MD Axogen, Inc.: Consultant

The following members of the CCEPD have reported that they have no industry relationships to disclose:

Busino, Lawrence, DDS
Grogan, David M., DDS, MSD
Hudson, John-Wallace, DDS
Meara, Daniel, MS, MD, DMD
Park, Chan, DDS, MD
Sabino, MaryAnn C., DDS, PhD
Schreiber, Andrea, DMD
Shafer, David, DMD
Shah, Gaurav, DMD
Steinberg, Mark J., DDS, MD
Waite, Peter D., DDS, MD

### Committee on Health Care Policy, Coding, and Reimbursement (CHCPCR)

The following members of the CHCPCR have reported the following industry relationship disclosures:

Pietz, Wendy M., MS, DDS Merge Healthcare (division of IMB Watson): Spouse, Employee

The following members of the CHCPCR have reported that they have no industry relationships to disclose:

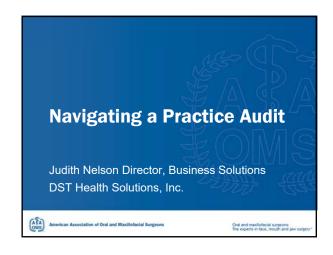
Asdell, Bernard J., DDS
Batal, Hussam, DMD
Banks, Kathy A., DMD
Boyle, James M., DDS, MS
Candelaria, Lionel M., DDS
Everts, Joshua E., DDS, MD
Gossett, Donald L., DDS
Hillgen, John J., DMD, MBA
Kaye, Alan H., DDS
Massaro, Anthony, DMD
Mercer, James E., DDS
Mulrean, Joseph C., DMD
Nustad, Robert A., DDS, MS
Pitts, Adam S., DDS, MD
Startzell, James M., DMD, MS

### **AAOMS Staff**

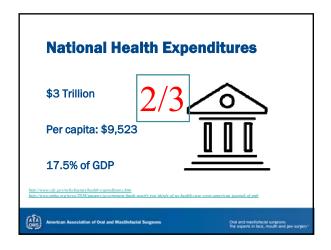
The following members of AAOMS Staff have reported that they have no industry relationships to disclose:

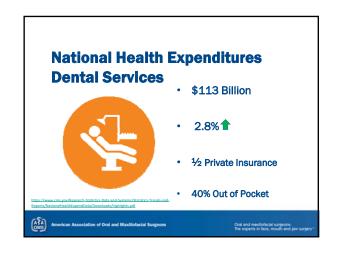
Adams, Mark, JD Armour, Yolanda Bonfield, Heidi Choyke, Barbara S., CAE Farrell, Scott C. Hayson, Beth Jones, Samantha E. Kremer, Jolene Lee, Caroline P. Murray, Shannon O'Brien, Kelly Peterson, Shannon Schnitzer, Mary Serpico, Patricia Teplitz, Janice K. Wittich, Karin K.

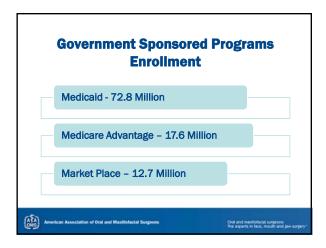
All reported relevant conflicts of interest have been resolved by the Committee on Continuing Education and Professional Development and other planning committees as of 3/09/2016.



### Agenda Regulatory Landscape Preparing for an Audit Methodology & Process Managing an Audit Questions & Answers







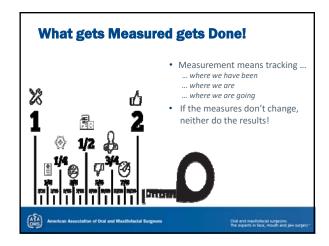
Polling Question:	
What is the most common type of insu that you serve?	rance for the patients
Multiple selections are appropriate:	
A. Self-Pay B. Commercial C. Marketplace D. Medicare Advantage	
E. Medicaid/CHIP	One and maintohold surgeons the expents in face, mouth and Jav surgery"

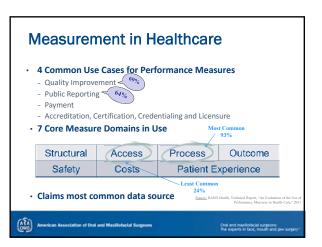


### Question: Have you established a comprehensive Compliance Program for your office? A. Yes B. No Cott you restricted surgeons The experts in fact, though and pier surgery.









# Whistleblowers • Protections • Rewards & Incentives http://www.insurancefraud.org/statistics.htm Crist and Maschibitantial Surgeons the openin is face, modell and part Augebry\*

### **Key Strategy #1**

- Educate! Educate! Educate!: Regulations, standards, objectives and even practical application are in constant motion
  - All stakeholders need some level of understanding
  - Multi-dimensional approach
- Result: Buy-in, Support, Collaboration
- Establish Ongoing Assessment



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### **Agenda**

- Regulatory Landscape
- Preparing for an Audit
- Methodology & Process
- Managing an Audit
- Questions & Answers



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## Question: Have you undergone a practice audit within the last twelve months? A. Yes B. No





### Documentation Documentation to demonstrate the program effectiveness can include: Policies & procedures Workflows and job aides Training materials & records indicating employee participation Monitoring reports Committee charters, meeting agendas & minutes Torrective action plans & audit reports Corrective action plans & audit reports

### **Audit Preparation**





- Understand Requirements
- Assess Documentation

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### **Evaluate Contracts**

- Audit Rights
- Frequency
- Medical Record Copying Fee
- Dispute Resolution



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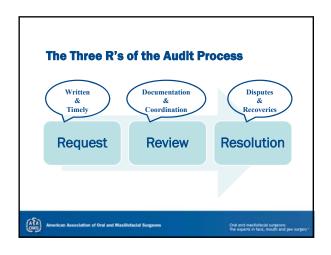
# Reimbursement Methods Private or Government Industry Practice American Association of Oxel and Maxillabacial Surgons Cor and maxillabacial surgons the right in first, morel and jun surger;

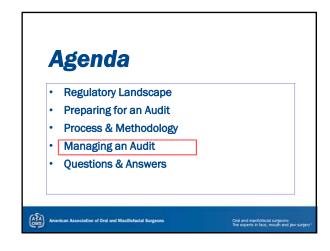


### Key Strategy #2 Preparation Pays!: Contracts, regulations and standard industry practices establish the framework Strive for Consistency Result: State of Audit Readiness Establish Standard Procedures

### Agenda Regulatory Landscape Preparing for an Audit Methodology & Process Managing an Audit Questions & Answers Crit and machifolds a syrons for egents of local and Machifolds of Surgeon

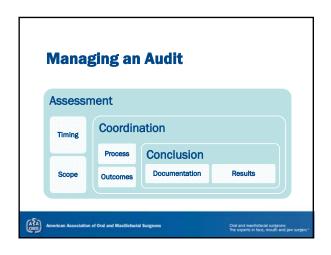












### Key Strategy #3 Compliance Programs Work!: A well documented program establishes supporting documentation to demonstrate processes. Policies are Unique for Your Office Result: Integrated Compliance Model Repeatable well defined processes

