

# GOVERNMENT PROGRAMS

## Compliance Officer Newsletter

Volume VII, Issue 2

June 2018

### INSIDE THIS ISSUE

#### Back to Basics Series:

## Correction

- Issue Correction  
“Life Cycle”
- Corrective  
Action Plans



### Message from Kim Green

Welcome to the Government Programs Compliance (GPC) quarterly newsletter. Our goal is to provide you with pertinent information relating to the administration of the various government programs administered by HCSC.

HCSC is a Plan Sponsor that administers several state and federal Government Programs, including:

- Medicare Advantage
- Medicare Prescription Drug Plan
- Medicare-Medicaid Alignment Initiative (MMAI) and
- Medicaid

As a Plan Sponsor we have the responsibility to know and adhere to the requirements of all the contracts we administer. If we fail to meet those requirements, we are at risk for being subjected to various enforcement actions.

Please remember that you are required to report any suspicious behavior or potential wrongdoing related to any government contract. You can report this information to your manager or our Corporate Integrity Hotline number, which is listed below. All calls to our hotline can be made anonymously and without fear of intimidation or retaliation. As the Government Programs Compliance Officer, please know that you can always contact me directly at 312-653-5110.

Kim Green  
HCSC Government Programs Compliance Officer

### Government Programs Hotline

combining with Corporate Integrity Hotline

For compliance questions  
or concerns related to:

- Medicare Advantage
- Medicare Part D
- Medicare

**1-877-211-2290**

**1-800-838-2552**



HEALTH CARE  
SERVICE  
CORPORATION

All of us who work on government programs have an obligation to manage issues of non-compliance through effective prevention, detection, correction and reporting.

Previous newsletters have taken a deeper dive into issue prevention and detection.

We continue this “Back To Basics” series with the third action step: CORRECTION.

PREVENTION



DETECTION



**Correction**



REPORTING

### ISSUE CORRECTION “LIFE CYCLE”

#### 1. IDENTIFY THE ISSUE

The fundamental purpose of issue detection is correction.

Remember that discovering and reporting issues is a success because it provides HCSC with the opportunity to take corrective steps.

#### 2. IDENTIFY THE ROOT CAUSE



Once an issue has been discovered, you must identify a root cause.

A root cause is the fundamental, most basic, ‘deepest’ reason for a given outcome. What we initially see as an issue is, in fact, a symptom of the root cause.

The goal of root cause analysis is to identify the behaviors, actions, inactions, or conditions that existed to cause the issue. There may be more than one root cause. You must identify a root cause because, without it, any corrective action will fail to successfully fix the issue and the issue will continue to recur.

The simplest way to identify the root cause is to ask “why”, following a cause-and-effect chain, until you reach either a broken process or an alterable procedure.

Click [here](#) for a deeper discussion of how to implement the ‘5 Whys’ and examples of using the technique to perform a root cause analysis.

Root cause analysis was also the topic of the Q3 2015 Newsletter:

<http://www.hisc.compliance.com/pdf/newsletter-3-2015.pdf>

#### 4. ENGAGE IN ONGOING MONITORING TO PREVENT RECCURRENCE

Finally, ongoing monitoring of the issue reveals whether the remediation effort was successful.

If the issue continues to recur, you must begin again and re-work the issue through the life cycle.

A remediation plan describes how the underlying root cause will be fixed.

Action steps set out in the remediation plan will be tailored to the nature and complexity of the issue and root cause(s).

For example, a remediation plan may be as simple as adding a step to a procedure or as complex as re-writing an entire procedure from the ground up.

#### 3. IDENTIFY STEPS TO REMEDIATE THE ISSUE

## CORRECTIVE ACTION PLANS (CAPs)

A Corrective Action Plan (CAP) is a series of actions and improvements to processes that are put in place to fix or eliminate an issue of noncompliance. CAPs are based on the root cause(s) of the issue. A CAP may be imposed internally within HCSC or by a regulator. **All Medicare and Medicaid CAPs must be overseen by Government Programs Compliance. Please contact GPC if you believe you need to develop a CAP.**

CMS, or any other regulatory agency, may impose CAPs on HCSC for issues of noncompliance with our government contracts. When any government or regulatory agency imposes a CAP on HCSC's government contracts, HCSC must communicate with and provide regular status reports related to the corrective action(s). The government or regulatory agency will release HCSC from an imposed CAP only when they are satisfied that the underlying root cause has been remediated.

### ESSENTIAL COMPONENTS OF A CORRECTIVE ACTION PLAN

#### **1. Identification of the Issue after performing a Root Cause Analysis**

If you don't know what the underlying issue is or what is causing the issue, you can't determine what steps to take to fix the issue. Issue identification and root cause analysis are discussed on page 2 of this newsletter and in past GPC Compliance Officer Newsletters. All past newsletters are online at [www.hisccompliance.com](http://www.hisccompliance.com).

#### **2. Identified Owners**

Identified owners ensure that someone is accountable for the implementation and ongoing progress towards the closure of the CAP. Failure to designate an owner creates a vacuum where no one is responsible for the process of remediating the underlying issue. CAPs require an overall business lead as well as individual task owners.

#### **3. Remediation / Corrective Actions**

Remediation steps set out in the CAP will be tailored to the nature and complexity of the issue and any root cause(s). More complex corrections may require creating or re-structuring an entire process. Remember that the starting point is always the rules—the goal of your corrective action plan is to be compliant with the rules, regulations, guidance and contractual obligations.

#### **4. Expected Completion Dates**

A CAP must include expected completion dates for each task that can be adjusted if necessary. If a government or regulatory agency imposes a CAP on HCSC, that agency will set target completion dates and a series of status meetings.

#### **5. Documentation**

CAPs require evidence to demonstrate completion of each task, such as P&Ps, training materials, and process flow reports. Tasks may require several pieces of evidence.

#### **6. Monitoring Plan**

A monitoring plan going forward must be put in place to determine whether or not the remediation effort was successful. If the issue continues to recur, you must begin again with your root cause analysis and the development of a new CAP addressing the new root cause.

**The starting point—first, last and always — is the rules.**

**Corporate Integrity Hotline: 1-800-838-2552**

**REMINDER...**

HCSC's Corporate Integrity and Compliance Program Charter, Section 13.1, sets out your obligations for compliance with government programs.

It says, in part:

- All people or entities, including FDRs, performing services related to Government Programs, must comply with:
  - all applicable laws and regulations
  - terms and conditions of Government Contracts
  - and the Compliance Program, including the Government Programs Section.
- It is a violation of the Code for any employee, manager, director or FDR to fail to participate in or assist in the remediation of issues within the scope of their responsibilities
- All employees, managers, directors and FDRs must promptly report known or suspected compliance issues to their Supervisor, other corporate resource or Corporate Integrity Hotline, as appropriate
- Failure to detect, report and/or remediate (as appropriate) noncompliance may result in discipline or termination of employment or relationship when reasonable due diligence on the part of the individual should have led to the discovery of any problems or violations.



Section 13.1 can be found on page 57: <http://www.hiscompliance.com/pdf/hcsc-compliance-program-charter.pdf>

**IN THE NEXT ISSUE**

In the next issue, Q3 of 2018, we will conclude this "Back To Basics" series with the fourth action step:

**REPORTING**

We will cover the following topics:

- Types of Reports (and how they are used)
- Your Role in Reporting

**CONTACT INFORMATION**

Email

[hiscompliance@bcbsil.com](mailto:hiscompliance@bcbsil.com)



Hotline - Available 24/7

**REPORT ANONYMOUSLY**



Website

[www.hiscompliance.com](http://www.hiscompliance.com)

**Corporate Integrity Hotline: 1-800-838-2552**