**UBO COMPLIANCE PLAN TEMPLATE**

The following UBO Compliance Plan is a template, not a final document. You should edit it to include your MTF’s specific processes, procedures, policies, and information as appropriate.

**[NAME OF YOUR MTF]**

UNIFORM BUSINESS OFFICE

COMPLIANCE PLAN

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REFERENCES

###### 1. 10 U.S.C. 1095

###### 2. 10 U.S.C. 1079b

3. 32 C.F.R. Part 220

4. DoD 6010.15-M, UBO Manual, November 2006

5. OIG Compliance Guidance for Hospitals, February 1998

6. OIG Supplemental Compliance Program Guidance for Hospitals, January 2005

7. UBO User Guide, Current Edition

8. Service Specific Regulations/Guidelines/Procedures

9. Other Industry Standards/Regulations/Guidelines

OTHER DOCUMENTS (Available on the UBO Website)

1 – Compliance Plan/Code of Conduct Receipt

2 – Certification Memo

3 – Sample Compliance Committee Charter

4 – Post-submission Review Worksheet – TPCP Claim

5 – Post-submission Review Worksheet – MSA Claim

6 – Post-submission Review Worksheet – MAC Claim

7 – DoD UBO Quarterly Compliance Audit Checklist

8 – DoD UBO Annual Review of Compliance Program Effectiveness Checklist

**I. INTRODUCTION**

## Benefits of a Compliance Program. To demonstrate our commitment to honest and responsible conduct, decrease the likelihood of unlawful and unethical behavior at an early stage, and to encourage employees to report potential problems to allow for appropriate internal inquiry and corrective action, each [Service] Medical Treatment Facility (MTF) should establish a Uniform Business Office (UBO) Compliance Plan and perform regularly scheduled compliance audits. The following is the [MTF NAME], UBO Compliance Plan structured to meet the guidelines as set forth by the [SERVICE] Surgeon General and the Office of the Inspector General of the Department of Health and Human Services.

## Application of Compliance Program Guidance. The purpose of the UBO Compliance Plan is to provide uniform guidance for UBO billing and accounting activities. This plan outlines collection compliance guidance for the Medical Services Account (MSA), Third Party Collection Program (TPCP), and Medical Affirmative Claims (MAC). The UBO Compliance Plan is a comprehensive strategy to ensure

## That claims submitted to all payers, including private, government (Medicare and Medicaid), and other Federal agencies and individuals are consistently accurate.

## That accounting of collections is consistently accurate.

## That UBO employees comply with the applicable laws, DoD policies and regulations, and payer requirements relating to its participation in these programs.

## UBO Purpose and Mission. The UBO’s purpose is to consolidate billing, collection processing, analysis, and reporting of accounting-related activities under one umbrella to maximize allowable healthcare cost recovery within compliance guidelines to support the operational and readiness mission of the Military Health System (MHS). TPCP, MSA, and MAC are the three programs within the UBO.

**II. COMPLIANCE PROGRAM ELEMENTS 1 – 7**

**Element 1: Written Policies and Procedures**

1. Standards of Conduct for [MTF] UBO Personnel.
   1. Employees are expected to follow the standards set forth in this Compliance Plan, as well as all applicable laws.
   2. Employees will conduct business and personal activities with the highest level of integrity.
   3. No employee shall make, file, or use any false, fictitious, or fraudulent statements or documents in connection with the delivery of, or payment for, health care benefits, items, or services.
   4. No employee shall falsify, conceal, or cover up a material fact in the performance of their duties.
   5. Each employee will be responsible for reporting any violations of this plan to their immediate supervisor or the Compliance Officer, as appropriate.
   6. Employees will follow the business rules and procedures outlined in outlined in DoD 6010.15-M., Uniform Business Office Manual, and service specific guidelines.
   7. Employees will posses the necessary skills, quality assurance processes, systems, and appropriate procedures to ensure that all billing for government and commercial insurance programs are accurate and complete.
2. Potential Risk Areas.
   1. Billing for procedures, items or services that were not provided;
   2. Billing for procedures, items or services that are not documented;
   3. Submitting duplicate claims:
      1. More than one claim for the same service;
      2. Claim is submitted to more than one primary payor at the same time;
      3. Billing for non-physician outpatient services that are already included in the hospitals inpatient rate;
   4. Up-coding:
      1. Using a billing code that provides a higher payment rate than the billing code that accurately reflects the service furnished to the patient;
      2. Using a DRG code that provides a higher payment rate than the DRG code that accurately reflects the service furnished to the patient;
   5. Unbundling: the practice of submitting bills in fragmented fashion to maximize the reimbursement for various tests or procedures that are required to be billed together and therefore at a reduced cost;
   6. Using improper Department of Defense (DoD) billing rates;
   7. Billing for services without an established DoD billing rate, unless service is an authorized pass-through item (32 C.F.R. 220.8(g));
   8. Billing health care plans excluded under 32 C.F.R. 220.6;
   9. Inappropriate balance billing;
   10. Inadequate resolution of overpayments;
   11. Incorrectly or improperly recording receivables;
   12. Failing to implement or follow marginal internal fiscal controls, including separation of duties;
   13. Failure to maintain the confidentiality of information/records;
   14. Lack of integrity in computer systems;
   15. Alteration of documentation;
   16. Destroying records/documentation without proper authority.
   17. Blocking investigations;
   18. MTF administration overlooking, disregarding, defending, or affirmatively concealing illegal billing practices.
3. Claim Development and Submission Process. [MTF] will:
   1. Provide a mechanism for the billing or reimbursement staff to communicate effectively and accurately with the clinical and coding staff;
   2. Provide for proper and timely documentation of all physician and other professional services prior to billing to ensure that only accurate and properly documented services are billed;
   3. Emphasize that claims will be submitted only when appropriate documentation supports the claims and only when such documentation is maintained, appropriately organized in legible form, and available for audit and review. The documentation, which may include patient records, should record the time spent in conducting the activity leading to the record entry and the identity of the individual providing the service; the hospital will consult with its medical staff to establish other appropriate documentation guidelines;
   4. Ensure medical staff, physician and hospital records and medical notes used as a basis for a claim submission are appropriately organized in a legible form so they can be audited and reviewed;
   5. Ensure that the diagnosis and procedures reported on the reimbursement claim are based on the medical record and other authorized documentation;
   6. Establish a process for pre- and post-submission review of claims to ensure claims submitted for reimbursement accurately represent services provided, are supported by sufficient documentation and are in conformity with any applicable coverage criteria for reimbursement;
   7. Ensure all billings to government and private insurance payers reflect true and accurate information and conform to all pertinent Federal and state laws and regulations.
   8. Implement a periodic manual review to determine the appropriateness of billing each outpatient service claim, to be conducted by one or more appropriately trained individuals familiar with applicable billing rules; or with regard to each impatient stay, scrutinize the propriety of any potential bills for outpatient services rendered to that patient at the hospital within the applicable time period.
   9. Ensure claims submitted on behalf of teaching physicians are only for services actually provided and that his or her presence during the key portion of any service or procedure for which payment is sought is properly documented.
4. Heath Insurance Portability and Accountability Act of 1996 (HIPAA). UBO personnel will comply with requirements as mandated by HIPAA and will complete annual HIPAA training. There are essentially three areas of HIPAA Compliance of concern to UBO personnel:
   1. Privacy
      1. UBO personnel may not use or disclose protected health information unless the patient has authorized or consented, or unless HIPAA specifically permits or requires.
      2. HIPAA permits UBO personnel to use or disclose PHI without patient consent only for Payment and Healthcare Operations.
   2. Security
      1. UBO personnel will ensure that they do not disclose information that compromises the security, confidentiality, or integrity of personally identifiable information (PII).
      2. UBO personnel will adhere to [MTF’s] established policies and procedures and administrative, physical and technical controls to ensure protection of PII.
   3. Standard Electronic Transactions
      1. UBO personnel with adhere to the HIPAA requirement that providers doing business electronically will use the same standardized health care transactions, code sets, and identifiers.
      2. Standard transactions for Electronic Data Interchange (EDI) to transmit health care data include: Claims and encounter information, payment and remittance advice, and claims status and inquiry
5. Credit Balances. Credit balances occur when payments, allowances, or charge reversals posted to an account exceed the charges to the account. The appropriate manager will diligently review the claims/account reports for credit balances and determine the reason for occurrence and required action.
6. Integrity of Data Systems Procedures. To ensure and maintain the accuracy and integrity of electronic data systems used for claims submission, collections, credit balances and other relevant reports, [MTF] will:
   1. Ensure data is backed up either by diskette, restricted system or tape) on a regular basis;
   2. Ensure regularly scheduled virus checks are performed;
   3. Ensure electronic data is protected against unauthorized access or disclosure by limiting access to data systems to only authorized personnel (password protected)
7. Retention of Records.
   1. Each employee is responsible for the integrity and accuracy of [MTF’s] documents and records, not only to comply with regulatory and legal requirements but also to ensure that records are available to defend business practices and actions.
   2. No one may tamper with, alter, or falsify information on any record or document.
   3. Medical and business documents and records are retained in accordance with the law and service specific records retention policy.
      1. Medical and business documents include paper documents such as letters and memos, computer-based information such as e-mail or computer files on disk or tape, and any other medium that contains information about the MTF or its business activities.
      2. This also includes
         1. All records and documentation required by either Federal or State law and the program requirements of Federal, State and private health plans (for billing companies, this will include all documents related to the billing and coding process).
         2. Records listing the persons responsible for implementing each part of the compliance plan.
         3. All records necessary to protect the integrity of the billing office’s compliance process and confirm the effectiveness of the program.
      3. No one may remove or destroy these documents prior to the specified destruction date.
8. Compliance as an Element of a Performance Plan. The promotion of and adherence to the elements of this compliance program will be a factor in evaluating the performance of all employees. All managers and supervisors involved in the claims submission, collection, auditing, etc., processes will:
   1. Discuss with all supervised employees and relevant contractors the compliance policies and legal requirements applicable to their function;
   2. Ensure employees are periodically trained in new compliance policies and procedures.
   3. Inform all supervised personnel that strict compliance with these policies and requirements is a condition of employment;
   4. Disclose to all supervised personnel that the UBO will take disciplinary action up to and including termination for violation of these policies or requirements.
   5. Be sanctioned for failure to instruct adequately their subordinates or for failure to detect noncompliance with applicable policies and legal requirements, where reasonable diligence on the part of the manager or supervisor should have led to the discovery of any problems or violations.

**Element 2: Designation of a Compliance Officer and a Compliance Committee**. To ensure an effective compliance program, [MTF] will designate a UBO compliance officer not assigned directly to the UBO but has oversight authority over the UBO and has direct access to the command group.

1. The [MTF] UBO Compliance Officer, [insert Name, Position, Telephone #], will:
2. Oversee and monitor implementation of the Compliance Program.
3. Review the program to ensure relevance and compliance with current Federal laws, and DoD and Service policy.
4. Ensure the components of the Compliance Program are implemented to reduce fraud, waste, abuse, and mismanagement within the business office and throughout the revenue cycle.
5. Ensure that contractors, vendors, and agents who furnish medical services to the facility are aware of the facility’s compliance program and its respective coding and billing policies and procedures.
6. Have the authority to review all documents and other information relevant to compliance activities.
7. Assist the business office and internal review activities in conducting internal compliance reviews, including reviews of departments involved in the revenue cycle within the facility.
8. Investigate issues related to compliance.
9. Take corrective action and document compliance issues as necessary.
10. Encourage reporting of suspected fraud, waste, abuse, or mismanagement (without fear of retaliation) through training and other means of communication.
11. Notify employees of applicable regulations, procedures, and guidelines.
12. Ensure the separation of duties are maintained pursuant to the guidelines set fourth in DoD 6010.15-M, the Military Treatment Facility Uniform Business Office (UBO) Manual.
13. Report to the MTF commander on a regular basis, who will report through the appropriate chain-of-command to the Service UBO Program Manager, progress of the compliance program. Similarly, report the results of any audits, fraud, waste, abuse, and mismanagement investigations, and any resulting employee discipline.
14. The [MTF] UBO Compliance Committee will:
15. At a minimum, be comprised of representatives from: the UBO, Inpatient and Outpatient Records, Inpatient and Outpatient Coding, Coding Auditors, Clinical Operations, Clinic Administration, Resource Management, Data Quality/Health Information Management, Legal Office, Internal Review, etc.
16. Advise the Compliance Officer and assist in the implementation of the compliance program.
17. Assess compliance violation investigations to determine whether a violation of the compliance plan actually exists.
18. Continually assess current policies and procedures to ensure compliance, relevance, and practicability.
19. Work with appropriate personnel to develop standards of conduct and policies and procedures, to promote adherence to the UBO compliance program.
20. Monitor internal controls to implement the program and recommend changes as needed.
21. Ensure periodic audits of claims development and claims processing procedures are performed and that internal fiscal and administrative controls are implemented and adhered to.

**Element 3: Conducting Effective Training and Education**.

1. Initial Compliance Training. All new employees involved with the UBO process will receive an initial training session that will cover the topics and guidance set forth in this plan before they begin their assigned duties. Statement acknowledging employee’s commitment to and receipt of the compliance plan and code conduct will be signed and dated, and retained in the employee's personnel file.
2. Annual Compliance Training. All personnel will attend training on an annual basis, including appropriate training in Federal and State statutes, regulations and guidelines, and ethics. Sessions will emphasize the organization's commitment to compliance with these legal requirements and policies, compliance program, summarizing fraud and abuse statutes and regulations, Federal, State, coding requirements, claim submission processes, and employee code of conduct. Statement acknowledging employee’s commitment to the code conduct will be signed and dated, updated as needed, and retained in the employee's personnel file.

**Element 4: Developing Effective Lines of Communication**.

1. Access to the Compliance Officer: Access to the compliance officer is available through [appointed meetings, question/compliant box and hotlines]. The compliance officer will make ever attempt to be visible for any member of the UBO that needs assistance in determining compliance issues and conduct. The compliance officer is the lead representative in preserving the ethical and legal stance of the organization. As an advocate of compliance related issues and conduct he or she works and communicates closely with the chain of command to ensure the organization is operating within the state and federal laws:
   1. The UBO Compliance Officer, (Name/telephone number/e-mail address);
   2. The Compliance Question/Complaint Box, located (location);
   3. [Telephone Hotline];
   4. [E-mail Hotline];
   5. [Web based Hotline];
2. Additionally, employees may us other agencies to report suspected healthcare billing-related fraud, waste, abuse or mismanagement:
   1. [MTF] Internal Review [Telephone # and or Hotline #]
   2. [MTF] Inspector General [Telephone # and or Hotline #]
   3. [Service] Inspector General [Telephone # and or Hotline #]
   4. DoD Inspector General:
      * Website: <http://www.dodig.osd.mil/HOTLINE/index.html>
      * Hotline: 800-424-9098,
      * E-mail: [hotline@dodig.mil](mailto:hotline@dodig.mil))

**Element 5: Enforcing Standards through Well-Publicized Disciplinary Guidelines**.

Disciplinary action will be applicable to all individuals within the UBO who fail to comply with their obligations. When there is information of potential violations or misconduct, the Compliance Officer has the responsibility of conducting an investigation. An internal investigation would include interviews and a review of medical record, billing, and other relevant documents. To assure protections from coerced disclosure of information gained through investigative interviews, the investigation maybe referred to qualified legal counsel. The attorney/client privilege will afford a level of protection in the event that the OIG or other agency requests information developed in the course of an internal investigation.

1. New Employee Policy. New employees and other individuals new to the UBO or position will be trained to ensure that their work is consistent with standards to prevent fraud, waste, abuse, or mismanagement. The UBO is responsible for providing the same training to individuals who may provide services for the UBO (such as an independent contractor) even though these individuals are not employees of the UBO.
2. [MTF] disciplinary policy outlining disciplinary actions against UBO staff members and contract employees who do not follow the policies and procedures of [MTF’s] Compliance Plan/Program are [located at/in regulation/memo/website where policy can be found] or [as follows: list disciplinary policy].

**Element 6**: **Auditing and Monitoring.**

1. Post-submission Reviews: Periodic post-submission review of claims will be performed to ensure claims submitted for reimbursement accurately represent services provided, are supported by sufficient documentation, conform with applicable coverage criteria for reimbursement, revenue is recorded properly and the account is finalized appropriately;
2. UBO Quarterly Compliance Audits: The DoD UBO Compliance Audit Checklist is to be completed at least quarterly by a disinterested reviewer, E-7 or above. The UBO Compliance Officer will appoint the reviewer. The checklist covers the main points of the Uniform Business Office (TPCP, MSA, and MAC) programs. The results of this audit will be reported to the UBO Compliance Officer for review and recommended action, as appropriate;
3. UBO Compliance Program Effectiveness: The UBO Compliance Officer must regularly review the implementation and execution of the compliance program elements. The review will be conducted as least annually and include an assessment of each of the basic elements individually, as well as the overall success of the program. This review will help identify any weaknesses in [MTF’s] compliance program and implement appropriate changes. A copy of this review should be provided to the MTF Commander and UBO Service Manager.

**Element 7: Responding to Detected Offenses and Developing Corrective Action Initiatives.**

1. Common compliance violations that can result in disciplinary action.
2. Involvement in non-compliant conduct and/or activity;
3. Failure to report known non-compliant conduct and/or activity.
4. Supervisors who were aware or should have been aware of non-compliant conduct or activity and failed to correct deficiencies.
5. Investigations and Reporting Procedures: All violations will be assessed by the UBO Compliance Committee to determine whether a violation of the compliance plan actually exists. If so and the individual(s) involved are part of the UBO staff, then a determination that the conduct was negligence and/or inadvertent or willful and/or knowingly conducted should be made. If the individual(s) involved are outside the UBO staff, the UBO Compliance Committee will forward their findings to the appropriate Department chief.
6. Negligence and/or Inadvertent Conduct: If it is determined, after investigation that non-compliant conduct occurred because of negligence or inadvertence, the matter shall be handled by the appropriate supervisor, who shall inform the UBO Compliance Officer of the offense and corrective action taken to address the problem. Any individual dissatisfied with the corrective action imposed by his/her supervisor may appeal the decision to the UBO Compliance Officer within ten (10) business days from the date of imposition of the corrective action. Such appeal shall be by written letter to the UBO Compliance Officer stating the reasons why the corrective action is not appropriate. The UBO Compliance Officer shall schedule a meeting within a reasonable time to review the request and either affirm or modify the corrective action.
7. Willful, Knowing Conduct and/or Gross Negligence: If it is determined, after investigation, that non-compliant conduct occurred as a result of willful and knowing action or gross negligence, then the matter shall be referred to the UBO Compliance Officer for corrective action. The UBO Compliance Officer shall determine the response and appropriate corrective action, in light of all available information. An individual dissatisfied with the corrective action imposed by the UBO Compliance Officer may utilize standard appeal procedures.
8. Corrective Actions**:** Appropriate corrective action measures shall be determined on a case-by-case basis. Disciplinary action, if required, and in the support of the UBO Compliance Program will be managed in accordance with the disciplinary policies outlined in Element 5 of this plan.

**III. UBO COMPLIANCE PROGRAM EFFECTIVENESS.**

1. Code of Conduct. The following general principles apply to every employee. Where a situation is not covered by the standards set forth, employees shall apply the principles set forth in this plan in determining whether their conduct is proper. Each covered individual is expected to abide by the following general principles:

1. Serve the public, and treat all persons employed by or associated with the facility with respect, concern, courtesy, and responsiveness.
2. Support equal treatment of all patients, employees and other persons associated with the facility, or obtaining or providing services to the facility, without regard to race, gender, color, age, religion, national origin, veterans’ status, marital status, sexual orientation, or individual disabilities.
3. Avoid actual or potential conflicts of interest including the appearance of a conflict of interest, except as allowed by this policy or other facility policies.
4. Promptly report to your supervisor any situation in which a covered individual reasonably feels that they may be or may become involved in a conflict of interest, whether or not such situation is specifically described in this policy.
5. Recognize that personal gains from employment or service to the facility are limited to respect, recognition, salary, and normal employee benefits.
6. Demonstrate the highest standards of personal integrity in all actions related to or affecting the business of the facility.
7. Not use your relationship with the facility to bestow any benefit on anyone related to the person by family, business, or social relationship.
8. Not disclose or use or allow others to use confidential information obtained as the result of your relationship with the facility for private gain or private purposes.
9. Not accept any fee, compensation, gift, payment of expense, or any other thing of monetary value except as authorized by policies of the facility.
10. Not engage in outside employment except as authorized by policies of the facility. No covered individual shall hold a public office or employment that is incompatible with their duties and obligations.
11. Not use facility time, property, equipment, supplies, or support services for private gain, or private purposes, except such limited use as authorized by policies of the facility.

2. Regular Review of Compliance Program Effectiveness. This UBO Compliance Plan is intended to be flexible and readily adaptable to changes in regulatory requirements and in the healthcare system as a whole. This plan shall be reviewed annually and modified, as necessary. This UBO Compliance Plan shall be certified by the MTF Commander upon implementation and when major revisions are required.

**IV. SELF-REPORTING.**

If credible evidence of misconduct is discovered and, after reasonable inquiry, it is determined that this misconduct may have violated criminal, civil, or administrative law, the MTF’s legal office/counsel should be contacted promptly to determine self-reporting requirements.

**V. CONCLUSION.**

The compliance program as presented in this document establishes a framework for effective billing and legal compliance by the UBO. It does not set forth all of the UBO’s substantive programs and policies that are designed to achieve compliance. The UBO has already established various compliance policies. Those and future policies will be a part of its overall compliance enforcement program.