I. Introduction

The University of Miami/Miller School of Medicine (the “University”) has a strong commitment to ensuring that its affairs are conducted in accordance with applicable law. A critical focus of any compliance plan for an academic health center relates to professional fee reimbursement. Compliance in this area is challenging because the regulatory requirements governing such reimbursement are complex and changing. To underscore and enhance its commitment and to better assist all employees, including faculty physicians, in this area, the University is implementing an expanded compliance program for professional fee reimbursement. The compliance plan has the following seven key features:

- Designation of a University Official responsible for directing the Billing Compliance Plan;
- Incorporation of standards and policies that guide University personnel with regard to professional fee billing;
- Development of compliance initiatives at the Department level;
- Ongoing training of clinical staff and billing personnel concerning applicable legal requirements and University policies;
- A mechanism for employees to raise questions and receive appropriate guidance concerning professional fee billing;
- Regular chart and billing reviews by University employees and their designees to assess compliance and to identify potential issues;
- A process for employees to report instances of suspected non-compliance and for such reports to be fully and independently reviewed;
- Regular reviews of the overall compliance effort, including Department specific plans, to ensure that billing practices reflect current requirements and that other current adjustments are made to improve the program;
- Formulation of corrective action plans to address any instances of non-compliance with University policies or billing requirements.

The compliance program described in this document is intended as a framework for legal compliance by the University. It is not intended to set forth all the substantive programs and practices of the University that are designed to achieve compliance. The University already maintains various compliance practices and those practices continue to be a part of its overall legal compliance efforts.
II. Chief Compliance Officer

Responsibility for implementing and managing the Compliance Plan shall be assigned to the Chief Compliance Officer (CCO). The CCO shall, with appropriate assistance from counsel, undertake the following activities:

1. The review, revision, and formulation of appropriate University policies to guide billing of professional fee billing by faculty physicians/practitioners;
2. The review, revision and approval of Department compliance plans, including Departmental policies relating to billing;
3. The review and approval, and in some cases, development of training material and programs;
4. The oversight of chart and billing review;
5. The review of any inquiries concerning billing or reports of non-compliance to determine whether a compliance issue exists or whether further investigation is necessary;
6. Assisting the University’s counsel and internal auditor in any investigations undertaken to determine a compliance problem exists;
7. Developing, with the assistance of University counsel, appropriate corrective action plans to address any compliance issues that have been identified; and
8. Preparation of any annual report that summarizes the compliance effort, both University-wide and on a Departmental level, and identifies and changes that will be made to enhance compliance.

The CCO shall report directly to the Senior VP of Health Affairs & CEO of UHealth. The CCO shall work closely with representatives of the Clinical Departments, the University of Miami Medical Group (“UMMG”), and billing personnel to foster and enhance compliance with all applicable billing requirements. The Senior VP of Health Affairs & CEO of UHealth shall have the authority to direct specific billing practices designed to enhance compliance, including, but no limited to, 1) the use of particular codes for designed services, 2) the procedures practices used to handle billing, or 3) the imposition of restrictions on billing by particular physicians, or groups of physicians, or other health professionals.

III. Policy Guidelines

The policy of the University of Miami has always been to ensure that all claims for professional fee reimbursement use the proper code for the service provided, that the documentation in the medical record supports the code, and that the claim is submitted in the name of the appropriate
provider. To guide physicians and billing personnel in meeting this objective, the CCO shall, with the assistance of legal counsel, review existing policy statements, revise those statements as necessary, and develop any additional statements that seem advisable. Before becoming effective, new policies should be submitted to the appropriate UMMG Executive Committee for review and recommendation in a timely manner. Relevant policy statements will be exhibits to this Billing Compliance Plan. An overview of important statutory provisions will also be provided.

**Policies to be included:**

1. UMMG Billing and Documentation of Professional Services
2. Medicare Teaching Physician Rule
3. Billing for non-physician providers
4. Documentation of medical records
5. Others to be identified

**IV. Departmental Compliance Plans**

Each clinical department shall appoint a faculty member to serve as the compliance leader for department billing activities. The departmental compliance leader will coordinate departmental compliance activities with the CCO. The CCO will develop a program to ensure regular contact with the compliance leaders.

Each clinical department shall prepare a departmental compliance plan to implement compliance efforts. Before becoming effective, such plans shall be reviewed and approved by the CCO to ensure consistency with overall policies. If the CCO has concerns about the content of any departmental plan, those concerns, after appropriate consultation with the Department, should be brought to the attention of the Senior VP of Health Affairs & CEO of UHealth, who shall have the authority to modify departmental compliance plans. The department compliance plans shall, at a minimum, include the following features:

1. Written policies and procedures for any billing activities undertaken by departmental personnel;
2. Educational and training programs, as coordinated with the CCO, to address billing
issues of particular importance to the department;
3. A program for ensuring, and documenting, that all new department personnel, including faculty and house-staff, receive training with a regard to proper billing;
4. A program for routine “spot checks” of the department billing to review compliance, with the results of such reviews being reported to the department’s compliance leader and to the CCO; and
5. An annual review of the existing compliance plan in order to identify the need for changes and to identify specific compliance objectives during the succeeding year.

V. Education and Training

The CCO is responsible for ensuring that the University policies concerning billing are disseminated and understood. To accomplish that objective, the CCO will work with the Senior VP of Health Affairs & CEO of UHealth to ensure that there is a systematic and ongoing training program that enhances and maintain awareness of billing policies among existing staff and that introduces new personnel to University of Miami billing policies. All training materials will be submitted to the CCO for reviews and approval before being used. Training shall be mandatory for all physicians and billing personnel, and a system will be developed to document that such training has occurred. Moreover, the CCO can require that physicians and/or billing personnel attend training sessions on particular issues. The training materials will identify the specific people who should be contacted by physicians or billing personnel about billing questions. The UMMG or any Department, without the review and approval of the CCO, may retain no outside billing consultant. If the CCO has concerns about the need for consultation or the suitability of the consultant, those concerns should be brought to the attention of the Senior VP of Health Affairs & CEO of UHealth, who shall make the final decision about whether the consultant should be retained.

VI. Auditing and Monitoring

Under the supervision of the CCO, a sample of medical records and corresponding bills for each department and division will be periodically reviewed for compliance with the University’s billing policies and with legal requirements. Each department shall be reviewed at least annually, but the Director may require reviews that are more frequent. Moreover, on a periodic basis, the CCO shall engage an external billing expert to review a sample of records drawn from a cross-section of departments.
If any of these reviews identify instances of possible non-compliance, the CCO shall report that fact to the Senior VP of Health Affairs & CEO of UHealth and to legal counsel for the University. In consultation with legal counsel, the CCO shall review the situation to determine whether, he believes there has been any activity inconsistent with University billing policies or other requirements.

VII. Reporting and Investigating Suspected Compliance Issues

The training material will direct University employees to report the CCO any activity that they believe to be in violation of University policies or legal requirements regarding billing and should explain how the CCO can be contacted. Alternatively, employees will be advised they can contact Audit and Advisory Services or the Controllers of the University. Whenever a suspected violation is reported to the CCO, an investigation will be undertaken with the assistance of the Office of General Counsel and the University’s internal auditor. University employees must cooperate fully with any such investigations. After review and investigation, the CCO will prepare written report of findings.

The CCO shall be responsible ensuring that employees who report in good faith suspected violations are not subject to retaliation or harassment, as a result of the report. Concerns about possible retaliation or harassment should be reported to the CCO and/or the Department of Human Resources.

VIII. Corrective Actions Plan

Whenever a compliance issue has been identified, through monitoring, reporting of possible issues, investigations, or otherwise, the CCO should develop a plan to address that issue. In developing a corrective action plan, the CCO should obtain advice and guidance from the University’s legal counsel. Before being implemented, a corrective action plan should be reviewed by the Senior VP of Health Affairs & CEO of UHealth, either of whom may modify the content of the plan.

Corrective action plan should be designed to ensure not only that the specific issue is addressed but also that similar problems do not occur in the areas or departments. Corrective action plans will be followed according to Guidelines for Determining Corrective/Disciplinary Action for Violations of University of Miami Billing Compliance Plan Policy approved by the UMMG Performance and Executive Committees. This may require that billing be handled in a
designated way, that certain training take place, that restrictions be imposed on billing by particular physicians or other health professionals, that repayment be made, or that the matter be disclosed externally. Sanctions or discipline, in accordance with Guidelines for Determining Corrective/Disciplinary Action for Violations of University of Miami Billing Compliance Plan Policy, may also be recommended. If it appears that certain individuals have exhibited a propensity to engage in practices that raise compliance concerns, the corrective action plan should identify actions that will be taken to prevent such individuals from exercising substantial discretion with regard to billing. In the event the CCO is not satisfied with the corrective action being taken, he should report these concerns to the Chairman of the Audit Subcommittee of the University Board of Trustees.

IX. Revisions to this Plan

This Billing Compliance Plan is intended to be flexible and readily adaptable to changes in regulatory requirements and in the health care system as a whole. The plan should be regularly reviewed to assess whether it is working. The Plan should be hanged as experience shows that a certain approach is not effective or suggests a better alternative. To facilitate appropriate revisions to the Plan, the CCO should prepare a report, at least annually, that describes the general compliance efforts that have been undertaken during the preceding year and that identifies any changes that might be made to improve compliance. The Senior VP of Health Affairs & CEO of UHealth should circulate this report to the Executive Committee of UMMG, to Department Chairman, and to others with an interest in compliance for their comments about possible revisions to the Plan. The CCO shall periodically report to the Audit Subcommittee.

X. Billing Policy

The policy of the University of Miami is to bill only for professional services actually provided. The University recognizes that special billing requirements may apply to certain government-sponsored programs or to other providers; any such requirements must be followed. In selecting codes to describe services rendered, University physicians/practitioners and billing personnel are to select codes that they believe, in good faith, correspond to the services rendered as documented in the medical record. University physicians/practitioners and billing personnel should have a collective responsibility to be knowledgeable about the meaning of the codes applicable to their area of practice, including relevant directives from billing authorities. In addition to the disciplinary action policy, all University physicians/practitioners should be in adherence with UMMG Enforcement Policy.
University of Miami Physicians/Practitioners and billing personnel should never submit a claim that is known to contain inaccurate information concerning the service provided, such as the charges, the identity of the physician who provided the service, the date of service, the place of service, or the identity of the patient.

When in doubt about how to bill a particular service, including the proper CPT/ICD-9/ICD-10 code(s) to use, a claim should not be submitted until guidance is obtained from the Department’s Billing Office and/or the Office of Billing Compliance. The resolution of any such billing questions should be documented in writing.

It is the responsibility of the billing physician/practitioner to ensure that the documentation in the medical record supports the bill being submitted under his/her name and provider number and follow all applicable Federal and State Regulations.