

Qualifications - Senior Regulatory Compliance Specialist - Requisition: 9687

Position

Summary

The Senior Regulatory Compliance Specialist position is a publicly-facing position that will need to independently engage in an effective, ethical, and appropriate fashion with various WCHN stakeholders, including but not limited to, WCHN employees, business affiliates, agents, patients, patient's family, and other WCHN stakeholder and will be responsible, working under the supervision of the SCO, for helping to effectuate key elements of an effective compliance program, including but not limited to: (i) the investigation of potential offenses, the development of corrective action plans in response to confirmed violations of the WCHN Compliance and Ethics Program ("Compliance and Ethics Program" or "Program") and applicable law, as well as the mandatory reporting and refunding of any overpayments; (ii) the establishment of open lines of communication between the Compliance Office and all WCHN Covered Individuals and other WCHN stakeholders; (iii) the development of training and education for all affected WCHN Covered Individuals; and (iv) the performance of compliance auditing and monitoring of WCHN's Compliance and Ethics Program.

Responsibilities

1. Under the direction of the SCO, assisting with and conducting the investigation of potential offenses, and assisting with the development of corrective action plans in response to confirmed violations of the Compliance and Ethics Program and/or applicable law, as well as the mandatory reporting and refunding of any overpayments. Accountabilities in this area include the coordination and performance of internal investigations of varying degree of complexity, as warranted, in response to compliance violations, problems, issues, and concerns related to fraud, waste, and abuse and other compliance violations. Duties will include planning and conducting investigatory interviews independently and under the supervision of the SCO, drafting investigatory memoranda, and communicating investigatory findings to the appropriate stakeholders within WCHN, including varying levels of senior leadership. A related duty is to assist in the development and monitoring of corrective action plans and associated reporting, as applicable, in response to potential and suspected compliance issues that have been confirmed.
2. Responsible for, with coordination and oversight from the SCO, administering and maintaining processes for open lines of communication between the Compliance Office and all WCHN Covered Individuals, which includes workforce members, business affiliates, agendas, patients, patient's families, and other stakeholders. Main accountability is to maintain the WCHN Confidential and Anonymous Compliance and Ethics Helpline and related database (i.e., Ethics Point), which entails maintaining case details and activities within the databases, including processing information, referring cases to other departments, exchanging correspondence with complaints through the Ethics Point platform; documenting the case file as necessary, and closing completed compliance investigations/cases in the system. Further accountability in this regard is to enhance process, including providing user support, employee training, systemized monitoring, database enhancements, and improved compliance report interpretation. Related duties include: (i) regularly meeting with the SCO and other Compliance Office leadership to provide an update on the status of cases submitted to the Compliance Office by any modality, including Ethics Point, and ongoing investigations contained in same; and (ii) assisting with the creation of dashboards and reports for presentation to key WCHN stakeholders, including the Audit & Compliance Committee of the WCHN Board of Directors.

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3. Assisting the SCO in the performance of compliance auditing and monitoring and the development of internal controls to reduce compliance vulnerabilities focused on assessing WCHN's compliance with statutory, regulatory, internal standards in the following risk areas: a) The Physician Self-Referral Law ("Star Law"); b) Anti-Kickback Statute; c) Environmental compliance; d) Mandatory reporting and overpayments, e) Deficits Reduction Act of 2005; f) Medicare Parts C & D Compliance/Training and Education; g) Accountable care organizations; h) exclusionary authorities; i) Criminal Healthcare Fraud Statute; j) Civil Monetary Penalties Law; k) Federal and State False Claims Act; l) Whistleblower protection; m) Fraud, waste and abuse, n) Federal Healthcare Program and private payor requirements; o) other compliance items, as informed by OIG fraud alerts, work plan items, educational materials (including CMS Medicare Learning Network and other regulatory agency publications), regulatory advisories, and enforcement agreements issued by regulatory oversight bodies and p) other risk areas identified by the SCO or other supervising compliance officer. Under the direction of the SCO, assisting with the performance of Network-wide risk identification, assessment, scoring, and prioritization activities, which includes, without limitation, the development of a risk scoring table, Constantly monitor WCHN Compliance and Ethics Program Effectiveness including, for example (i) the development of an audit tool that shall serve as a means to perform an annual compliance program gap analysis; and (ii) the performance of an annual assessment of the WCHN Compliance and Ethics Program's effectiveness. Assisting the SCO with the preparation of an independently preparing written memoranda, PowerPoint presentations, and dashboards and other compliance metrics with regard to results of compliance auditing and monitoring of the Network-wide fraud, waste, and abuse prevention activities and WCHN Compliance and Ethics Program assessment endeavors; (i) outline compliance efforts related thereto; and (ii) document the level of effectiveness of corresponding compliance initiatives to be presented to senior WCHN leadership, including the members of the Audit and Compliance Committee of the WCHN Board of Directors. Preparation will include providing accurate data review, analysis, interpretation and reporting related to data-mining and trending audit findings to identify potential vulnerabilities and opportunities.
4. Assisting the SCO with the development and implementation of Network-wide training and education programs on: (i) compliance issues such as fraud, waste, & abuse and related Federal and State laws, and as needed, other compliance areas (e.g. Provider Based rules, billing requirements related to medical necessity, and patient notification requirements); (ii) the operation of the WCHN Compliance and Ethic Program; and (iii) the expectations of all WCHN workforce members, business affiliates, and agents under the Compliance and Ethics Program, including the potential consequences of noncompliance. Further, providing guidance and education to operational and clinical service departments regarding development and completion of any related annual department Work Plans consistent with the OIG Work Plan and service department identified areas of risk; to enhance educational programs, creating related reports in accordance with agreed upon standards and quality measures in a timely manner to be communicated to the various operational and clinical service departments.
5. Responsible for conducting a monthly screening of referring physicians, medical staff, employees, volunteers, students, trainees, board members, and vendors against all exclusion databases, as required by law, including, but not limited to, the U.S. Department of Health and Human Services Office of Inspector General List of Excluded Individuals/Entities (LEIE); U.S. General Services Administration System for Award Management (Sam) Excluded Entities List; the publicly available state-level Medicaid exclusions lists (or equivalent) for, at a minimum, Connecticut, New York, and Massachusetts; and other federal lists, including the Office of Foreign Asset Control Specially Designated Nationals list maintained by the Department of Treasury, Office of

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- Foreign Asset Control, and the OIG database containing a list of all violators of the Foreign Corrupt Protection Act ("FCPA"). In the event a match or potential match is found, responsible for investigating individuals status and coordinating any overpayments, as necessary, in conjunction with the SCO.
6. Working with the SCO, developing written policies and procedures, practices, and standards, to implement the WCHN Corporate Compliance and Ethics Program consistent with: (i) any requirements that may be found under applicable Federal and State law; (ii) the corresponding principles set forth in the Department of Health and Human Services Office of the Inspector General ("OIG") 1998 (63 Fed. Reg. 8987) and 2005 (Supplemental) Guidance to Hospitals (70 Fed. Reg. 4858) and the most current United States Sentencing Commission Guidelines Manual; and (ii) developing a fraud, waste, and abuse prevention program.
 7. Responsible for performing of audit assignments related to third party commercial audits, assists with coordinating and processing government or other external audits. This includes logging, tracking, reconciliation, and ensuring submission of requested medical records and appeals in accordance with designated timeframes. Collaborating with case management, coding and documentation, Revenue Cycle, and Denial Management to ensure quality and effectiveness of RAC and other audit processes. Consistently ensures timeframes are met or exceeded, and all stages of audit activity are identified in Audit Tracking software. Processing government and other external audit requests as required. Coordinating external third party commercial audits, assists with coordinating and processing government or other external audits. This includes logging, tracking, reconciliation, and ensuring submission of requested medical records and appeals in accordance with all designated timeframes. Collaborating with Case Management, Coding & Documentation Revenue Cycle, and Denial Management to ensure quality and effectiveness of RAC and other audit processes. Consistently ensuring timeframes are met or exceeded, and all stage of audit activity are identified in Audit Tracking software. Processing government and other external audit requests as required, following Revenue Compliance & Clinical Audit processes. Tracking audit recommendations via department approved methods ensuring accurate reporting and supporting timely implementation of management action plans.
 8. Fulfilling all compliance responsibilities related to the position, and performing other duties as assigned, including but not limited to, assisting the SCO with the development and implementation of facility-specific compliance committees, including at Norwalk Hospital, and other locations, as necessary.
 9. Performs other duties as assigned.

Other Information

This position requires a minimum formal education of Bachelor Degree and minimum of three years job-related experience.

Excellent analytical skills with the ability to compile and interpret complex data; analyze trends, problem solve. Significant knowledge and clear understanding of Compliance related federal healthcare regulations and guidelines, including but not limited to the fraud, waste and abuse laws requirements that apply to healthcare entities, and significant knowledge in conducting investigations. Excellent oral and written communication skills; ability to interact with various levels of staff and management across the WCHN organization, and other WCHN stakeholders, including patients and patient's family. Capable of building relationships and gaining trust. Ability to develop, maintain and strengthen collaborative relationships with both internal and external stakeholders. Ability to prioritize workload and meet multiple conflicting deadlines, retaining composure, efficiency and professionalism under pressure in particular in communicating with external agencies. Proficiency with Microsoft

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Excel, Word, PowerPoint and any compliance-related databases and helpline tools.

Criteria Desired (Not Required):

Working knowledge of Charge Description Master preferred. Ability to be flexible and adapt to new information, changing conditions or unexpected obstacles. Experience with Cerner and/or Soarian Financials preferred.

Certification in (i) healthcare compliance ("CHC" designation) from the Compliance Certification Board within three (3) months of appointment (must be eligible to take the certification exam at the time of appointment) or (ii) compliance and ethics ("CCEP") designation from the Compliance Certification Board at the time of appointment; and (iii) fraud examination ("CFE" designation) from the Association of Certified Fraud Examiners within fifteen months of appointment.

Position Education	
Education	Essential
BACHELOR'S LVL DGRE	No

Position Working Conditions		
Type	Working Condition	Essential
Manual Skills	Some manual skills / motor coord & finger dexterity	No
Physical Effort	Sedentary/light effort. May exert up to 10 lbs. force	No

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