Research Billing Compliance: Bridging the Gap

ASSESSMENT OF POTENTIAL RESEARCH BILLING COMPLIANCE RISKS AND IMPLEMENTATION OF PROCESSES TO MITIGATE RISKS

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BACKGROUND

Intermountain Healthcare is a not-for-profit health system with a robust clinical research program. The Office of Research consists of administrative staff with responsibility to oversee research operations and provide support services, including research billing compliance oversight. The current research billing team is relatively new (ranging between 3-18 months in the role). With little knowledge transfer from the previous team and few written procedures for guidance, it was necessary to re-examine institutional processes to ensure Research Billing Compliance.

METHOD

Existing resources were reviewed to assess the current status of Research Billing Compliance and identify potential risks. New processes were then implemented to address these risks and improve accuracy and compliance. As more information becomes available, processes are updated or refined further.

REVIEW AND IMPLEMENTATION

RESEARCH ACCOUNT HODL.

New dedication to researching and identifying clinical trial management systems (CTMS) identifying research patients via identical factors unique (DIDs) that have been involved in a previous project during the same period. This was necessary for monitoring based on factors that have a research risk, but not an account held.

PREPARATION

A review showed a low rate of mixed account holds (CMRs). However, further scrutiny of account records revealed a few instances where patients had an account held. This is a crucial metric for the large group of patients whether the account is present in the data set to ensure accurate research billing.

DOCUMENT ALIGNMENT AND CTMS CONFIGURATION

A data audit revealed an insufficient setup for reimbursement, including lack of a clinical process for documentation and CMRs. New instances of billing processes need to be reviewed for new implementation.

PROCEDURES

A new invoice form was created for coverage analysis. It is for a letter to a group of Attorneys General (AGs) for the AGs to review and approve the coverage analysis process. Procedures for that are issued in the payment are both as said in the billing. The review process is to be followed by the billing department to confirm that it is consistent with the coverage analysis. The process is reviewed to ensure that all billing procedures and all activities are accounted for in billing.

IDENTIFY Potential Risks

• New process to institute document review of all charges
• New process to institute document review of all charges
• New process to institute document review of all charges

IMPLIMENT Processes to Address Gap

• New process to institute document review of all charges
• New process to institute document review of all charges
• New process to institute document review of all charges

Evaluate

• Are there new processes effective?
• Are they feasible to maintain?
• Are new issues identified after additional monitoring?
• With new information, continue to identify risks and update processes as needed.

OUTCOME

Monitoring, oversight, and education have helped bridge the gaps in Research Billing Compliance processes and knowledge at our institution. Continued education and an improved compliance program are ongoing needs.

Researchers have received additional training in the form of a well-defined curriculum focused on research billing guidelines. The curriculum is comprehensive and includes specific training modules on various aspects of billing and compliance. The training has been well-received, with high levels of participation and positive feedback from attendees.

At the conclusion of the training, faculty members were evaluated to ensure understanding and retention of the materials. This evaluation process has helped to identify areas for improvement and has been instrumental in refining the training curriculum. The results of the evaluation have been used to make necessary adjustments to the training program to ensure maximum impact.

The feedback from faculty members has been overwhelmingly positive, with many expressing appreciation for the opportunity to enhance their knowledge of research billing and compliance. Faculty members have also shared that the training has helped them to identify potential areas for improvement within their own departments, leading to further internal initiatives to address these issues.

In conclusion, the implementation of the training program has been successful in bridging the gaps in Research Billing Compliance processes and knowledge at our institution. The continued engagement and education of faculty members will be essential in maintaining these improvements and ensuring the sustainability of the changes made.

This success is attributed to the commitment of the institution to prioritize research billing compliance and the dedication of the faculty members in ensuring the integrity of these processes.

The findings from this project are applicable to other institutions with similar challenges in Research Billing Compliance. The strategies and best practices employed can serve as a model for other institutions looking to improve their processes and reduce the risk of billing errors and non-compliance with institutional policies and regulatory requirements.