

DEPARTMENT: Reimbursement	POLICY DESCRIPTION: Subsequent Monitoring- -Departmental Self Review/Peer Review
PAGE: 1 of 1	REPLACES POLICY DATED: 4/22/98, 7/1/06, 9/1/18
EFFECTIVE DATE: October 1, 2020	REFERENCE NUMBER: RB.011
APPROVED BY: Ethics and Compliance Policy Committee	

SCOPE: Reimbursement, Internal Audit Services and Ethics & Compliance Departments.
PURPOSE: To ensure that Reimbursement Department personnel are effectively adhering to Departmental and Company policies and procedures.
POLICY: The Reimbursement Department Senior Management and Group Managing Directors will administer a peer review to provide assurance that reimbursement personnel are adhering to the reimbursement policies and procedures.
<p>PROCEDURE:</p> <ol style="list-style-type: none"> 1. This policy requires an internal peer review process to examine the Reimbursement Department's adherence to the policies and procedures. The VP of Reimbursement will direct the AVPs of Reimbursement and Group Managing Directors in administering this policy. 2. The review will follow a reimbursement peer review audit program, and the process of review will be coordinated with the Internal Audit Services Department to ensure that review procedures and compliance verification efforts are not duplicated. The timing of the reviews and the selection of the hospitals will be determined via a collaborative effort by members of Reimbursement management, including the VP, AVPs and Managing Directors. 3. The personnel performing the review (the review team) will function as "compliance agents" – e.g., verifying the completion of quarterly exhibit reviews and reviewing cost report packages for complete work papers, full documentation & support for all costs claimed on the cost report, and proper signatures by all pertinent personnel (e.g., Hospital CFO, Reporting Director) on the Cost Report Review and Work Paper Checklists. At the completion of their review, a management letter summarizing the findings of the review team shall be directed to the VP of Reimbursement and copied to the appropriate Group Managing Director, AVP of Reimbursement Operations, AVP of Internal Audit Services, and applicable SVP. This memo should detail all findings and address any further action that is required to be in compliance with the Department's and the Company's compliance policies. 4. Assurance of the Reimbursement Department's personnel's adherence to policies and procedures will be tested through the review of the cost report preparation process for individual hospitals. Each Reporting Director will be subject to a biannual peer review. 5. The review team should include personnel from all levels within the Reimbursement Department and a Group Managing Director should provide direct management and oversight. No member of the review team can review any hospital where he/she had any cost reporting/reviewing responsibility to the hospital during the period of years under review.
REFERENCES: Peer Review Audit Program