Credentialing & Quality Measures Through Compliance Regulations for all Healthcare Providers
Objectives:

- Discuss healthcare compliance and how to maintain it
- Review accreditation management
- Highlight quality care and measures and how they benefit your organization
- The importance of Credentialing
Why is Healthcare Compliance important?

- Could delay payments
- Impose sanctions
- Deactivate billing privileges
- Affect patient safety & care
Maintaining Compliance

- Compliance Administration & Standards Implementation
- Maintaining overall compliance administration or standards implementation will help protect and ensure your organization runs smoothly, efficiently, and compliantly.
  - Regulatory training
  - Compliance Reviews
  - Internal Compliance audits
  - Reporting tools
Accreditation Organization Management

- Accreditation Preparation
- Survey Support
- Plan of Correction
- Change of Information

Accreditation broadens opportunities for organizations to gain industry recognition as exceptional providers of technology-enabled care & services.

Achieving certification validates an organization's quality of care – strengthening the trust in services & maximizing marketable value.

Vast majority of accreditation standards are evidenced by policies and procedures and other operational documents.
Accreditation Organization Management

- Accreditation Preparation
- **Survey Support**
- Plan of Correction
- Change of Information

- Formal audits may be conducted by Accreditation Organizations, like ACHC, for your organization’s participation in any federal, state, or commercial health insurance programs.
- We want to ensure that your organization is 100% prepared for a review of all operational documents, licenses, accreditations, and credentials.
Accreditation Organization Management

- Accreditation Preparation
- Survey Support
- Plan of Correction
- Change of Information

How do we help?
- We work with providers to create a gameplan to implement the corrective action to achieve standards compliance
- We help write Plan of Corrections to return to ACHC with due dates in mind
Accreditation Organization Management

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Federal regulations often indicate that providers and organizations report changes they experience, such as:

- Ownership
- Address change

All changes should be reported within 30 days.
Implementation

- Many health insurance requirements include the validation of policies and procedures.

- What is your written word?
- Is it standardized for implementation within your organization, unilaterally?
Patient care is equitable care!

- Health Insurance Program Requirements.

Think about it......

- Do your enrollments penalize you or withhold full reimbursement?

- Are you taking additional steps to address additional areas of concern and providing preventative care?
Quality Care

- High-quality health care is a priority not only demanded by federal, state, and commercial health insurance plans, but also by the US Department of Health and Human Services.

- Data collected in 12-month terms can be submitted to the following pay-for-performance incentive programs:
  - electronic Clinical Quality Measures (eCQMs)
  - CMS Measures
  - Medicare Part B Claims Measures
  - National Quality Forum (NQF) Updates
  - CAHPS/ HOS Patient Experience Surveys
Quality Measures & Patient Outcomes

- Delivering high-quality care and services is rewarded and is a major focus for federal and state insurance programs.

- Increasing preventative care for patients

- Decrease the excessive number of:
  - In-office visits,
  - Hospital admissions and readmissions

- High-quality care is equitable care!

- Positive patient experience results in improved financial & patient outcomes
Credentialing - Licensing

- Licensing is a formal process that utilizes an established series of guidelines to ensure that patients receive the highest level of care from healthcare professionals who have undergone the most stringent scrutiny regarding their ability to practice medicine.

- This assures the patient that he or she is being treated by providers whose qualifications, training, licensure, and ability to practice medicine are acceptable.
Credentialing – Enrollments

- Health insurance is necessary for many Americans. At QPI, we believe that advising patients “we don’t accept your insurance” is unacceptable in most circumstances.
- Patient insurances are your payers.
- Maintain ALL credentials for accuracy and continued care.
Thank you

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