POWER OF THE PAST FORCE OF THE FUTURE
COMMUNITY CARE NETWORK OF KANSAS | OCTOBER 5-7, 2022

Operational Site Visit Panel
Moving Toward Continuous HRSA Compliance

Kyle Vath, BSN, MHA, RN
CEO, RegLantern
kyle@reglantern.com
10/7/2023
www.reglantern.com
Disclaimer

• This presentation is not endorsed by Management Strategists Consulting Group (MSCG), Health Resources Services Administration (HRSA) Bureau of Primary Health Care (BPHC), the National Association of Community Health Centers (NACHC) or any other Primary Care Association (PCA).

• The speaker is not employed by NACHC, MSCG, HRSA, BPHC or any PCA and works as an independent consultant who is contracted to do Operational Site Visits (OSV)s, Technical Assistance (TA) and web application development.

• The presenter is an independent consultant, not employed by NACHC, MSCG, HRSA, BPHC, or any PCA and does not speak on behalf of any of those organizations.

• Any advice given today does not serve as legal advice. Please consult an attorney regarding contracts, MOUs, or other legal decisions.
• Each health center should reference HRSA’s current Compliance Manual and Site Visit Protocol to determine your health center’s compliance.

• It is important for each health center to discuss areas of concern with their project officer as they prepare for their next Operational Site Visit (OSV).
FQHC Hierarchy

- Regulatory Compliance
- Mission & Vision
- Goals & Objectives
- Systems
- Key Leaders
- Action!
FQHC Hierarchy

- Regulatory Compliance
- Mission & Vision
- Goals & Objectives
- Systems
- Key Leaders
- Action!
Program Requirements

HRSA Theme

• Provide **continuous documentation** that the health center provides as many patients as possible, **access** to the highest **quality** care, while being good **stewards** of the government’s resources.
The Health Center’s Responsibilities

Section 330
Public Health Service (PHS) Act
(42 U.S.C. 254b)

Health Center Program Compliance Manual

Health Center Program Site Visit Protocol
May 26, 2022

ABC Health Center
The HRSA Compliance Manual

• Governance/Administrative Sections
• Fiscal Sections
• Clinical Sections
Governance/Admin Consultant Chapters

• Needs Assessment (Ch. 3)
• Accessible Locations and Hours of Operations (Ch. 6)
• Key Management Staff (Ch. 11)
• Collaborative Relationships (Ch. 14)
• Board Authority (Ch. 19)*
• Board Composition (Ch. 20)
Financial Consultant Chapters

• Sliding Fee Discount Program (Ch. 9)
• Contracts and Subawards (Ch. 12)*
• Conflict of Interest (Ch. 13)
• Financial Management and Accounting Systems (Ch. 15)
• Billing and Collections (Ch. 16)
• Budget (Ch. 17)
• Program Monitoring and Data Reporting Systems (Ch. 18)
Clinical Consultant Chapters

• Required and Additional Services (Ch. 4)*
• Clinical Staffing (Ch. 5)**
• Coverage for Medical Emergencies During/After Hours (Ch. 7)
• Continuity of Care & Hospital Admitting (Ch. 8)
• QI/QA (Ch. 10)
• FTCA (Ch. 21)
• Performance Analysis
HRSA’s Move Toward Continuous Compliance

- **Site Visit Protocol** (& related tools)
- **Conditions Library**
- **COMPLIANCE MANUAL**
- **FAQs**
- **HRSA Staff**

Continuous Compliance

- **Self assessment**
- **Resolve any conditions**
- **SAC/RD application**
- **Resolve any conditions**
- **Self assessment**
- **OSV**
HRSA’s Move Toward Continuous Compliance

- Technical Assistance
- Tools (SVP, Conditions Library)
- Compliance Manual

Results:
- Reduced Number of Conditions
- Faster Resolution of Conditions
- Fewer compliance-related one-year project periods

Graphics adapted from HRSA All-Program Broadcast Presentation, 7/23/2019
Moving Toward Continuous Compliance

Episodic Compliance

- Begin Focused Compliance Work
- Load Documents
- Mock Review
- Correct Non-Compliance
- OSV
- Compliance Resolution Opportunity (CRO)
- HRSA Issues NoA With Findings
- Correct Any Findings
- Submit Corrected Documentation

>8 months 7 months 6 5 4 3 2 1 0

- Notified of pending OSV
- Pre-OSV Conference Call

14 days 45 days 90 days
Moving Toward Continuous Compliance

Episodic Compliance

- **Begin Focused Compliance Work**
  - >8 months

- **Load Documents**
  - 7 months

- **Mock Review**
  - 6 months

- **Correct Non-Compliance**
  - 5 months

- **OSV**
  - 4 months

- **Compliance Resolution Opportunity (CRO)**
  - 3 months

- **HRSA Issues NoA With Findings**
  - 2 months

- **Correct Any Findings**
  - 1 month

- **Submit Corrected Documentation**
  - 0 months

- **Notified of pending OSV**

- **Pre-OSV Conference Call**

- **Timeline**
  - 14 days
  - 45 days
  - 90 days
Moving Toward Continuous Compliance

Episodic Compliance

- Begin Focused Compliance Work
- Load Documents
- Mock Review
- Correct Non-Compliance
- OSV
  - >8 months
  - 7 months
  - 6 months
  - 5 months
  - 4 months
  - 3 months
  - 2 months
  - 1 month
  - 0 months
  - Notified of pending OSV
  - Pre-OSV Conference Call

Continuous Compliance Process and Plan (Annual)

- OSV
- Pre-OSV Conference Call
- Continuous Compliance Process and Plan (Annual)

- Month 1
- Month 2
- Month 3
- Month 4
- Month 5
- Month 6
- Month 7
- Month 8
- Month 9
- Month 10
- Month 11
- Month 12

- 4 days
- 40 days
- 90 days
- 120 days
Moving Toward Continuous Compliance

Episodic Compliance

- Begin Focused Compliance Work
- Load Documents
- Mock Review
- Correct Non-Compliance

Continuous Compliance Process and Plan (Annual)

OSV

- Notified of pending OSV
- Pre-OSV Conference Call
Moving Toward Continuous Compliance

Continuous Compliance Process and Plan (Annual)

1. Month 1
2. Month 2
3. Month 3
4. Month 4
5. Month 5
6. Month 6
7. Month 7
8. Month 8
9. Month 9
10. Month 10
11. Month 11
12. Month 12

OSV

- Notified of pending OSV (3-4 months prior)
- Pre-OSV Conference Call (6-8 weeks prior)
- HRSA Issues NoA With Findings/Conditions (45 days)
- Submit Corrected Documentation (90 days)
- Compliance Resolution Opportunity (14 days)
## Top Non-Compliant Areas

### Top 5 Non-Compliant Elements Identified on-site

<table>
<thead>
<tr>
<th>Program Requirement</th>
<th>Element</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required and Additional Services</td>
<td>a. Providing and Documenting Services within Scope of Project</td>
</tr>
<tr>
<td>Board Authority</td>
<td>c. Exercising Required Authorities and Responsibilities</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>d. Procedures for Review of Privileges</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>f. Credentialing and Privileging of Contracted or Referral Providers</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>e. Credentialing and Privileging Records</td>
</tr>
</tbody>
</table>

### Top 5 Non-Compliant Elements Placed as Conditions

<table>
<thead>
<tr>
<th>Program Requirement</th>
<th>Element</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required and Additional Services</td>
<td>a. Providing and Documenting Services within Scope of Project</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>f. Credentialing and Privileging of Contracted or Referral Providers</td>
</tr>
<tr>
<td>Board Authority</td>
<td>c. Exercising Required Authorities and Responsibilities</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>e. Credentialing and Privileging Records</td>
</tr>
</tbody>
</table>

Source: HRSA Electronic Handbooks (Date Range 1/22/2019-6/24/2019)
# Top Non-Compliant Areas

## Top 5 Non-Compliant Elements Identified on-site

<table>
<thead>
<tr>
<th>Program Requirement</th>
<th>Element</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required and Additional Services</td>
<td>a. Providing and Documenting Services within Scope of Project</td>
</tr>
<tr>
<td>Board Authority</td>
<td>c. Exercising Required Authorities and Responsibilities</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>d. Procedures for Review of Privileges</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>f. Credentialing and Privileging of Contracted or Referral Providers</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>e. Credentialing and Privileging Records</td>
</tr>
</tbody>
</table>

## Top 5 Non-Compliant Elements Placed as Conditions

<table>
<thead>
<tr>
<th>Program Requirement</th>
<th>Element</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required and Additional Services</td>
<td>a. Providing and Documenting Services within Scope of Project</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>f. Credentialing and Privileging of Contracted or Referral Providers</td>
</tr>
<tr>
<td>Board Authority</td>
<td>c. Exercising Required Authorities and Responsibilities</td>
</tr>
<tr>
<td>Clinical Staffing</td>
<td>e. Credentialing and Privileging Records</td>
</tr>
</tbody>
</table>

Source: HRSA Electronic Handbooks (Date Range 1/22/2019-6/24/2019)
Survey Process Overview

• OSVs: “Support the effective oversight of the Health Center Program”

• Documents
  • Health Center Program Compliance Manual
  • Health Center Program Site Visit Protocol (SVP)

• Areas of focus:
  • Program Requirements
  • Promising Practices
  • FTCA

• Technical Assistance
• Performed initially and then each project period
• No more “Quick Fixes”
• Assigned PO no longer onsite
Compliance Resolution Opportunity (CRO)

- An opportunity (14-calendar day window) to address non-compliance findings prior to HRSA issuing the site visit report and placing conditions on the award/designation due to a failure to demonstrate compliance.

- After the OSV is concluded, HRSA will contact the health center’s Project Director through a EHBs Urgent Site Visit Report Request task to request additional information/documentation on any areas of non-compliance identified through the OSV.

- Ensure any documents referenced in your response are attached to the submission.

- There will be no extensions or exceptions.
Survey Process Overview

• Three main types of HRSA OSVs now:
  • VOSVs - Virtual OSVs
  • HCCESV - Health Center Compliance & Engagement Site Visit Pilot
  • OSV – On-site Operational Site Visit
Organizational Techniques for Survey Preparation

• Make it easy for your reviewers (think like a reviewer):
  • Provide *continuous documentation* of compliance, demonstrating that you are providing as many patients as possible *access* to the highest *quality* care while being good *stewards* of the government’s resources.
  • Copy and paste EXACT SVP language into your policies
  • Name “health center things” what HRSA names “health center things”
  • If it isn’t documented, it’s not done
  • Answer each SVP question with a document
  • Follow naming convention, but focus on clarity of naming
Strategies For Continuous Compliance

- Start preparing early (then move to continuous compliance mode)
- Review your last site visit report
- Divide up the program requirements
- Talk with your project officer
- Talk with your site surveyors
- Gather and send your documents
- Contact your PCA
- Prepare the facility
- Prepare your Board
- Review your documents
Strategies For Continuous Compliance

• Cross-train staff
• Follow blogs and NACHC newsletters
• Be alert for HRSA Program updates
• Build-in compliance reviews to regular meetings
• Create a “Continuous Regulatory Compliance Policy” and a “Continuous Regulatory Compliance Plan”
## Strategies For Continuous Compliance

<table>
<thead>
<tr>
<th>Compliance Manual Chapters</th>
<th>Yr 1 Q1</th>
<th>Yr 1 Q2</th>
<th>Yr 1 Q3</th>
<th>Yr 1 Q4</th>
<th>Yr2 Q1</th>
<th>Yr2 Q2</th>
<th>Yr2 Q3</th>
<th>Yr2 Q4</th>
<th>Yr 3 Q1</th>
<th>Yr 3 Q2</th>
<th>Yr 3 Q3</th>
<th>Yr 3 Q4 OSV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ch. 3-4</td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 5-6</td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 7-8</td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 9-10</td>
<td></td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 11-12</td>
<td></td>
<td></td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 13-14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 15-16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 17-18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ch. 19-21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Blue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Questions?