

POLICY INFORMATION

Policy Title: External Reviews and Audits Policy and Procedure

Departmental Owner: Chief Compliance, Audit, and Privacy Officer

Version Effective Date: 11/30/2023

Last Reviewed: 11/30/2023

SCOPE

This policy applies to the following individuals and/or groups:

- All of the below categories
 All Employees CT Employees NY Employees Remote Employees Contractors Volunteers Students/Interns Vendors

This policy applies to all above listed Nuvance Health workforce members including but not limited to the following locations:

- All of the below entities
- | | | |
|---|--|---|
| <input type="checkbox"/> Nuvance Health Systems | <input type="checkbox"/> Health Quest Systems, Inc. (“HQSI”) | <input type="checkbox"/> Western Connecticut Home Care, Inc (“WCHN”) |
| <input type="checkbox"/> Danbury Hospital (including New Milford Hospital Campus) | <input type="checkbox"/> Health Quest Home Care, Inc | <input type="checkbox"/> Western Connecticut Health Network Physician Hospital Organization ACO, Inc. |
| <input type="checkbox"/> Northern Dutchess Hospital | <input type="checkbox"/> Hudson Valley Cardiovascular Practice, P.C. (aka The Heart Center) (“HVCP”) | <input type="checkbox"/> Western Connecticut Home Care, Inc |
| <input type="checkbox"/> Norwalk Hospital | <input type="checkbox"/> Other HQSI-affiliated Entities Not Listed | <input type="checkbox"/> Other WCHN-affiliated Entities Not Listed |
| <input type="checkbox"/> Putnam Hospital | | <input type="checkbox"/> Nuvance Health Medical Practices (NHMP PC, NHMP CT, ENYMS & HVCP) |
| <input type="checkbox"/> Sharon Hospital | | |
| <input type="checkbox"/> Vassar Brothers Medical Center | | |

POLICY STATEMENT/PURPOSE

To ensure that Nuvance Health and its affiliates (“Nuvance”) Compliance Office can monitor the implementation of any corrective measures intended to prevent future noncompliance, this policy requires that the Compliance Office be notified of any external audits and the results of said audits.

POLICY

The Nuvance Compliance and Ethics Program Charter (“Charter”) provides the Compliance Office the express authority to review all documentation and other information that are relevant to compliance activities. This includes the authority to review -among other documents- patient records, billing records, employee records, computer audit files, demand letters, audit notifications and/or other document requests from external governmental agencies that will conduct audits or reviews. The scope of this policy includes the results of both government and commercial payer audits/reviews and consulting engagements performed to assess the accuracy of billing, reimbursement, or coding activity.

Upon receiving notification of a government or commercial payer audit or review, all departments must notify the Compliance Office of the upcoming audit or review.

Additionally, all departments are required and directed to promptly provide the Compliance Office with information prior to engagement of consulting services intended to assess the accuracy of billing, reimbursement, or coding activity.

For example: A coding manager may engage an external consultant to review the accuracy of coders. The coding manager is responsible for notifying the Compliance Office prior to engaging consultants and sharing review findings.

PROCEDURE

Government or Commercial Payer Audits and Reviews

Upon receiving a notice of a governmental or commercial payer review (which may include a demand letter, audit notification and/or other document request from an external commercial payer or governmental agency), the affected entity or department should promptly contact the Compliance Office and forward a copy of the relevant documentation and/or request. A representative from the Compliance Office shall be involved in the governmental or commercial payer review or may advise the entity/department to involve Legal Services.

Whenever possible, the appropriate department shall conduct:

- An entrance conference with the external auditors to determine the purpose and scope of the audit; and
- An exit conference to discuss the auditors initial review and conclusions including any findings and recommendations.

The Compliance Office shall attend entrance and exit conferences as deemed appropriate.

Consulting Engagement

Prior to entering into any agreement with an external consultant, the department director shall have the agreement reviewed and approved by the Compliance Office. Legal Services shall have the opportunity to perform a final review and endorsement of legal issues related to the engagement.

Audit Capture and Reporting Responsibility

It is the responsibility of the department director/designee to ensure that the audit detail is captured in the regulatory audit management software.

Audit activities should be reported to the Compliance Office monthly.

Once any compliance-related government or commercial payer audit, review, or consulting engagement is completed, the department director shall promptly share the results with the Compliance Office and, where applicable, consult with the Compliance Office regarding a response to the audit and/or planned corrective actions.

The Chief Compliance, Audit, and Privacy Officer ("CCAPO") may, based upon the findings and planned corrective measures, recommend additional actions or request confirmation of the implementation of corrective measures.

The CCAPO will report significant issues identified to the Nuvance Health Executive Compliance Committee ("ECC") and the Audit and Compliance Committee of the Board of Directors as deemed appropriate.

ENFORCEMENT



All individuals whose responsibilities are affected by this process are expected to be familiar with the basic procedures and responsibilities created by this process. Failure to comply with this process will be subject to appropriate remedial and/or disciplinary action, up to and including termination of any employment or other relationship, in accordance with this process.

RESPONSIBILITY

It is the responsibility of management across Nuvance to adhere to this policy within their respective department. For questions or issues related to this policy, contact the Compliance Office at 203-739-7110.

REFERENCES

Nuvance Health Compliance & Ethics Program Charter
Nuvance Health Internal Audit Charter

APPROVAL

DocuSigned by:

Jared B Gaynor

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11/30/2023

Signature

Date