

**University Specialty Clinics®  
and Palmetto Health  
Billing Compliance Plan**

Introduction

The University of South Carolina School of Medicine Educational Trust d/b/a University Specialty Clinics® (USC) manages the clinical faculty practice plan of the University of South Carolina School of Medicine (USC SoM). USC and Palmetto Health (PH), operating within the guidelines of the University of South Carolina (University) and PH Affiliation Agreement, are committed to compliance with applicable federal, state, and local laws relating to professional billing and reimbursement. Both institutions are fully committed to maintaining an effective billing compliance program with the following components: appropriate oversight; organized and effective training; documented billing policies and procedures; continuous monitoring to prevent and detect non-compliance; and providing an avenue to investigate employee compliance concerns. Non-compliant billing, coding, and/or documentation patterns are not tolerated and are handled expeditiously through corrective action to ensure compliance.

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Dean, School of Medicine  
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Senior Vice President and Chief  
Medical Officer  
Palmetto Health

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1. Compliance Oversight

1.1. The USC/PH Compliance Officer (Compliance Officer) reports to the University of South Carolina Vice President (VP) for Medical Affairs and the PH Senior VP and Chief Medical Officer.

1.2. The Compliance Officer, functioning within the guidelines of the University and PH Affiliation Agreement with guidance from the USC/PH Compliance Steering Committee, is responsible for the management of the USC/PH Billing Compliance Plan.

1.3. The USC/PH Compliance Steering Committee serves in an advisory role to the USC/PH Billing Compliance Office. In this advisory role, Steering Committee members are privy to sensitive information, which shall be kept confidential.

The Compliance Steering Committee consists of the Dean of the School of Medicine, the PH Senior VP and Chief Medical Officer, the USC SoM Associate Dean for Clinical Affairs, the PH VP for Finance, the University Specialty Clinics® Director of Legal Affairs, the PH Legal Counsel, the USC SoM Chief Operating Officer for Clinical Affairs, PH VP for Medical Education, the PH Chief Compliance Officer and the USC/PH Compliance Officer.

1.4. The Compliance Officer has the authority to direct the implementation of specific billing practices to ensure professional billing compliance. This authority may require the imposition of billing restrictions on healthcare professionals, enforcing or discontinuing the use of codes and/or imposing site of service billing restrictions.

1.5. The authority of the Compliance Officer extends to ensuring compliance for all billing operations for clinical services provided or billed through USC.

1.6. The Compliance Officer has the authority to approve, prior to implementation, a USC department's policy or procedure that is related to billing compliance.

1.7. All third party payer audits or investigations involving USC health care professionals shall be coordinated with the Compliance Officer. The Compliance Officer is responsible for notifying affected departments and staff of an investigation. Staff who are contacted by an investigating entity shall refer the investigator to the Compliance Officer or immediately notify the Compliance Officer of the contact.

1.8. The Compliance Officer will make every effort to resolve issues through consensus by regularly consulting with USC and PH personnel including chairs of affected departments.

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1.9. The USC /PH Billing Compliance Plan is reviewed every two years and revised when appropriate. The USC /PH Compliance Steering Committee and the USC SoM Educational Trust Board shall approve revisions to the Billing Compliance Plan. The PH Audit/Compliance Committee shall review the revisions. In addition, the revised Compliance Plan shall be presented to the PH Board for approval.

2. Department Compliance Responsibilities

2.1. Each department chair shall assign a faculty clinician to serve as the department's compliance officer to coordinate the department's professional billing compliance efforts with the Compliance Officer. The chair shall also assign an administrative staff member to serve as the department's compliance coordinator to assist with billing compliance responsibilities.

2.2. Each department healthcare professional must possess a thorough understanding of their responsibilities regarding the delivery of patient care, physical presence requirements, student and resident supervision, medical necessity requirements, documentation standards, diagnosis coding and procedure coding.

2.3. The USC SoM Educational Trust Board shall approve billing policies. Each department of the Educational Trust shall compose and maintain their department billing procedure manual that supports the approved billing policies.

2.4. The department must ensure their third party payer manuals are up-to-date and reflect current insurance and government policies.

2.5. The department must review their routing slips annually for accuracy with the current International Classification of Diseases (ICD-9) and Current Procedural Terminology (CPT) codes and their descriptors. The routing slips will be revised as needed.

2.6. All claims for professional reimbursement by, or on behalf of, USC healthcare providers are submitted in the name of the healthcare professional who rendered and/or supervised the care. Claims are accurately coded based on the medical record according to the current version of the ICD-9 manual and CPT manual, as well as, third party payer manuals, contracts, or correspondence. The medical record must be signed by the rendering provider, clearly document medical necessity and support the level of service billed.

2.7. Prior to contract execution, all contracts between USC departments and billing consultants, practice management firms or billing firms shall be approved by the Compliance Officer.

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3. Education and Training

3.1. USC healthcare professionals and staff involved in clinical operations or billing are required to attend compliance training within their first 45 days of initial employment. Attendance is mandatory and must be documented.

3.2. All appropriate faculty and staff involved in clinical operations, professional billing, and/or collections shall be trained on current compliance issues. At a minimum, training occurs on an annual basis. Attendance at compliance training is mandatory and must be documented.

3.3. PH residents and fellows are required to attend billing compliance orientation at the beginning of their residency or fellowship. Attendance is mandatory and must be documented.

3.4. Teaching physician supervision and documentation education will be offered to PH medical staff members who are involved in resident supervision.

3.5. Non-compliant billing patterns require additional intensive training for the non-compliant healthcare professional or staff member. The Compliance Office will coordinate and fund one additional training session to address the specific documentation, coding, and/or billing issues. If additional compliance training is needed, the department will be responsible for the cost and coordination of retraining until compliance standards are met, the individual resigns, or the individual ceases to bill. The retraining costs may be passed along to the health care professional. The Compliance Officer will assist with coordinating the additional training activities.

4. Internal Reviews and Monitoring

4.1. A summary report must be sent to the Compliance Officer in a timely manner if a department reviews its medical records and corresponding bills. Corrective action plans must be included in the report, when applicable, after each review. The department shall be responsible for ensuring compliance with corrective action plans.

If any changes to the coding and/or supporting documentation are recommended as a result of the review, the changes must be coordinated through the rendering provider for the provider's input. The changes may include such items as assigning more accurate diagnosis codes, procedure codes, or modifiers, or revising documentation. A patient's medical record may not be amended for billing purposes after the department or hospital time frame for record completion has expired. If a review is performed retrospectively and changes are necessary that would have affected claim payment, the payer and patient must be refunded and a corrected claim submitted when appropriate.

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4.2. The Compliance Office shall perform individual provider reviews and billing operation reviews periodically for compliance. Results of all provider reviews will be reported to the provider, administrative director, department compliance officer and the chair. Results of all billing operation reviews will be reported to the administrative director, patient accounts manager, department compliance officer and the chair. When a PH clinic is involved in a review, the results will be reported to the appropriate PH staff. The USC /PH Compliance Steering Committee will be updated with summary information of all reviews. When appropriate, the department shall submit a corrective action plan regarding the coding, documentation, or billing operation findings and shall ensure compliance with the corrective action plan. The Compliance Officer shall monitor the corrective action plan to ensure compliance standards are met and coordinate retraining activities when needed.

4.3. Corrective action plans must adequately correct the individual behavior that is responsible for the compliance offense. The Compliance Officer shall approve corrective action plans to ensure the action will address the non-compliant offense.

4.4. The Compliance Steering Committee will be consulted when repetitive non-compliant healthcare professionals or staff are identified. A repetitively non-compliant individual is subject to disciplinary action under the University or PH disciplinary policies.

4.5. The Compliance Officer, in consultation with the Compliance Steering Committee, shall contract with an independent, external billing expert on an as-needed basis to review a cross-section of records from the practice plan and teaching clinics for compliance with the USC /PH Billing Compliance Plan.

5. Investigating Compliance Issues

5.1. USC providers and staff are expected to report any suspected non-compliant activities regarding provider billing that might be inconsistent with the USC /PH Billing Compliance Plan. Individuals have the option to report suspected billing compliance issues to their supervisor, department compliance officer, department compliance coordinator, chair, or the USC /PH Compliance Officer. Individuals may report activities via telephone, electronic mail, and/or written correspondence to the Compliance Officer without fear of retaliation from their supervisor. Anonymous reports are accepted.

5.2. Whenever possible and when legally permissible, referral sources for investigations will remain confidential.

5.3. When appropriate, information will be shared with the PH Chief Compliance Officer to coordinate investigations and corrective action plans.

5.4. The Compliance Officer reports all investigations to the Dean of the School of Medicine and the PH Senior VP and Chief Medical Officer. Investigational review findings are then reported to the administrative director and chair and, when necessary, the department submits a corrective action plan to eliminate the non-compliant activity.