

<p style="text-align: center;">Term 1</p> <p>What is the identification, measurement, and prioritization of relevant events that may have a material consequence on the organization to achieve its objectives</p>	<p style="text-align: center;">Definition 1</p> <p>Risk Assessment, it's having the right controls in place to provide quality care</p>
<p style="text-align: center;">Term 2</p> <p>A process effected by an entity's board of directors, management, and other personnel desinged to provide reasonable assurance regarding the achievement of objectives is called....?</p>	<p style="text-align: center;">Definition 2</p> <p style="text-align: center;">Internal Controls</p>
<p style="text-align: center;">Term 3</p> <p>Objectives of Internal Controls (name 3)</p>	<p style="text-align: center;">Definition 3</p> <ol style="list-style-type: none">1) Reliability and Integrity of Information2) Compliance with Policies, plans, procedures, laws, regulations and contracts3) Safeguard Assets4) Econsomical and efficient use of resources5) Accomplishment of objectives and goals

<p style="text-align: center;">Term 4</p> <p>What are the "types" of internal controls?</p>	<p style="text-align: center;">Definition 4</p> <p>1) <u>Preventive</u> (e.g. ask for permission before doing an action) 2) <u>Detective</u> (e.g. Determine if you have an issue, audit trails for accessing a patient's record) 3) <u>Directive</u> (e.g. put into place to advise like guidelines, P&P, training on the how to do)</p>
<p style="text-align: center;">Term 5</p> <p>Every department has its own risks and can do a Controlled Self Assesment which helps to improve upon employee buy-in, get managers involved, and do a team approach. What is a benefit of a Controlled Self Assesment from either OIG or the US Sentencing guidelines?</p>	<p style="text-align: center;">Definition 5</p> <p>Periodic Risk Assessment (US Sentencing Guidelines) OIG incumbent on corporate officers/managers to ensure systems are in place to facilitate ethical and legal conduct</p>
<p style="text-align: center;">Term 6</p> <p>There are many different regulatory agencies that identify compliance risks. Name 10</p>	<p style="text-align: center;">Definition 6</p> <ol style="list-style-type: none"> 1. SEC, 2. JCAHO, 3. Dept of Labor, 4. Dept of Transportation, 5. Dept of Justice, 6. Drug Enforcement Agency, 7. DME, 8. OIC, 9. FTC, 10. HHS, 11. JCAHO, 12. OSHA, 13. Treasury, 14. FBI

Term 7

What are some CMS identified areas of high risk fraud? Name 5

- Definition 7
1. Sudden changes in billing,
 2. spike billing,
 3. billing by inappropriate specialities or diagnosis,
 4. geographical changes in billing,
 5. increased beneficiary compliants,
 6. compromised beneficiary / provider identities,
 7. deceased patients / providers,
 8. billing for part B instead of part A,
 9. Identity theft,
 10. High Comprehensive Error Rate (CERT) rate,
 11. Hospice,
 12. Nursing Facility Quality of Care,
 13. DME,
 14. Pharma,
 15. Ambulance,
 16. Research,
 17. Third Party Billing

Term 8

Management responsibility as it pertains to risk can be handled by implementing controls/techniques. Name four.

- Definition 8
- 1) Avoid Risk
 - 2) Transfer Risk
 - 3) Accept Risk
 - 4) Reduce or Mitigate Risk

Term 9

Name the steps in doing a risk assessment

- Definition 9
- 1) Know when to do the Risk Assessment
 - 2) Know the purpose (Identify, Measure, Prioritize)
 - 3) Know where to go to do a Risk Assessment (Mgmt, OIG Workplan, Fraud Alerts, Special Advisory Bulletins)



<p style="text-align: center;">Term 10</p> <p>Auditing and Monitoring have distinct differences. Explain.</p>	<p style="text-align: center;">Definition 10</p> <p>Auditing are formalized, independent, objective. Performed by someone with no vested interests or outcomes. Established approach for sampling Monitoring is day to day reviews, Not necessarily independent of business unit, part of doing business, approach may be informal.</p>
<p style="text-align: center;">Term 11</p> <p>Effective Auditing/Monitoring Plans consist of:</p>	<p style="text-align: center;">Definition 11</p> <p>Has to be applicable to business risks/strategy Risk areas need to be understood SME's Focus on the risk area and criticality Ownership of corrective action and monitoring Follow-up Auditing</p>
<p style="text-align: center;">Term 12</p> <p>What are the steps in an auditing and monitoring plan?</p>	<p style="text-align: center;">Definition 12</p> <ol style="list-style-type: none"> 1) Conduct a Risk Assessment (could include std of care/medically unnecessary procedures) 2) Prioritize the risks 3) Identify resources 4) Obtain Buyin 5) Document process of developing plan 6) Evaluate against assessed goals 7) Finalize the auditing / monitoring plan

<p style="text-align: center;">Term 13</p> <p style="text-align: center;">Sampling size has two types of categories. Name them</p>	<p style="text-align: center;">Definition 13</p> <p>1) Statistical (precision, could be computer system issue, overpayments for large populations, etc.) 2) Non statistical (potential area is isolated to one dept, person, etc.)</p>
<p style="text-align: center;">Term 14</p> <p style="text-align: center;">RAT-Stats is.....?</p>	<p style="text-align: center;">Definition 14</p> <p>Primary statistical audit tool used by HHS, OIG, Audit services selecting randomized samples and evaluates them</p>
<p style="text-align: center;">Term 15</p> <p style="text-align: center;">Retrospective verses Concurrent Audits can be characterized by.....?</p>	<p style="text-align: center;">Definition 15</p> <p>Retrospective milestone to go back to in system, you know the sample unit from system Concurrent any time up to the final, real time</p>

<p style="text-align: center;">Term 16</p> <p style="text-align: center;">Audit Process steps include:</p>	<p style="text-align: center;">Definition 16</p> <ol style="list-style-type: none">1) Planning2) Scope of Audit3) Notication4) Intro Mtg5) Internal Ctls/Testing6) Fieldwork7) Findings / Recommendation8) Mgmt response9) Follow-up on CAPs
<p style="text-align: center;">Term 17</p> <p style="text-align: center;">What is the ongoing process usually done by management to ensure processes are working as intended?</p>	<p style="text-align: center;">Definition 17</p> <p style="text-align: center;">Monitoring</p>
<p style="text-align: center;">Term 18</p> <p style="text-align: center;">The board should review reports on the status of the compliance program, how often?</p>	<p style="text-align: center;">Definition 18</p> <p style="text-align: center;">At least annually</p>

<p style="text-align: center;">Term 19</p> <p>What is the term called for an organization's commitment to compliance by management, employees, and contractors. Statement should summarize ethical behavior and legal principles under which the healthcare organization operates?</p>	<p style="text-align: center;">Definition 19</p> <p style="text-align: center;">Code of Conduct</p>
<p style="text-align: center;">Term 20</p> <p>OIG voluntary guidance helps to enhance the internal controls of the organization. True or False</p>	<p style="text-align: center;">Definition 20</p> <p style="text-align: center;">True</p>
<p style="text-align: center;">Term 21</p> <p>When there is poor distribution beyond the compliance officer, what happens to the organization?</p>	<p style="text-align: center;">Definition 21</p> <p>Program Implementation lags which means you do not have an effective compliance program</p>

<p style="text-align: center;">Term 22</p> <p style="text-align: center;">How does one mitigate compliance risks?</p>	<p style="text-align: center;">Definition 22</p> <p style="text-align: center;">Internal Controls</p>
<p style="text-align: center;">Term 23</p> <p style="text-align: center;">The board must have a solid understanding of compliance objectives.</p> <p style="text-align: center;">Name a consequence if this does not happen</p>	<p style="text-align: center;">Definition 23</p> <p style="text-align: center;">Undue reliance on detecting vulnerabilities Weak, ineffective compliance program</p>
<p style="text-align: center;">Term 24</p> <p style="text-align: center;">Training and Education is a component of the compliance program. What are some of the responsibilities of this?</p>	<p style="text-align: center;">Definition 24</p> <ol style="list-style-type: none">1) Educate staff, contractors on rules of compliance with their job role/function2) Ensure visibility in to policies and procedures, and standards

<p style="text-align: center;">Term 25</p> <p>What are some of the elements of an effective compliance program</p>	<p style="text-align: center;">Definition 25</p> <ol style="list-style-type: none">1. Should be led by a member of senior mgmt team and Board supported.2. Mission of department should be defined.3. Compliance department should be organized.4. Resources should be defined including staff, budget, training, and have their own autonomy to carry out the organizations compliance mission.5. Compliance function should be autonomous and where feasible report to the board directly, not to senior counsel.6. Good relationship with leaders in other departments
<p style="text-align: center;">Term 26</p> <p>First thing one should do when considering an effective compliance program</p>	<p style="text-align: center;">Definition 26</p> <p>Focus on organizational risks (risk assessment)</p>
<p style="text-align: center;">Term 27</p> <p>What are 3 benefits to a compliance program?</p>	<p style="text-align: center;">Definition 27</p> <ol style="list-style-type: none">1. Commitment to Code of Conduct.2. Increases likelihood to prevent, detect, and correct unlawful behaviors.3. Minimizes financial losses4. Encourages employees to report compliance problems/issues

<p style="text-align: center;">Term 28</p> <p>What is DRA and founded by?</p>	<p style="text-align: center;">Definition 28</p> <p>Deficit Reduction Act founded by state Medicaid program</p>
<p style="text-align: center;">Term 29</p> <p>CMS Questions Part A covers what? Part B covers what? Part C covers what? Part D covers what?</p>	<p style="text-align: center;">Definition 29</p> <p>Part A covers inpatient services provided by hospitals, SNF's and Home Health Agencies Part B covers professional fee (physician) billing Part C is Medicare Advantage Part D is Medicare Pharmacy</p>
<p style="text-align: center;">Term 30</p> <p>What provided the groundwork for compliance program development?</p>	<p style="text-align: center;">Definition 30</p> <p>Federal Sentencing Guidelines</p>

<p style="text-align: center;">Term 31</p> <p>What is the purpose of the QuiTam provision?</p>	<p style="text-align: center;">Definition 31</p> <p>This is provided to a whistleblower from an organization whereby an incentive to provide information (wrongdoing against CMS) to the federal government is done. Usually this is accomplished by awarding the individual a percentage of the recovered amount</p>
<p style="text-align: center;">Term 32</p> <p>What are the penalties of the False Claims Act?</p>	<p style="text-align: center;">Definition 32</p> <p>Removal from participation in governmental programs such as Medicare, Medicaid</p>
<p style="text-align: center;">Term 33</p> <p>Who can bring suit under the False Claims Act?</p>	<p style="text-align: center;">Attorney General Or Whistleblower (QuiTam)</p>

<p style="text-align: center;">Term 34</p> <p>What is the Physician Payment Sunshine Act?</p>	<p style="text-align: center;">Definition 34</p> <p>Drug/Device manufacturer must disclose to government on a quarterly basis anything of value provided to physicians Applies to companies with annual gross revenue of greater than 100 million</p>
<p style="text-align: center;">Term 35</p> <p>What is the difference between HIPAA privacy and security?</p>	<p style="text-align: center;">Definition 35</p> <p>Privacy covers all forms of PHI (electronic, written, oral) whereas security ONLY covers Electronic PHI</p>
<p style="text-align: center;">Term 36</p> <p>Name a few key differences between AntiKick Back statue and Stark Law?</p>	<p style="text-align: center;">Definition 36</p> <p>AKS</p> <ul style="list-style-type: none"> • Criminal/Civil • Any Federal HealthCare program • Any referral source • Contains safe harbors • OIG <p>Stark</p> <ul style="list-style-type: none"> • Civil only • Medicare only • Strict liability • Must be a physician in the mix • Exceptions • CMS advisories

<p style="text-align: center;">Term 37</p> <p>Stark Period of Disallowance what is this?</p>	<p style="text-align: center;">Definition 37</p> <p>Period when the referrals and medicare claims and referrals are not permitted. Excluded from medicare program</p>
<p style="text-align: center;">Term 38</p> <p>Name of the safe harbors of the antikick statute</p>	<p style="text-align: center;">Definition 38</p> <p style="text-align: center;">PIGSESDA is acronymn</p> <ol style="list-style-type: none">1. Practitioner Recruitment2. Investment Interests3. Group Purchasing4. Space Rental5. Equipment Rental6. Sale of Practice7. Discounts8. Ambulatory Surgical Centers
<p style="text-align: center;">Term 39</p> <p>ARRA what is this? Breach notification under ARRA, describe</p>	<p style="text-align: center;">Definition 39</p> <p>American Recovery Reinvestment Act</p> <p>Breach notification, when and how you notify when a PHI breach has occurred</p>

<p style="text-align: center;">Term 40</p> <p>What is the False Claims Act?</p>	<p style="text-align: center;">Definition 40</p> <p>Most potent tool available to the government in enforcing federal fraud and abuse prohibitions</p>
<p style="text-align: center;">Term 41</p> <p>Name the 7 essential elements of compliance?</p>	<p style="text-align: center;">Definition 41</p> <ol style="list-style-type: none">1) Policies & Procedures/Standards of Conduct2) Compliance Officer/Compliance Committee / Compliance Oversight3) Education and Training4) Monitoring and Auditing5) Reporting and Investigating6) Enforcement and Discipline7) Response and Prevention
<p style="text-align: center;">Term 42</p> <p>What is Anti-Trust?</p>	<p style="text-align: center;">Definition 42</p> <p style="text-align: center;">Price Fixing</p>

<p style="text-align: center;">Term 43</p> <p>What is EMTALA?</p>	<p style="text-align: center;">Definition 43</p> <p>Emergency Medical Treatment Active Labor Act</p>
<p style="text-align: center;">Term 44</p> <p>What is USSC?</p>	<p style="text-align: center;">Definition 44</p> <p>United States Sentencing Commission</p>
<p style="text-align: center;">Term 45</p> <p>What is a key factor in planning for monitoring and auditing?</p>	<p style="text-align: center;">Definition 45</p> <p>Scalability, you can't complete your workplan if you don't have enough resources to implement the plan by the end of the year</p>

<p style="text-align: center;">Term 46</p> <p>Response and Prevention requires ?</p>	<p style="text-align: center;">Definition 46</p> <p>1) Training of people on how to conduct an investigation otherwise you can expose the organization to further litigation</p> <p>2) Resolution of issues by policies and procedures</p>
<p style="text-align: center;">Term 47</p> <p>What are two primary objectives of the Board of Directors?</p>	<p style="text-align: center;">Definition 47</p> <p>1. Decision Making Function apply duty of care to specific decision</p> <p>2. Oversight function apply duty of care to day to day business activities, BOD can delegate to the CEO</p>
<p style="text-align: center;">Term 48</p> <p>When we use the term duty of care for the Board of Directors what does this mean?</p>	<p style="text-align: center;">Definition 48</p> <p>It means that the BOD acted in:</p> <p>a) good faith</p> <p>b) the level of care that a prudent person would, like asking questions and understanding what is going on</p> <p>c) a manner that is best for the organization</p>

<p style="text-align: center;">Term 49</p> <p>To become a Medicare Biller must setup what?</p>	<p style="text-align: center;">Definition 49</p> <p style="text-align: center;">Conditions of Participation (CoP)</p>
<p style="text-align: center;">Term 50</p> <p>What are the primary focus areas for the Board of Directors as it pertains to compliance?</p>	<p style="text-align: center;">Definition 50</p> <ol style="list-style-type: none">1. Structural - Understanding the scope of the compliance program2. Operational - Understanding the operations of the compliance program
<p style="text-align: center;">Term 51</p> <p>What is HIPAA?</p>	<p style="text-align: center;">Definition 51</p> <p style="text-align: center;">Health Insurance Portability and Accountability Act</p>

<p style="text-align: center;">Term 52</p> <p>What is Administrative Simplification?</p>	<p style="text-align: center;">Definition 52</p> <p>User to improve security in EDI, safeguards confidentiality of private information and protects integrity of healthcare data, standardizes electronic exchanges of clinical and administrative data</p>
<p style="text-align: center;">Term 53</p> <p>PHI or protected health information that is collected by an individual or received by a covered entity can be used or disclosed by these four areas. Name them.</p>	<p style="text-align: center;">Definition 53</p> <ol style="list-style-type: none">1) Uses & Disclosures for Treatment, Payment, and Healthcare Operations2) Uses and Disclosures in public interest (e.g. flu)3) Uses and disclosures w/an opportunity to object (e.g. spouse picking up a prescription)4) Authorization (my permission granted)
<p style="text-align: center;">Term 54</p> <p>What are the ONLY two instances where a use/disclosure does not require an authorization?</p>	<p style="text-align: center;">Definition 54</p> <ol style="list-style-type: none">1) To the patient w/some exceptions (MH, BH, CD)2) To the HHS to investigate alleged privacy violations

<p style="text-align: center;">Term 55</p> <p>What is FERPA and is this allowed under PHI use/disclosure?</p>	<p style="text-align: center;">Definition 55</p> <p>Family Educational Rights and Privacy Act, which safeguards or protects student educational records from uses and disclosures.</p>
<p style="text-align: center;">Term 56</p> <p>HIPAA consent and authorization have key differences, what are they?</p>	<p style="text-align: center;">Definition 56</p> <p>The Privacy Rule permits, but does not require, a covered entity voluntarily to obtain patient consent for uses and disclosures of protected health information for treatment, payment, and health care operations. By contrast, an “authorization” is required by the Privacy Rule for uses and disclosures of protected health information not otherwise allowed by the Rule.</p>
<p style="text-align: center;">Term 57</p> <p>Permissions and Required under the HIPAA rule are NOT the same thing. Explain</p>	<p style="text-align: center;">Definition 57</p> <p>You still can be denied even if you have permissions and authorizations under HIPAA whereas required is Mandatory</p>

<p style="text-align: center;">Term 58</p> <p>Name some examples of Uses and Disclosures for other purposes aside from TPO (treatment, payments, healthcare operations)</p>	<p style="text-align: center;">Definition 58</p> <p>Public Health Health Oversight Law Enforcement Avert Serious Threat Research Worker's Compensation Organ/Tissue Donation Decedents Information</p>
<p style="text-align: center;">Term 59</p> <p>What is Deldentification as it pertains to PHI?</p>	<p style="text-align: center;">Definition 59</p> <p>Removal of any identifiers or the individual, relatives, employers, or household members</p>
<p style="text-align: center;">Term 60</p> <p>What is Limited Data Set (LDS)?</p>	<p style="text-align: center;">Definition 60</p> <p>Smaller paired down information necessary to do function (minimal necessary). Applies to areas such as Public Health, Research, Healthcare operations</p>

<p style="text-align: center;">Term 61</p> <p>You may disclose PHI with applicable laws and standards of ethical conduct if.....?</p>	<p style="text-align: center;">Definition 61</p> <p>Good faith believes the disclosure to avert serious and imminent threat to public and/or individual.</p>
<p style="text-align: center;">Term 62</p> <p>All Uses and Disclosures of PHI that are not explicitly required or allowed under the regulations may ONLY be done with an authorization. Name 2 examples</p>	<p style="text-align: center;">Definition 62</p> <p style="text-align: center;">Marketing Fundraising</p>
<p style="text-align: center;">Term 63</p> <p>Uses and Disclosures that provide an opportunity to object may include:</p>	<p style="text-align: center;">Definition 63</p> <ol style="list-style-type: none">1. Facility Directory (in hospital setting)2. Family, Friends, Others involved in patient's care or payments for patient cares3. Notifications (natural disasters)

<p style="text-align: center;">Term 64</p> <p>What information can a patient not get access to in a Designated Record Set?</p>	<p style="text-align: center;">Definition 64</p> <p style="text-align: center;">Mental Health/PsychoTherapy Litigation CLIA (lab)</p>
<p style="text-align: center;">Term 65</p> <p>Willful neglect differs from reasonable diligence, explain.</p>	<p style="text-align: center;">Definition 65</p> <ol style="list-style-type: none"> 1. Reasonable diligence is the business care a reasonable person seeking to satisfy a legal requirement under similiar circumstances 2. Willful neglect is conscious, intentional failure or reckless indifference to the obligation to comply with the administrative simplification provision.
<p style="text-align: center;">Term 66</p> <p>What has OIG has identified high risk area</p> <p>they are as follows</p> <p>Home Health</p> <p>DME</p> <p>Identify the reasons for each element above as to why they are high risk for OIG</p> <p>A)</p>	<p style="text-align: center;">Definition 66</p>

<p style="text-align: center;">Term 67</p> <p>What impacts compliance infrastructure?</p>	<p style="text-align: center;">Definition 67</p> <p style="text-align: center;">Size Financial Resources (\$\$) Scope of Compliance Program</p>
<p style="text-align: center;">Term 68</p> <p>Name some Key Buy-in Techniques</p>	<p style="text-align: center;">Definition 68</p> <ol style="list-style-type: none">1. Motivation2. Participation3. Cooperation4. Education
<p style="text-align: center;">Term 69</p> <p>IN order to build to trust to facilitate what should a compliance professional do? How to influence change in the organization.</p>	<p style="text-align: center;">Definition 69</p> <p style="text-align: center;">Communicate good and bad news Honor confidentiality Allow frustrations Keep your commitment</p>

<p>Term 70</p> <p>Challenges in training physicians</p>	<p>Definition 70</p> <ol style="list-style-type: none">1. Peer to peer instruction2. Time commitment3. Hesitance to open dialogue4. Issues differ from employee
<p>Term 71</p> <p>Why should training be evaluated?</p>	<p>Definition 71</p> <ol style="list-style-type: none">1. Make sure it's correct and current2. Make sure it's effective to identify areas of improvement3. Is the training repeatable
<p>Term 72</p> <p>What are some of the levels for training evaluation?</p>	<p>Definition 72</p> <ol style="list-style-type: none">1. Action2. Learning3. Behavior4. Results

<p style="text-align: center;">Term 73</p> <p>Training requirements for compliance include:</p>	<p style="text-align: center;">Definition 73</p> <ol style="list-style-type: none">1. Engaging2. Thought Provoking3. Positive call for action
<p style="text-align: center;">Term 74</p> <p>In a COI what is the first thing a compliance professional should do?</p>	<p style="text-align: center;">Definition 74</p> <p>Has there been a disclosure? Investigation?</p>
<p style="text-align: center;">Term 75</p> <p>Voluntary Disclosure Process with CMS</p>	<p style="text-align: center;">Definition 75</p> <ol style="list-style-type: none">1. Validate2. Notify Government3. Investigate4. Report

<p style="text-align: center;">Term 76</p> <p>You've identified a Medicare (CMS) billing issue what is the first thing you do</p>	<p style="text-align: center;">Definition 76</p> <p>Stop Billing, notify CMS, and return any moneys that are due</p>
<p style="text-align: center;">Term 77</p> <p>If a provider is on the OIG sanctions list, what do you do first? (list valuation report)</p>	<p style="text-align: center;">Definition 77</p> <p>Put provider on the administrative leave</p>
<p style="text-align: center;">Term 78</p> <p>Why are Compliance Programs Important?</p>	<p style="text-align: center;">Definition 78</p> <ol style="list-style-type: none">1. Raises Awareness (publicity exposure can harm brand/company so showing you have a compliance program helps)2. Mitigation Factor (self disclosure penalties decrease when this is done)3. Communicates Commitment4. Avoids Corporate Integrity Agreemtn5. Reduces the threat of QuiTam (whistleblowers)

<p style="text-align: center;">Term 79</p> <p>If the Board of Directors do NOT exist, who should the compliance officer report to?</p>	<p style="text-align: center;">Definition 79</p> <p style="text-align: center;">Highest level of authority</p>
<p style="text-align: center;">Term 80</p> <p>What is a compliance program?</p>	<p style="text-align: center;">Definition 80</p> <ol style="list-style-type: none">1. Prevents & Detects violations of laws or policy2. Defines expectations for employees for ethical and proper behaviors when doing business3. Demonstrates organization's "doing the right thing"4. Encourages problems to be reported5. Provides mechanism for constant monitoring6. Recommended by the government
<p style="text-align: center;">Term 81</p> <p>What are some preventive ways to avoid a QuiTam (whistleblower) lawsuit?</p>	<p style="text-align: center;">Definition 81</p> <ol style="list-style-type: none">1. Create a corporate atmosphere that encourages compliance2. Set up a hotline3. Listen to employees

<p style="text-align: center;">Term 82</p> <p>A compliance program provides:</p>	<p style="text-align: center;">Definition 82</p> <ol style="list-style-type: none"> 1. Education 2. Prevention 3. Detection 4. Collaboration 5. Enforcement
<p style="text-align: center;">Term 83</p> <p>Who Needs a Compliance Program? Name a few.</p>	<p style="text-align: center;">Definition 83</p> <ol style="list-style-type: none"> 1. Physician Practices 2. DME 3. Home Health 4. Hospitals 5. Labs 6. Teaching Institutions 7. Others....
<p style="text-align: center;">Term 84</p> <p>Name Organizational Steps to an Effective Compliance Program.....</p>	<p style="text-align: center;">Definition 84</p> <ol style="list-style-type: none"> 1. Gain Support Commitment <ul style="list-style-type: none"> ○ Board ○ Management ○ Providers ○ Staff 2. Financial Support <ul style="list-style-type: none"> ○ Development/Start up ○ Educational Materials ○ Staffing ○ Ongoing Operations 3. Develop code of conduct <ul style="list-style-type: none"> ○ Organizations ethical attitude ○ Address weak areas 4. Identify Staffing needs <ul style="list-style-type: none"> ○ Appointment compliance officer ○ Oversight committee ○ Counsel 5. Conduct Internal Assessment

- Interviews
 - Identify Risk Areas
- 6. Develop Mission and Goals**

<p style="text-align: center;">Term 85</p> <p style="text-align: center;">Compliance Oversight Responsibilities has different duties based on job role/function. Name them based on the job role below:</p> <ul style="list-style-type: none"> • CEO and board of directors oversight • Ownership/Senior Level Down • Compliance Officer 	<p style="text-align: center;">Definition 85</p> <ol style="list-style-type: none"> 1. CEO/Board Oversight oversee frequency of reporting and provide governance structure 2. Ownership/Senior Level Down address are resources sufficient, are compliance elements integrated into performance, how are compliance issues reported and handled 3. Compliance officer ensures they are right fit and address personal and professional risk
<p style="text-align: center;">Term 86</p> <p style="text-align: center;">As part of the compliance tenets, employee training is key. name some of the elements to effective training</p>	<p style="text-align: center;">Definition 86</p> <ol style="list-style-type: none"> 1. Commitment presence 2. Training geared to increase compliance knowledge of employees 3. Training for high risk areas covered 4. Training incorporated into day to day business operations 5. Proof / documentation of training
<p style="text-align: center;">Term 87</p> <p style="text-align: center;">What are the effective elements for monitoring and auditing?</p>	<p style="text-align: center;">Definition 87</p> <ol style="list-style-type: none"> 1. Have you got an auditing plan 2. Auditing methodology what types of audits being done 3. Has your program gone beyond process audits 4. Proactive verses Reactive audits 5. Auditing strategy 6. Results reporting 7. Corrective Action and verification

<p style="text-align: center;">Term 88</p> <p>What are the effective elements for enforcement and discipline?</p>	<p style="text-align: center;">Definition 88</p> <ol style="list-style-type: none">1. Appropriate and consistent disciplinary mechanisms in place2. Tracking system developed for disciplinary actions
<p style="text-align: center;">Term 89</p> <p>If there was a problem with an employee and his manager and the compliance is contacted, what is your next action?</p>	<p style="text-align: center;">Definition 89</p> <p>Direct them to Human Resources and ask for a follow-up report</p>
<p style="text-align: center;">Term 90</p> <p>If there is a detection of wrong doing, what is the first step for the compliance professional?</p>	<p style="text-align: center;">Definition 90</p> <p>Contact legal counsel who can make the initial assessment of the risks involved</p>

<p style="text-align: center;">Term 91</p> <p>What is the purpose of a baseline audit?</p>	<p style="text-align: center;">Definition 91</p> <ol style="list-style-type: none">1. Outlines current operational standard2. Identifies real and potential weaknesses3. Offers recommendations regarding necessary remedial actions
<p style="text-align: center;">Term 92</p> <p>Compliance officer imposes disciplinary actions.</p>	<p style="text-align: center;">Definition 92</p> <p>This is FALSE, since a compliance officer can ONLY recommend disciplinary actions but not impose. Management enforces discipline.</p>
<p style="text-align: center;">Term 93</p> <p>What is the next step once resources have been identified when implementing an auditing/monitoring plan?</p>	<p style="text-align: center;">Definition 93</p> <p style="text-align: center;">Obtain Buy-In</p>

<p style="text-align: center;">Term 94</p> <p>When reviewing compliance efforts, what is the first thing to be done?</p>	<p style="text-align: center;">Definition 94</p> <p>Review one of the guidances and see if the risks areas are listed in the OIG guidance and make sure these risks are addressed in your organization</p>
<p style="text-align: center;">Term 95</p> <p>Once a compliance program is established, what is the first thing that an organization should do?</p>	<p style="text-align: center;">Definition 95</p> <p>Conduct a Risk Assessment</p>
<p style="text-align: center;">Term 96</p> <p>When physicians are billing for services that are performed by residents, what is this called?</p>	<p style="text-align: center;">Definition 96</p> <p>Physicians at a Teaching Hospital</p>

<p style="text-align: center;">Term 97</p> <p>You have done a compliance plan. What comprises a compliance program?</p>	<p style="text-align: center;">Definition 97</p> <p>Budgeting, Resources, Compliance Board (and listing), Compliance Officer</p>
<p style="text-align: center;">Term 98</p> <p>What is key techniques for obtaining buy-in?</p>	<p style="text-align: center;">Definition 98</p> <p>Motivation</p>
<p style="text-align: center;">Term 99</p> <p>One of the processes for risk identification is document review. Name some of the documents that should be considered for review.</p>	<p style="text-align: center;">Definition 99</p> <p>OIG work plan, Fraud Alerts, Management Inputs</p>