

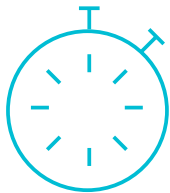
# Strategies for Effective Compliance Training and Education



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Understanding compliance requirements in the healthcare industry is not always intuitive. There are many laws and regulations prohibiting certain types of activities in healthcare that might be allowed in other industries. Additionally, individuals involved in providing healthcare are often focused on their primary jobs such as taking care of patients, running clinics and hospitals, or serving in leadership positions within an organization. This should be the case; compliance is important, but it is not the sole mission of the organization and employees have many important patient-centered tasks.

It is for these reasons, among others, that individuals need training and education relating to their compliance obligations. In fact, it is so important that “training and education” is one of the seven key elements of an effective compliance program. What can compliance professionals do to ensure any training and education provided is effective?



The U.S. Department of Health and Human Services Office of Inspector General (OIG) writes the following on this topic:

*“Providing appropriate education and training is a vital component of an effective compliance program. The compliance officer, with the support and aid of the Compliance Committee, should develop and coordinate a multifaceted education and training program specific to the needs of and risks presented by the entity.”*

There are general topics, as well as specific topics, that should be considered in a compliance training and education plan. Some of these include:

## GENERAL:

The entity’s compliance program, how it is designed, how to contact the department, and general awareness that a program exists and is a priority for the organization.

Board governance and oversight, which includes oversight of the compliance program.

Expectations of employee participation and support of the compliance program.

## SPECIFIC (DEPENDING ON THE ORGANIZATION’S RISK PROFILE, NOT AN ALL-INCLUSIVE LIST):

- Federal False Claims Act
- Federal anti-kickback statute
- Stark law (physician anti-self-referral law)
- State fraud and abuse laws
- HIPAA privacy, security, and breach notification
- The identity and role of the Compliance Officer
- The role of the Compliance Committee
- The importance of open communication with the compliance officer
- The various ways individuals can raise compliance questions and concerns with the compliance officer
- Non-retaliation for disclosing or raising compliance concerns
- The means through which the entity enforces its written policies and procedures equitably and impartially

## TARGETED TRAINING BY ROLE

Targeted training sessions should be developed and assigned based on individuals' roles and responsibilities, and any compliance risks specific to those roles and responsibilities. For example, some employees are regularly involved in medical coding, billing, documentation, and medical necessity as organizations prepare to submit claims to third party payors. Such individuals should receive training on specific requirements associated with these tasks. There are regular cycles of new, deleted, and revised medical codes, including ICD-10, CPT®, and HCPCS codes. Similarly, payors such as Medicare publish Local and National Coverage Determinations (LCDs and NCDs) that provide detailed documentation, coverage, and coding requirements.

Other employees might not be involved in billing or the revenue cycle, but they might have access to medical records. Such employees need in-depth training on HIPAA and privacy. Those processing requests for medical records need to know the federal and state laws relating to authorization for release of records, timeliness in meeting the requests, and steps to take if Protected Health Information (PHI) was inappropriately released or left unprotected.

Employees are not the only individuals that need to be considered for targeted training. Members serving on a governing board need unique compliance training that is much different than employees of an organization.

The OIG's guidance explains:

*"New board members should receive training on their governance and compliance oversight roles promptly after joining the board. The initial board training should address the specific responsibilities of health care board members, including the risks, oversight areas, and approaches to conducting effective oversight of a health care entity. The compliance officer should consider arranging additional, periodic training to update the board on the entity's compliance risks, including changes to applicable Federal and State health care requirements."*<sup>2</sup>

The OIG is not the only enforcement agency that stresses the importance of role-based training that focuses on specific risks within an organization. The U.S. Department of Justice encourages asking the following questions to assess whether the compliance training is appropriately focused:<sup>3</sup>

- What training have employees in relevant control functions received?
- Has the company provided tailored training for high-risk and control employees, including training that addresses risks in the area where the misconduct occurred?
- Have supervisory employees received different or supplementary training?
- What analysis has the company undertaken to determine who should be trained and on what subjects?

## ADULT LEARNING PRINCIPLES

In addition to guidance from enforcement agencies, effective compliance training should incorporate good principles of learning in general. As the audience of compliance training is adults, one place compliance professionals can turn to is the field of educational psychology, and specifically key principles of adult learning.

A pioneer in the field of best practices for adult learners was Malcolm Knowles. He wrote about five assumptions of adult learners and four principles that should be considered when designing, delivering, and assessing training for adults.<sup>4</sup>

The five assumptions, as outlined by Knowles, state that the adult learner:

1. Moves from dependency to increasing self-directedness as he/she matures and can direct his/her own learning.
2. Draws on his/her accumulated reservoir of life experiences to aid learning.
3. Is ready to learn when he/she assumes new social or life roles.
4. Is problem-centered and wants to apply new learning immediately.
5. Is motivated to learn by internal, rather than external, factors.

These assumptions lead to four key principles that need to be top of mind when designing and delivering training for adult learners. This includes compliance training.

The four principles are:<sup>5</sup>

1. Adults need to be involved in the planning and evaluation of their instruction.
2. Experience (including mistakes) provides the basis for the learning activities.
3. Adults are most interested in learning subjects that have immediate relevance and impact to their job or personal life.
4. Adult learning is problem-centered rather than content-oriented.



## CONCLUSION

Training and education are vital components of an organization's compliance efforts. In fact, it is identified as one of the seven elements of an effective compliance program. Government enforcement agencies such as the OIG and DOJ have emphasized the importance of training and education as it relates to compliance programs.

Compliance training plans should cover both general and specific topics. Compliance professionals should consider role-based training for individuals involved in key control functions or who are most likely to need specific training for their job duties. Lastly, compliance training can be more effective when it infuses principles of adult learning theory.

<sup>1</sup> Page 46, <https://oig.hhs.gov/documents/compliance-guidance/1135/HHS-OIG-GCPG-2023.pdf>

<sup>2</sup> Page 47, <https://oig.hhs.gov/documents/compliance-guidance/1135/HHS-OIG-GCPG-2023.pdf>

<sup>3</sup> Page 5, <https://www.justice.gov/criminal-fraud/page/file/937501/download>

<sup>4</sup> Knowles, M. (1980). *The modern practice of adult education: Andragogy versus pedagogy*. Rev. and updated ed. Englewood Cliffs, NJ: Cambridge Adult Education. Knowles, M. (1975). *Self-directed learning: A guide for learners and teachers*. Chicago: Follett Publishing Company.

<sup>5</sup> Kearsley, G. (2010). *Andragogy* (M.Knowles). The theory Into practice database. Retrieved from <http://tip.psychology.org>



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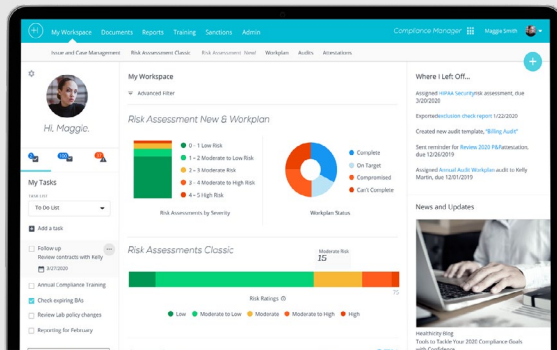
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CJ Wolf is a healthcare professional with more than 20 years of experience in hospital and physician revenue cycle, practice management, compliance, coding, billing, and client services. He has provided healthcare consulting and solution services to hospitals and physician organizations throughout the country.



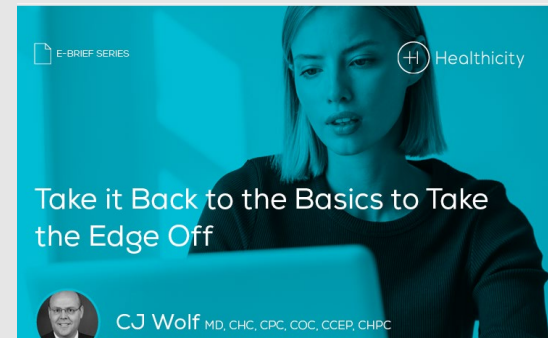
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