Meet

Kimberly Johnson, RHIA, CPC, CHC
Professional Practice Compliance Officer, Corporate Compliance Office, University of Kentucky HealthCare

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Editor’s note: This interview with Kimberly Johnson was conducted in April by Julene Brown, Immediate Past President of HCCA and Director of Corporate Compliance for Innovis Health. Julene may be contacted by e-mail at jbrown@innovishealth.com. Kimberly may be contacted by e-mail at KimJ@kmsf.org.

JB: When I hear people talk about the University of Kentucky, I think basketball, so it will be great to hear about the UK HealthCare compliance program and what you do. First though, please share some information on your background with us.

KJ: I obtained my degree in Health Information Management [HIM] from Eastern Kentucky University. My career began in quality assurance at Kentucky Clinic, which is the primary UK HealthCare outpatient practice. We obtained Joint Commission accreditation. I was responsible for helping clinical departments develop quality plans and assisting them with monitoring quality indicators. This was my first real experience with chart reviews. I moved from that position into the first HIM Director position for the outpatient practice.

In 1997, Kentucky Medical Services Foundation (KMSF), which is the billing agent for the UK Physician Group Practice, recruited me to join their compliance team as a Compliance Analyst, due to my experience in conducting chart reviews and due to the coding education that I received as part of my HIM training.

After mastering coding audits and the CMS Teaching Physician rules, I decided to take my experience on the road as a consultant. I joined PricewaterhouseCoopers as a Physician Coding Consultant. While there, I had the opportunity to participate in several Physicians At Teaching Hospitals [PATH] audits.

I eventually returned to UK and KMSF and continued to work my way up the ladder to my current position as Professional Practice Compliance Officer.

JB: Can you tell us about the organization you work for?

KJ: I am employed by Kentucky Medical Services Foundation, which is a non-profit 501(c)3 corporation that supports the University of Kentucky by providing billing and collection services on behalf of the physicians who practice within the UK HealthCare enterprise, and administration of all clinical practice income. KMSF provides a broad range of services for the faculty and community physicians within UK HealthCare, including accounts receivable management, contracting, contract monitoring, financial counseling, insurance billing and follow-up, patient billing and collections, insurance training for all registration staff within UK HealthCare, financial reporting and analysis, clinical budget management, compliance, customer service, coding oversight, physician fringe benefit management, and practice plan administration. KMSF also assists in the development of UK HealthCare strategic initiative planning and budgeting. Additionally, KMSF conducts comprehensive due diligence associated with prospective community-based practices and an ongoing broad range of support for established practices. KMSF does not employ the physicians.

UK HealthCare is a component of the University of Kentucky. It was established in 1957 and consists of the medical, nursing,
health sciences, public health, dental, and pharmacy colleges and related patient care activities in Lexington, Kentucky and in several off-site locations. UK HealthCare facilities include UK Chandler Hospital, Kentucky Children’s Hospital, UK HealthCare Good Samaritan Hospital, UK HealthCare East, Kentucky Clinic, Polk-Dalton Clinic, and Kentucky Clinic South as well as a network of community hospital clinical affiliations and stand-alone clinics throughout Kentucky. It encompasses 80 specialized clinics, 143 outreach programs, and a team of 6,000 physicians, nurses, pharmacists, and health care workers—all dedicated to patient health.

JB: Would you review the structure of your compliance program at UK?

KJ: The Office of Corporate Compliance has the responsibility of overseeing compliance monitoring for the UK College of Medicine, UK College of Pharmacy, UK College of Nursing, UK Chandler Hospital, UK HealthCare Good Samaritan Hospital, the UK Physician Group Practice, and Kentucky Medical Services Foundation. Our department is comprised of a chief compliance officer, research compliance manager, coding compliance educator, senior compliance analyst, RAC analyst, three coding compliance analysts, an administrative assistant, and my position. We are adding a special investigator position who will focus on high risk areas.

Our program is based upon the U.S. Sentencing Commission’s guidelines (the seven elements for an effective compliance program).

JB: You are the Professional Practice Compliance Officer. Can you explain what your job entails?

JK: My title was chosen to encompass compliance officer responsibilities related not only to the physician group practice, but also to the many other health care providers we employ, such as nurse practitioners and physician assistants. The majority of my time has been, and continues to be, spent on billing compliance matters. However, my role has recently expanded to include all compliance activities that impact the professional practice, such as HIPAA, the Stark Law, contracts, electronic medical records, etc.

JB: In working with professional practice compliance, do you have any tips for getting compliance with the rules and regulations across to providers of care?

KJ: It really isn’t as difficult as some may think. They are busy, so always get to the point quickly, and be clear, concise, and consistent. Be flexible about scheduling meetings with them, as patient care is their first priority. I often hear, “Just tell me what I need to do and I will do it.” Always show them how the rule or regulation will directly affect them. If you can provide scenarios or explanations that relate to them clinically, that is best. Make them part of the solution; get their buy-in.

JB: What does your education program involve with the providers? How do you keep it fresh and enticing?

KJ: We include a mix of customized one-on-one educational sessions and computer-based learning. Each new billing provider receives a mandatory coding and documentation class prior to billing. The key to keeping their interest is making it real through the use of clinical scenarios that are tailored to their unique specialty. We also use benchmarks to let them know how they compare to their peers.

JB: Do you measure the effectiveness of your professional practice program? And if so, how?

KJ: We have two key approaches. The first is through our annual compliance report process. These reports are presented to the Compliance Committee and senior leadership by each clinical department and each college on an annual basis. We use an electronic survey tool that is populated with indicators (questions) based upon key risks to that particular department and the organizations. Based upon answers, a scorecard is completed.

The second approach is our auditing and monitoring program for coding and documentation compliance. Every new provider receives coding and documentation compliance education as soon as he/she is granted clinical privileges. Then we conduct a review of their services within 30-60 days of billing to identify any potential aberrances. Based upon results, we may repeat this process. Otherwise the provider is placed into our regular audit schedule. We sample a minimum of 10 claims for every billing provider each audit cycle and provide one-on-one education and feedback. Currently, we are auditing approximately 800 providers. Coding and documentation audit results are included in each department’s annual report to the Compliance Committee for review and further action.

JB: Where do you see Compliance headed in the future?

KJ: Compliance needs to be at the head of the table in every organization. The Compliance department is too often seen as a reactive department, as opposed to proactive. As we have heard in many forums recently, there will be a greater focus on quality and pay-for-performance in the future. I believe that is exactly where efforts should be focused.

JB: Kimberly, are you certified in health care compliance (CHC)?

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KJ: Yes, I became certified in health care compliance in 2007. The continuing education required by certification keeps me informed. The credential has provided me with an additional level of credibility as a compliance officer.

JB: Have you attended any of the HCCA conferences or academies? If so, what benefits has this brought to your career in compliance?

KJ: This is great timing, as I just returned from the Compliance Institute in Dallas. HCCA provided me with the opportunity to meet others who have similar jobs with the same concerns and challenges I experience. Through the HCCA conferences, I have had the opportunity to hear from the best leaders in the industry and my colleagues. At this year’s conference, I attended a session on how to be an effective compliance officer. We tend to focus so much on how we as compliance officers can help our programs be effective. I was grateful to see a session that would help me be more effective! I would like to see more sessions like this at the conferences.

JB: What have been your biggest challenges in your job?

KJ: There are two: communication and staying apprised of changes. In a large organization full of busy clinicians and administrators, getting the word out to a large audience is tough, especially when it involves complex regulatory guidance and continual changes.

JB: What do you think is the most important component of a compliance program?

KJ: You must have buy-in at the top. If the tone at the top is that compliance is a necessary evil, as opposed to compliance is important to the success of the organization, you are going to have problems. Compliance should be a part of the solution, rather than the department that is consulted when a problem arises.

JB: Please tell us why Compliance is important to you.

KJ: First, as a tax payer and a patient, I want to receive the best quality of care for the money. Second, I want to ensure that our elderly and the lower-income population have access to affordable health care. Finally, I want our organization and providers to continue to thrive and remain the premier provider of health care services in the State of Kentucky.

JB: What advice would you give to a new compliance officer?

KJ: It is important to build bridges and maintain an atmosphere of openness. Avoid scare tactics when discussing risks, as this typically creates silos. Always remember that compliance is everyone’s responsibility, not just the Compliance department. Never take things personally. You won’t be loved by everyone, but remember that as a compliance professional, it is your duty to “do the right thing.” Network not just inside but also outside your organization. I have developed numerous working relationships with peer institutions such as Vanderbilt University, University of Louisville, University of Florida, etc. You’ve heard of peer pressure? Use it!

JB: Leisure time – we always need to think about that! Do you have any hobbies you are involved in?

KJ: I enjoy riding horses and playing an occasional game of golf—two great hobbies to have when you live in Kentucky! And, of course, when the Wildcats are playing, I’m right there cheering them on!

JB: It has been a pleasure interviewing you. Thank you and keep up the great work in the health care compliance profession.