Thank you for joining

Lilypad Webinar #7 Provider Contracting and Compliance

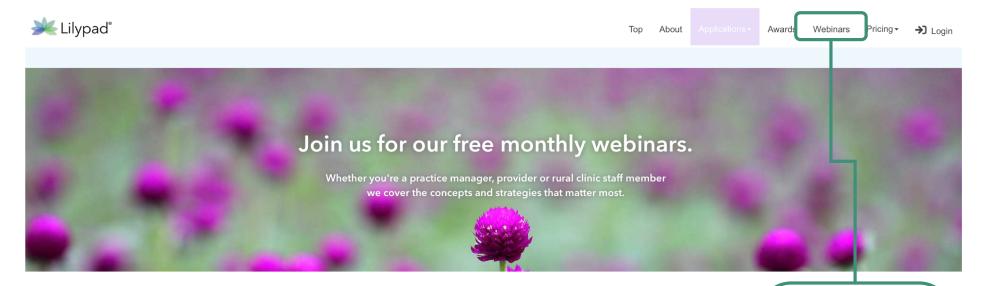
Monday, July 2020 3:00 EST

We will record this 30-minute webinar and post a link to the recording as well as the slides after the webinar on our website

All participants will be muted







Lilypad® Webinars Are Free to Register, View or Download

	Webinar Topic	Registration	Video	Slides
October 16	Provider Productivity and Compensation		Watch	Download
November 21	Clinic Designations and Strategies		Watch	Download
December 16	Practice Management Best Practices		Watch	Download
January 20	Practice Alignment - Specialty Care		Watch	Download
February 17	National and State RHC Rankings		Watch	Download
March 23	Postponed due to COVID-19			
April 20	Postponed due to COVID-19			
May 18	Postponed due to COVID-19			
June 22	Optimizing Cost Reports for RHCs	Register		
July 20	Provider Contracting/Compliance	Register		
August 24	340B Drug Program	Register		
September 21	Clinic Spotlight B	Register		
October 19	Process and Outcomes Quality Measurement	Register		

What We'll Cover Today

Provider Contracting and Compliance 2020 RHC Telemedicine Survey



COVID-19 "Blanket" Stark Waivers

- "Diagnosis or medically necessary treatment of COVID-19 for any patient or individual, whether or not the patient or individual is diagnosed with a confirmed case of COVID-19;
- Securing the services of physicians and other health care practitioners and professionals to furnish medically necessary patient care services, including services not related to the diagnosis and treatment of COVID-19, in response to the COVID-19 outbreak in the United States;
- Ensuring the ability of health care providers to address patient and community needs **due to the COVID-19 outbreak** in the United States;
- Expanding the capacity of health care providers to address patient and community needs **due to the COVID-19 outbreak** in the United States;
- Shifting the diagnosis and care of patients to appropriate alternative settings due to the COVID-19 outbreak in the United States; or
- Addressing medical practice or business interruption due to the COVID-19 outbreak in the United States in order to maintain the availability of medical care and related services for patients and the community."

Cost of Compliance

10	SEP. 2013	CALIFORNIA PROVIDER TO PAY \$17.5 MILLION RELATED TO ANTI KICKBACK. Read it here
9	MAY 2015	NY HOSPITAL SETTLES KICKBACK ALLEGATIONS FOR \$18.8 MILLION WITH THE DOJ. Read it here
8	APR. 2015	TEXAS HOSPITAL AGREES TO PAY UNITED STATES \$21.75 MILLION TO SETTLE ALLEGED FALSE CLAIMS ACT VIOLATIONS. Read it here
7	MAY 2013	JURY RETURNS \$39 MILLION VERDICT AGAINST HOSPITAL FOR VIOLATING STARK LAW & FALSE CLAIMS ACT. Read it here
6	JAN. 2015	GLOBAL PHARMACEUTICAL COMPANY AGREES TO PAY \$39 MILLION TO SETTLE KICKBACK ALLEGATIONS. Read it here
5	MAY 2014	HEALTH SYSTEM IN KENTUCKY PAYS \$40.9 MILLION TO RESOLVE FALSE CLAIMS AND STARK LAW VIOLATION ALLEGATIONS. Read it here
4	SEP. 2015	FLORIDA SYSTEM TO PAY \$69.5 MILLION OVER STARK AND FALSE CLAIMS ALLEGATIONS OF IMPROPER PAYMENTS TO PHYSICIANS. Read it here
3	MAR. 2014	DAYTONA BEACH MEDICAL CENTER PAYS \$85 MILLION TO RESOLVE FALSE CLAIMS AND STARK LAW VIOLATION ALLEGATIONS. Read it here
2	SEP. 2015	SYSTEM TO PAY \$118.7 MILLION IN LARGEST UNLITIGATED STARK LAW CASE. Read it here
1	FEB. 2014	NATIONAL DIALYSIS CHAIN REACHES AGREEMENT TO PAY \$389 MILLION SETTLEMENT FOR AKS VIOLATIONS. Read it here

Recent Violations

MedStar Health Pays \$35M to Settle 2 Healthcare Fraud Cases

ALABAMA ORTHO PRACTICE PAYS \$1.2M FALSE CLAIMS SETTLEMENT

KIM DELMONICO • FRI, AUGUST 30TH, 2019

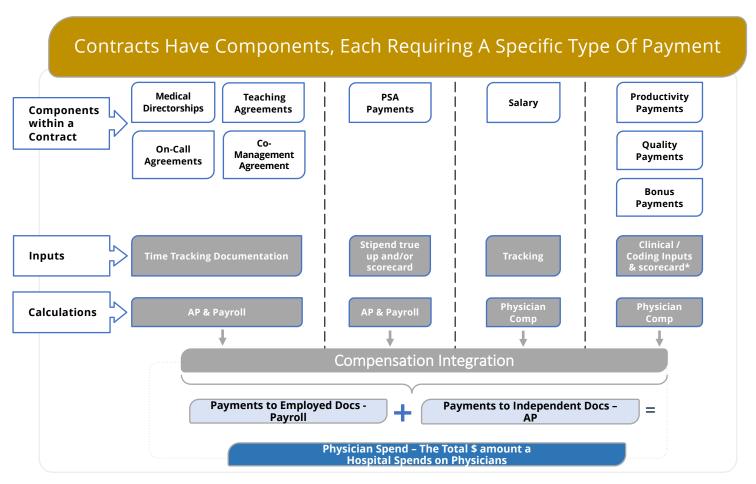
Cookeville hospital agrees to pay \$4.1M to settle allegation claims

Chuck Morris, Multimedia Managing Editor - Web

Oklahoma hospital, physician group will pay \$72M to settle false claims case

Oklahoma City, OK | beckershospitalreview.com | 5d

Components of Physician Spend – Contract Execution



Top 5 Mistakes Made in Physician Compensation

3	Inconsistency	Contracts, valuation opinions, and payroll are not standardized, documented, or executed consistently.
\$	Commercial Reasonableness	Desperation leads to throwing money at recruitment and retention rather than stepping back and determining what makes sense. Often opportunities for non-monetary compensation are overlooked.
	Wrong People at the Table	Organizations take a top down approach with compensation and do not involve the practice administrator or the physicians.
•••	Survey Says	Hospitals assume MGMA median will protect them from a compliance standpoint – it won't. The OIG has consistently come out saying surveys are not the final word on FMV. Do your homework and have a proper valuation.
*	Monitoring	When compensation requires supervision, minimum clinical hours, or administrative duties, monitoring of scheduling and documentation is critical.

Check Your Pulse: 3 Examinations To Do Now

- **1. Examine your current contracts in place** are they documented? Are they consistent? Are they being executed the way you think?
- **2. Examine your incentive compensation** are you 100% salary or do you have incentives? Do your incentives make sense?
- **3. Examine your compliance risk** what do the proposed Stark law changes mean for you? When was the last valuation performed? CONSISTENCY WITH SURVEYS IS NOT ENOUGH!



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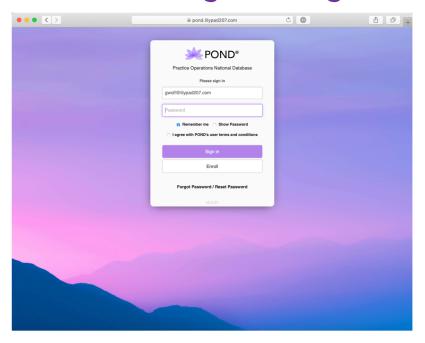
2020 RHC Telemedicine Survey

IT'S FREE!



RHC Telemedicine Survey

Administered August 1 - August 31



WHAT YOU'LL NEED

- 1. 5 minutes
- 2. Internet connection and Web browser
- 3. Clinic NPI and CCN

WHAT YOU'LL GET

- 1. Telemedicine Industry Report
- 2. Access to dedicated webinar
- 3. Clinic Lilypad Award® scorecard

RHC Telemedicine Survey

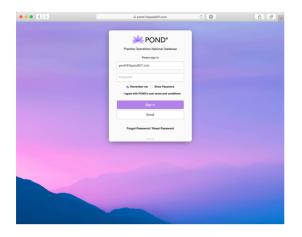
Step 1: Enroll



Step 2: Validate



Step 3: Complete Survey





About POND®

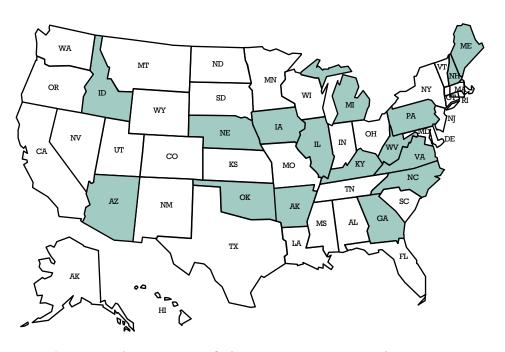


Practice Operations National Database®



Developed by Lilypad, POND® is the only analytics and benchmarking system dedicated specifically to rural primary care practices

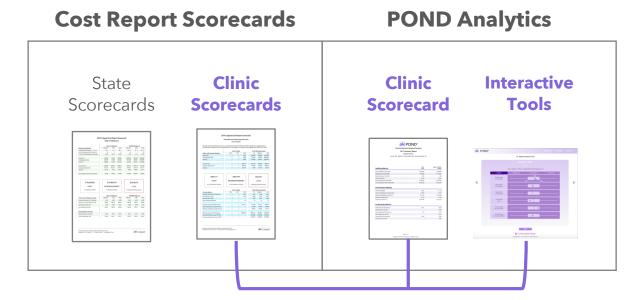
Our Current States



If you are located in one of these states you have access to the POND program right now



How Does It Work?



To gain access to these reports and tools the required data must be entered into the POND web application



2020-2021 SHIP Grant



SHIP Grant



SHIP allowable investments include activities to assist small rural hospitals with their quality improvement efforts and with their adaptation to changing payment systems through investments in hardware, software and related trainings. This includes aiding with value and quality improvement.

Value-Based Purchasing (VBP) Investment Activity

D. Provider-Based Clinic Quality Measures Education

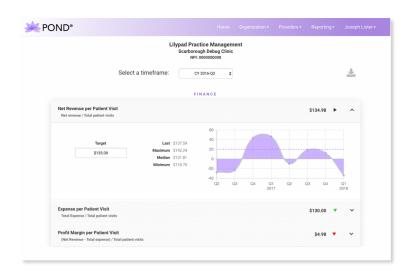
Any activity that supports educational training for provider-based clinic quality improvement reporting and scores

\$12,000

Annual per Hospital funding



Lilypad's SHIP Grant Offering



POND® Professional + Rural Health Clinic Educational Resources



Lilypad's SHIP Grant Offering

Lilypad's new POND Professional web application enables RHCs to collect, report and benchmark rural relevant financial, operational and quality metrics every quarter. The tool helps clinical teams set targets, build dashboards and share information among all your clinic staff and providers. The new Practice Management web application integrates diagnostic and educational resources to ensure your clinic optimizes:

- 2 Productivity Standards
- 3 Optimal Hospital Linkage
- 4 340B Optimization
- 5 Specialty Care Integration

- 6 Patient Panel Development
- 7 HCC Education and Monitoring
- 8 CCM, TCM and BHI Implementation
- 9 Fair Market Valuation Basis
- 10 Quality Measurement/Benchmarks



Join Us Next Month

340B Drug Program

Monday, August 24th at 3:00 EST



Thanks for Joining

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