



# *HCCA's 12<sup>TH</sup> ANNUAL* COMPLIANCE INSTITUTE

APRIL 13–16, 2008 | NEW ORLEANS, LA | HILTON RIVERSIDE NEW ORLEANS

## Technology is Racing Can Your Compliance Program Keep Up?

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# Areas to Cover Today

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- Technology and Long Term Care
  - Where Are We Today?
  - What's In Store for us?
  - How Do We Prepare for Change?
  
- Who's Here to Help?
  - Vendor Partners
  - Trade Associations (HIMSS, AHIMA, AHCA, AAHSA)
  - Long Term Care Consortium (LTCC)



# Who are we?

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## Skilled Nursing Facility (SNF) Statistics

- 16,000 facilities within the United States
- 1.7 million beds occupied by 1.5 million elderly
- 3 million patients treated annually
- 20 million physician or physician/extender encounters with nursing facility residents annually

Statistics acquired from the CCHIT Environmental Scan Submission Document dated January 2007



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# Where Are You Today?

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- Have you started using technology for clinical documentation purposes?
  - CareTracker?
  - ADL Tracking Tool?
  - Bedside Documentation?
  - Handheld Data Capture?
  - Electronic Health Record?
  - Scanning?

# What type of Health Record Do You Have?

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- Electronic Health Record?
- Hybrid Health Record?
- Paper Health Record?



# How Do SNF's Use Technology Today?

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- 100% of Medicare Certified SNF uses Technology Today (MDS Submission)
- 77% for the purpose of Billing or Claims Submission
- 17% for Eligibility Processing
- 1% for Electronic Health Record

Statistics acquired from the CCHIT Environmental Scan Submission Document dated January 2007



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# How Will SNF's Use Technology in 5 Years?

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- 100% of Medicare Certified SNF (MDS Submission)
- 99% for the purpose of Billing or Claims Submission
- 29% for Eligibility Processing
- 14% for Electronic Health Record

Statistics acquired from the CCHIT Environmental Scan Submission Document dated January 2007



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# Why is This Significant?

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- Multitude of Regulations for Electronic Data Management
- 35 States already have Security Breach Reporting Requirements
- Transitioning from a Paper Record to a Hybrid Record
- Transitioning from a Hybrid Record to an Electronic Record

# Should You Be Concerned?

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Let's look at an example of an Electronic Health Record and Signature Regulation from the State of Arkansas and then decide.



# Arkansas Regulation Electronic Health Record for LTC

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- Sample Areas Identified in Regulation:
  - Access Controls
  - Access Logs
  - Back-up Process
  - Regulator Access (DHHS, CMS)
  - All computer systems utilized whether in-house or third party must comply with the Regulation

# Access by “Regulators”

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- Regulators must have:
  - “Human Readable” format access to Electronic Health Record
  - Access must be provided without facility personnel being present.
  - Access means all entries AND accompanying logs.
    - Could be a printout of the record or electronic access per the request of the DHHS, OLTC or CMS personnel
    - Entry must list the date and time of every entry
    - Entry must list the individual who performed the entry

# Backup Processes

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- Full Backup must be performed at least WEEKLY
- Incremental or Differential Backups DAILY
- Backup Media must be maintained locally and off-site
- Backup must be tested at least monthly
- If third party is handling the backup then they too must test back up at least monthly

# Should You Be Concerned?

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Concerned - Probably  
Aware – Definitely  
Preparing today - Absolutely

So then what can we do?

# Things To Consider

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- How will each portion of the record be maintained?
  - Some Paper and Some Electronic?
  - All Electronically Scanned into Computer?
  - Data Entry by staff and Scanned into Computer?
- Determine which Policies and Procedures will need to be Updated
- Defining Access
  - Who and How
- Track Electronic Implementation/Migration

# Look of the Medical Record

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- Hybrid – a mix of paper and electronic
- Electronic Medical Record
  - All paper received by other providers scanned into system
  - All facility documentation keyed directly into system
- Production of Record
  - Print on Demand?
  - Print certain sections daily for emergency situations or for easier access?

# Sample Policies to Update

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- HIPAA Policies
  - Designated Record Set Definition
  - Access
  - Release of Information
- Facility Operations Policies
  - Clinical Documentation Protocols
  - Authentication
  - Disaster Planning
  - Power Interruption Procedures

# Access Controls

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Who will have Access and How?

- Staff
- Patients and Families
- Surveyors
- Ombudsman
- Physicians
- Agency Staff



# Don't Forget To:

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- Educate the Medical Records Staff
- Define how a resident will access their electronic part of the medical record
- Define what has to be printed vs. managed electronically
- Determine what information is stored vs. shredded after printing
- Document what portion of the record went electronic when
- Insert a placeholder in the paper chart indicating that certain portions of the record are now electronic

# Who can help us?

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Marshall our Resources:

- Long Term Care Consortium (LTCC)
- Trade Associations (HIMSS, AHIMA, AHCA, AAHSA)
- Vendors



# LTCC Mission Statement

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To provide leadership and guidance to the long term care profession utilizing the member organizations' collective knowledge, expertise and information resources to improve overall compliance efforts and reduce the overall burden of compliance through collaboration on important initiatives that are common to the profession.



# Current LTCC Committees

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- Medicaid Integrity Program
- Compliance Program Enhancement
- Transition to Electronic Health Record
- Security Breach
- Training
- ICD-9
- LTCC Governance

# Vendors

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- Educate us on technology advances
- Participate in Standards Organizations
- Certify their software when applicable



# Associations

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- AHIMA
- HIMSS
- AHCA and AAHSA
- HCCA



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# Now What?

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- Get Involved
- Monitor Legislative Changes
- Educate Your Staff
- Define Your Hybrid Record
- Update Policies and Procedures
- Track Your Progress
- Use Your Vendor Resources
- Get Ready for Change

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# Questions?



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# Thank You!



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