

Report on Medicare Compliance Volume 30, Number 41. November 15, 2021

List of Potential Risks: Developing Your Risk Assessment

By Nina Youngstrom

This is a list of the many potential risks facing health care organizations, said Kelly Sauders, a partner at Deloitte & Touche LLP.^[1] In addition, there are risks stemming from the COVID-19 pandemic, including the supply chain, virtual care, potential fraud related to COVID-19 tests, security vulnerabilities in remote working and many other areas. Contact Sauders at ksauders@deloitte.com.

Risk Considerations in Health Care for 2021

1. Culture/Governance
 - a. Culture/Tone at the Top
 - b. Policies and Procedures
 - c. Roles and Responsibilities
 - d. Compliance Function
 - e. Board Oversight for Compliance
 - f. Board Effectiveness/Knowledge
 - g. Management
 - h. Executive Compensation/Performance Incentives/Alignment
 2. Institutional Compliance Program
 - a. Code of Conduct
 - b. Training and Education
 - c. Communication
 - d. Disciplinary Action
 - e. Policies and Procedures
 - f. Auditing and Monitoring
 - g. Response and Prevention
 3. Departmental Compliance
 - a. Pharmacy
-

- b. Emergency Department (EMTALA)
- c. Wound Care
- d. Cancer Center
- e. Laboratory
- f. Radiology
- g. PT/OT/ST
- h. Operational Departments

4. Contract Management/Third-Party Risk

- a. Physician Arrangements
- b. Joint Ventures
- c. Vendor Agreements
- d. Contract Repository
- e. Third-Party Vendor Management

5. Conflict of Interest

- a. Board-Level
- b. Executive Leadership and Management
- c. Nonemployed Physicians
- d. Foreign Support

6. Clinical Research

- a. Research Compliance Program
- b. Clinical Trials Billing
- c. Human Subject Protection
- d. Scientific Misconduct
- e. Grant Management
- f. Research Conflict of Interest
- g. Institutional Review Board (IRB) Oversight

7. Quality/Performance Improvement

- a. Patient Safety

- b. Medical Errors
- c. Patient Satisfaction
- d. Value-Based Care
- e. Quality Indicator Monitoring and Reporting
- f. Joint Commission Accreditation
- g. HACs and Readmissions
- h. Opioid-Related Monitoring
- i. Fraud, Waste, and Abuse Prevention

8. Hospital Coding and Billing

- a. Inpatient Coding (“compliance DRGs”)
- b. Short Stays/Observation
- c. Computer-assisted Coding
- d. Admitting Privileges/Appropriate Admission Orders
- e. Outlier Payments/Payments > Charges

9. Professional Coding and Billing

- a. Training and Education
- b. Physician Documentation and Coding
- c. Auditing and Monitoring
- d. Computer-Assisted Coding
- e. Use of Scribes
- f. Incident-to, Split-Shared, etc.

10. Privacy and Security

- a. Access and Permissions
- b. Physical and Device Security
- c. Privacy, Security, and Compliance
- d. Phishing, Ransomware, and Breach Response Readiness
- e. Risks with Automation, Artificial Intelligence
- f. System Acquisition/Implementation

11. Materials Management/Procurement
 - a. 340B Drug Pricing Program
 - b. Retail Pharmacy Pricing
 - c. Vendor Background Checks
 - d. Vendor Vulnerability (Single-Source)
 - e. Vendors with PHI Access/Business Associate Agreements
12. Specific Compliance/Regulatory Risks
 - a. Recovery Audit Contractor Readiness
 - b. Provider-Based Status
 - c. Durable Medical Equipment
 - d. Cost Reporting
 - e. Stark & Anti-Kickback
 - f. Medical Device Management
 - g. Manufacturer Credits for Medical Devices
 - h. Medical Necessity
 - i. Sanctioned Providers
 - j. HIPAA Privacy & Security
 - k. Kickbacks
 - l. Physician Arrangements/Contracting
13. Alternate Payment Models/Delivery
 - a. Accountable Care Organization Reporting
 - b. Telehealth and Virtual Care Compliance
 - c. Price Transparency
 - d. Population Health
14. Other Programs/Services
 - a. Inpatient Psychiatry
 - b. IP Rehabilitation
 - c. Ambulance Services

d. SNF, Hospice, Home Health (Requirements for Certification/Payment)

15. Medical Education

a. Program Quality & Accreditation

b. Affiliation Management

c. Faculty Recruiting & Retention

16. Revenue Cycle

a. Scheduling/Verifications

b. Registration/Admitting

c. Charge Description Master (CDM)

d. Charge Capture

e. Patient Billing/Collections

f. A/R, Denials, Bad Debt

g. Credit Balances & Refunds

h. CMS PEPPER Monitoring

i. Payer Audits

j. In-House vs. Outsourced Functions

This document is only available to subscribers. Please [log in](#) or [purchase access](#).

[Purchase Login](#)