

Report on Medicare Compliance Volume 27, Number 31. September 03, 2018

Compliance Checklist for Due Diligence with Physician Practices

Here's a version of a checklist used by California-based Dignity Health when it does the compliance portion of due diligence before and during physician practice acquisitions. Contact Dawnese Kindelt, senior compliance director, at dawnese.kindelt@dignityhealth.org.

Item	Questions/Information Requested	Response	Documentation Provided? (Please explain N/A in the Response column)
01.	<p>List of all providers including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Name <input type="checkbox"/> Credential (MD, DO, etc.) <input type="checkbox"/> Provider NPI <p>NOTE: Please do not provide information for providers not involved in the acquisition.</p>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A
02.	Does practice use a management company or billing company? If yes, provide name of company and copy of contract(s).		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A
03.	<p>CPT/Modifier utilization for each provider involved in the acquisition. Specifically, the list should indicate:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Provider <input type="checkbox"/> CPT <input type="checkbox"/> Modifier(s), if applicable <input type="checkbox"/> Number of times each code was billed during the report period <p>(See Example Below)</p> <p>This information must be in Excel. All submitted codes must be attributed to a specific provider, not grouped under rooms (ex. Lab or Injection Room)</p>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A
04.	Any policies/procedures that are related to coding and billing.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A

Item	Questions/Information Requested	Response	Documentation Provided? (Please explain N/A in the Response column)
05.	List and describe discounts or special offers to patients.		☒☒ Yes ☒ N/A
06.	Does your practice use electronic medical record, billing or scheduling systems? If yes, describe the system(s) and provide any related documentation, licenses, or agreements.		☒☒ Yes ☒ N/A
07.	Documentation template used by the practice?		☒☒ Yes ☒ N/A
08.	Current encounter form/charge document used by the practice?		☒☒ Yes ☒ N/A
09.	Any documentation related to current compliance program?		☒☒ Yes ☒ N/A
10.	Summary of RAC or other audit correspondence (Medicare or Medicaid)		☒☒ Yes ☒ N/A
11.	Any internal/external consultant or audit reports related to coding, billing, documentation?		☒☒ Yes ☒ N/A
12.	Are allied health professionals (NP, PA) billed to Medicare/Medicaid directly; or Incident to a physician?		☒☒ Yes ☒ N/A

Compliance Due Diligence Document Request

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