- FY22 Compliance Fraud Awareness
- Condition Codes, and Diagnosis selection
- Public Health Emergency, National May 23, 2022
- Proper Billing for Pt Supplied Drugs

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OFFICE OF CORPORATE COMPLIANCE NEWSLETTER

GUIDANCE MATERIALS
- OCC Website
- RESOURCES:
  - FY22 Compliance Fraud Awareness
  - Selection of Condition Codes, and Diagnosis
  - Public Health Emergency, National May 23, 2022
  - Proper Billing for Pt Supplied Drugs

- FY22 CBT
- Compliance FY22 CBT

INGALLS:
There are two options to complete annual Compliance Fraud Awareness credit:

1. Online self-study course
2. In person class

- Compliance@bsd.uchicago.edu

EDUCATION UPDATES
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- OCC Newsletters
- UCM Inpatient encounters. You do not need to use Dragon Medical One speech
- Improve documentation and cut down on time spent entering data with Dragon
- Tips for Selecting Diagnoses:
  - Document accurate diagnosis based on clinical evidence
  - Include primarily Physical Environment, Life Safety Codes, and Training
  - Use the appropriate Condition Code
- FY24 Program Year
- Changes to Inpatient and Ambulatory Payment Systems (IPPS) for FY24
- FY24 IPPS Proposed Rule
- IMPACT:
- CMS released a proposed IPPS rule for FY24
- Rule can be found online for NTAP to increase transparency; CMS will not summarize applications in
- Starting with FY2024, CMS is proposing to publicly post applications
- FDA will continue to study and make additional regulatory changes to the TEFCA
- Resources (FHIR).

- Purpose:
- To advance digital quality measurement and use of Fast Healthcare Interoperability
- Resources: (FHIR)

- CMS issued a proposed RAC (Recovery Audit Contractor) topic which will focus on
- administrative and drug code in these scenarios.

- Impact:
- Impact how the payor processes that particular charge line item (e.g. procedure
- Payment for PDMP

- For CY 2023, CMS is proposing to require and modify the
- Drug Monitoring Program (PDMP)
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- Due to the impact of the COVID

- Argentina:
- Adjustments and changes to the payment systems

- Proposal to revise CoP requirements to continue COVID

- Proposing a 5% cap on any decrease to a hospitals wage index from its wage index

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