COMPLIANCE RESOURCES

Mitigate risk & maintain regulatory compliance via a commitment to extraordinary quality + matchless integrity in clinical service delivery, billing & documentation.

REDESIGNING TOMORROW TOGETHER



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Mission Statement

HealthPRO® Heritage Compliance Division Mission Statement

For cross-functional teams at all levels of our enterprise:

to promote a culture which fosters quality and integrity
in clinical service delivery, billing, and documentation;
to produce data-driven results using sophisticated analytics,
root cause analysis, and multi-disciplinary partnerships;
to prioritize proactive, transparent communication,
ethical conduct, and a deep commitment to meeting
and exceeding expectations for above-board
practices dictated by federal and state laws.



Our Quality Assurance & Compliance (QAC) Team



ALISSA M. VERTES, MS, CCC-SLP, CHC® is a Speech Language Pathologist with 27+ years of experience across healthcare settings; including 18+ years of clinical experience managing rehabilitation departments across long-term care, an acute care hospital, and outpatient settings. Alissa holds a Master of Speech Pathology from Nova Southeastern University with a specialty in communication language and disorders, Board Certified in Healthcare Compliance (CHC®) by the Health Care Compliance Association since 2011. Since 2010, Alissa has served as Chief Compliance Officer for HealthPRO® Heritage providing compliance leadership within our company as well as in the communities that we serve. Dedicated to achieving and maintaining the highest standard of service, Alissa provides internal/external risk assessments including compliance oversight, process analysis, and documentation defense for multi-state SNF providers. She is a specialist in risk assessments for rehabilitation services and an expert on therapy documentation and billing reviews, including: supportive nursing documentation; audit & denial management processes and risk mitigation; compliance policy and procedures; rehab practice analysis; and clinical competency assessment. Alissa is a national speaker on internal therapy investigations and defensible documentation in regards to healthcare.



TONY BARGER MS OTR/L, RAC-CT is a licensed Occupational Therapist with 21+ years of experience in the post-acute healthcare arena. He holds a Master of Science in Occupational Therapy from the University of Indianapolis. His experience as an occupational therapy practitioner, as well as a community and multi-site manager in the skilled nursing, senior living, and outpatient care settings has framed his passion for clinical and operational, and leadership excellence. Currently Tony functions as the Senior VP of QAC providing compliance support to the southeast division including collaborative frameworks to mitigate risk; directing and managing corporate compliance initiatives throughout the organization to ensure adherence to organization policies and best practices; leading continuous quality improvement and quality assurance processes; and collaborating on internal compliance investigations; internal and external billing and clinical documentation review; field regulatory education targeting federal, state, intermediary, and licensure levels; and associate training and professional development across all organizational levels. Tony also serves on the HealthPRO® Heritage senior living leadership team, fostering process refinement and risk mitigation associated with reimbursement, regulatory, and other compliance initiatives within the rehab agency and outpatient environment. In addition to presenting to health care student and professional audiences, Tony holds the American Association of Nurse Assessment Coordination's Resident Assessment Coordinator (RAC-CT) certification, providing MDS education and regulatory support to HealthPRO® Heritage and its partners. He served on the HealthPRO® Heritage PDPM Expert Panel guiding organizational preparation for the skilled nursing facility reimbursement model changes implemented in 2019.



DIANE PALACIO, OT is a Board-Certified Occupational Therapist with 25+ years of experience in rehab settings in long-term care, acute care, outpatient, home health, and schools. She holds a Bachelor of Science in Occupational Therapy from the University of Stellenbosch. Her experience includes clinical service delivery; direct supervision of multiple occupational therapy assistants in various clinical settings; clinical and operations management; information technology; clinical program development; and appeals management. She currently serves as HealthPRO® Heritage's VP of Regulatory Compliance and oversees the company's Regulatory Committee, tasked with establishing organizational response to regulatory and legislative changes in the post-acute industry, which includes the analysis of all regulatory and legislative materials; the coordination of a consistent approach to gathering and processing including regulatory statute review, analysis; and decision-making as needed to support QAC, operational, and clinical services delivery. Diane guides compliance directives for Revenue Cycle Management functions to ensure compliance with CMS billing and program enrollment and credentialing requirements, and also oversees denials prevention initiatives for the QAC Team including coordination and management of all direct bill and full-service customer denials; development of documentation training resources and denials prevention strategies; and integration of data analysis to identify and predict trends and direct training initiatives.



SHERI TOMLINSON, M.A. CCC-SLP has 20+ years of management experience in post-acute care facilities. She holds an Master of Arts Speech Language Pathology from The University of Akron with extensive audit, procedural, and regulatory experience, as well as a thorough understanding of the appeal process for denied claims. She currently functions as a VP of QAC for HealthPRO® Heritage supporting the midwest division. She oversees compliance initiatives for skilled nursing and outpatient therapy departments. Her key focus areas include conducting and serving as a mentor in compliance investigations involving adherence to company policies and procedures; monitoring regional compliance to company initiatives in collaboration with field leaders; and overseeing the development of compliance policies and procedures for organizational inclusion. Sheri also serves as a state and regional presenter on clinical documentation, audits, and regulatory changes.



BERENICE GALVEZ-SOTO PTA, CI, CKTP+, QCP has 12+ years of clinical experience across care settings such as pediatrics, workers compensation, orthopedics, skilled nursing, outpatient, and home health. She holds a Bachelor's Degree in Healthcare Administration from Pima Medical Institute and an Associate's Degree in Applied Science-PTA Program from Morton College. During her nine years as a licensed Physical Therapist Assistant, Berenice managed rehab departments across the post-acute care arena. She has 10 years of experience as a PTA Instructor and FSBPT item writer. She also holds certifications in Quality Assurance & Progress Improvement, education, workers compensation, aquatic therapy, kinesiotaping, CPR, and POCT Toxicology. She holds a PTA Liaison position with the Illinois Physical Therapy Association, received the Advance Proficiency Award from the American Physical Therapy Association in 2015, and was awarded a McKnight's Women of Distinction Rising Star Award in 2019. Berenice currently functions as the Compliance Coordinator for the central and west divisions, including focus areas of medical record review and policy & procedure development, as well as strategies to foster ethical and compliance philosophy across the region.



REBECCA RAMBO, OTR/L has over eight years of experience in the post-acute health care settings of home health, skilled nursing, and CCRCs. She holds a Master of Arts Occupational Therapy from the University of Florida, and during that time was awarded the *Ann Sirmyer Ballard Award* for outstanding graduate with academic achievement, excellence in clinical performance, and outstanding leadership. She currently functions as the Compliance Coordinator supporting the south and central divisions in QAC initiatives within the senior living and skilled nursing settings, including greater expertise in the home health arena. Her specific home health experience includes regulatory compliance at the regional, state, and federal levels as well as OASIS coding accuracy and skilled home health documentation. Rebecca also possesses auditing experience including medical record and therapy billing reviews across the home health, skilled nursing, inpatient, and outpatient care settings.



VALERIE GRECO, BA, PTA, CHC, CDP, CMDCP has 25+ years of rehab and management experience in acute care, skilled nursing, outpatient therapy, and sport medicine. She holds a Post-Bachelor's Degree from UC Denver School of Nursing Informatics in Health Information Management & Exchange; a Bachelor's Degree in Business Management from Malone University; and an Associate's Degree in Physical Therapy. She is a licensed Physical Therapist Assistant and holds a certification in dementia care, as well as certification in Healthcare Compliance (CHC®) from the Compliance Certification Board (CCB)®. Valerie currently serves as VP of QAC and oversees the western division. Her experience includes expanding compliance and clinical programs; building auditing and monitoring tools; leading internal investigations; and teaching & training on topics such as ICD-10, PDPM, dementia care, and documentation. She has been a guest lecturer for Kent State University's COTA program for four years, teaching compliance, billing, and documentation strategies.



NICOLE CLARK, MSP, CCC-SLP, RAC-CT is a licensed Speech-Language Pathologist with 19 years of experience working with school age children and adults across a variety of settings including public schools, home health, private practice, outpatient clinics, and long-term care. She holds a Master of Speech Pathology from the University of South Carolina. She holds certifications in Vital Stim and in the American Association of Nurse Assessment Coordination's Resident Assessment Coordinator (RAC-CT) certification. Her clinical and regulatory experience includes specialties in documentation training, resource development, and multi-level appeals management experience. Nicole served as a clinical supervisor of speech-language pathologists during their Clinical Fellowship Year and has community-level and multi-site operational management experience with an emphasis across skilled nursing and assisted & independent living community care settings. She currently functions as the VP of Compliance Education, working closely with operational, clinical, compliance, and regulatory teams to identify, develop, and implement educational initiatives across the company, including the identification of potential risks in reimbursement and regulatory compliance at the regional, state, and federal levels. Nicole is passionate in the HealthPRO® Heritage social media outreach initiatives and targets field regulatory, billing, documentation, and compliance perspectives through the use of Facebook and YouTube.

Compliance Deliverables & Oversight

FIVE SUCCESS DRIVERS FOR 2020 & BEYOND

Enterprise-Wide Commitment to Compliance Excellence

HealthPRO® Heritage staff are responsible to proactively support & assist with our enterprise-wide mission:

- Reduce/prevent risk
- Facilitate best practices
- Troubleshoot challenges

- Ensure overall compliance with industry regulations
- Innovate to stay ahead of regulatory directives

Our robust QAC Division systematically carries out regulatory oversight function by:

- Proactively identifying at-risk trends through deep dive research designed to reduce claim denial or industry audit activity
- Monitoring communications from CMS (Centers for Medicare & Medicaid Services)
- Maintaining Regulatory Committee in collaboration with clinical, operational, billing & information technology (IT) leaders
- Responding and publishing a strategic approach to stay ahead of regulatory directives

2 Specific Data Analytics that Inform Compliance Programming

Skilled Nursing

- Data analytics related to Med A & Med B utilization/fluctuations in intensity, volume, length of stay, efficiency, CPT utilization/trends, pathway efficiencies, and group/concurrent utilization
- ICD-10 coding audits to identify at-risk practices/patterns & missed opportunity for reimbursement
- Scores related to therapy & nursing documentation patterns (e.g.: late treatment, overdue, incomplete documentation) & audits (for medical necessity, skill, clinical support for coding, IPA utilization)
- Metrics related to billing processes including: reviews/ audits/ errors/ credits/ adjustments as well as Triple Check process auditing

Senior Living

- Audits, trend reports, oversight reports and regulatory logs to identify potential issues with QA, documentation, outstanding physician signatures, end of month billing, and industry regulations
- Data analytics related to fluctuations in Medicare Part B billing intensity, volume, length of stay, and CPT coding trends
- ICD-10 diagnostic audits to identify at-risk trends, educational opportunities on coding specificity
- Clinical documentation review to monitor timely completion, technical compliance with physician signatures, and content audits for medical necessity
- Regulatory oversight audits with emphasis on quality assurance, documentation, end of month billing processes, and industry regulation

Home Health

• Trend reports (e.g.: documentation patterns, timely/missed visits); billing processes; ADR/denial events

Implementation of Performance Improvement Plans

as needed to ensure risks are mitigated

[continued]

3 QAPI Plan & Process

HealthPRO® Heritage staff will adhere to, and participate in the planning/implementation of, client QAPI Plans. Our monthly QAPI education webinars address relevant/timely topics (e.g.: best practices to partner with clients to collaboratively & compliantly support QAPI objectives; therapy-related Rules of Participation; etc.).

4 Tangible Solutions

Auditing Services							
PDPM Risk Review	Triple Check Review		Coding/Compliance		Opportunity Analysis		
Case Mix Index (Nursing & Therapy Levels)		10 Coding Home Healt		n: OASIS, Agency-Specific			
Therapist-Focused	Manual Med B Reviews		Billing Processes & Trends		Nursing Documentation		
Tangible Tools							
Tracking Sheets	Audit Forms			Education Strategy		Data Pull Guide	
Education for Regiona	als Education for		Clients	Skilled Nur	rsing Facility Billing Audit		
Customized (but turn-key) Group Training & 1:1 Mentoring Sessions							
Billing Training		Documentation Training					

5 Communication Strategy

Denial Prevention Strategies

Our communication strategy (internal & external) RE: best practices, alerts, regulatory changes, etc. includes:

- Monthly internal strategic compliance reviews and calls to direct action plans & highlight risk areas
- Quarterly client-facing *Strategic Partnership Reviews* and customized workplans (roll-up reporting is available for multi-site chains)
- Newsletters, alerts, blogs, white papers, recorded training resources, live training sessions, on-demand alerts (e.g.: CMS Proposed and Final Rule releases, Conditions of Participation/QAPI updates; revised PEPPER reporting; changes to Medicare Physician Fee Schedule)

Support for Partners' QAPI Planning

Quality Assurance (QA) + Performance Improvement (PI)

HealthPRO® Heritage is dedicated to assuring all necessary resources, education, and tools in full support of partners' execution on QAPI plans.

HealthPRO® Heritage Supports QAPI Planning Best Practices

QAPI Planning & Process

- Contributions (as needed) in support of partners' processes related to developing, implementing, and maintaining an effective QAPI program.
- Defining, validating, and regularly updating competencies for new, agency, and existing staff.
- Participation in Quality Assessment and Assurance (QAA) meetings (held at least quarterly) and with enough frequency to conduct required QAPI/QAA activities.
- Comply with education requirements for all facility staff, contracted staff, and volunteers related to QAPI plans and roles in the development and implementation of interventions.
- Make changes as needed as defined by QAPI plan revisions (as with annual reviews).
- Support QAPI plans related to assuring residents the opportunity to provide input and to prioritize areas to monitor and measure that reflect the resident's preferences, ethnic, cultural, and religious considerations.
- Maintain documentation, data, and outcomes to demonstrate how partners' QAPI programs meet CMS requirements.
- Proffer evidence in the form of literature to substantiate the ongoing implementation and QAPI program compliance with regulations to the State Survey Agency, Federal Surveyor, or CMS if requested.

HealthPRO® Heritage participates in the completion and implementation of **QAPI** plans in accordance with state & federal quidelines and adheres to partners' QAPI plans.

QAPI plans [1] serve as a guide to enhance quality of care (through identification of high risk and problem prone areas) and [2] assure opportunity for residents to provide input to prioritize areas to monitor and measure that reflect their preferences and ethnic/cultural/religious considerations. HealthPRO® Heritage to support these clearly defined QAPI plan objectives and to continue to evaluate, share and support opportunities for improvement, data collection, and promote quality of life for patients.

QAPI and Risk, Adverse Events, and Correction

QAPI planning and requirements dictate the following processes be followed. HealthPRO® Heritage will comply and participate as necessary in full support of partners' needs and resident safety and satisfaction.

- Comply and participate in requested QAPI plan initiatives to identify service areas associated with significant risk to the health or safety of residents (e.g.: pressure injury prevention, fall risk, patient satisfaction).
- Identify adverse, untoward or undesirable events as described by QAPI plan requirements, and will support, help develop and/or participate in action plans/present evidence (i.e.: documentation) to substantiate QAPI plan implementation in compliance with regulations to the State Survey Agency, Federal Surveyor, or CMS.
- Respond to an identified quality deficiency, full support for prescribed Plan of Action for correcting or improving performance (requiring full understanding to identify and correct quality deficiencies that contain necessary components such as performance tracking, goal measurements, identifying and prioritizing quality deficiencies, and monitoring or evaluating the effectiveness of corrective action/ performance improvement activities, and revising as needed).

The QAPI planning and implementation process is organically aligned with HealthPRO® Heritage's already well-established commitment to providing proactive, ongoing approach to improving patient care and satisfaction. HealthPRO® Heritage's mission supports initiatives linked to QAPI goals to increase awareness about risk management and QAPI functions and integrate learned tasks to improve the quality of care and safety.

Quality Assurance & Compliance for Senior Living

HealthPRO® Heritage's QAC Division is committed to ensuring successful execution and operations through our company's geographic footprint and various care settings, including our senior living partners. The QAC Division supports our senior living division through the following outlets:

Compliance Metrics Monitoring

Analyze trends, perform root cause analysis, and develop a workplan [with Operations] to mitigate at-risk areas (e.g., adherence to regulatory requirements; documentation completion; billing & diagnostic coding trends; timely clinical and billing data entry; technical compliance with physician signatures)

Clinical Documentation Review Audits

Chart audits [quarterly] for senior living communities collaboratively conducted with field program managers, regional operators, and QAC to ensure documentation excellence and prevent denials; Ongoing updates to audit tool used by QAC and Operations based on current regulatory guidelines

Policy & Procedure Development and Resource Refinement

Establish systematic means for tracking all regulatory research/guidelines and initiatives by topic/regulation type (e.g., direct bill site requirements, disaster requirements, documentation requirements, and condition-of-participation requirements); Assist in developing new & evaluating current compliance programs. Assist with effecting changes as necessary to improve programs & assure regulatory compliance

ADR and Denials Management

Monitor and process additional development requests or claim denials through strategic analysis; Represent the organization on Administrative Law Judge appeal hearings for assigned locations as designated

Outpatient Rehabilitation Program Regulatory Compliance

Collaborate with Operations for [quarterly] Oversight and Quality Assurance Inspection reporting for survey readiness and adherence to federal and state regulatory oversight

Associate On-Boarding & New Community Start-Up

Develop and participate in programs designed for in-service education, on-the-job training, and orientation classes for facility personnel

Webinars: Virtual Education, Training & Updates

Exclusive online training sessions that cover senior living topics based on company or industry trends and initiatives (e.g., clinical documentation of home health specific, regulatory compliance, denials prevention, best practices for billing in the senior living community markets)

Blog Posts: Updates on Senior Living

Collaborate with Operations and Clinical Strategies to publish clinical, operational, and strategic articles of educational content relevant to the senior living industry

Investigations

Investigate all violations of company policy with consistent and effective methodology

EMR (Electronic Medical Record) Parameters

Partner with IT to ensure all EMR parameters meet CMS' & other payer guidelines for regulatory compliance

Additional Services

New projects are always in progress and additional projects may be developed when needed

Quality Assurance & Compliance for Home Health

HealthPRO® Heritage's QAC Division is committed to ensuring successful execution and operation of our home health services both throughout our markets and for our home health agency partners. The QAC Division supports our home health division through the following outlets:

Compliance Metrics Monitoring

Analyze trends, perform root cause analysis, and develop a workplan [with Operations] to address trends identified (e.g., late documentation; timely evaluations; timely assessments; missed visits)

Therapist-Focused Audits

Chart audits [quarterly] for home health markets to identify to ensure documentation excellence and prevent denials; Ongoing updates to audit tool used by QAC and Operations based on current regulatory guidelines

Denials & ADR Assistance

Strategic approach to monitor and address any therapy related ADR or denials

Blog Posts: Updates on Home Health + Patient-Driven Groupings Model (PDGM)

Collaborate with Operations and Clinical Strategies to publish clinical, operational, and strategic articles of educational content relevant to the home health industry

PDGM Work Group + Core Group Calls

Discussions with employees across varying departments and focused expertise with the intention to develop strategies and initiatives for successful PDGM implementation

Podcasts: On-the-Go Education

Episodic, digital education on topics that range from company and industry trends to initiatives specific to the home health setting (e.g., documentation; PDGM; OASIS; home health clinical pathways; best practices for billing, documentation, and practice)

Webinars: Virtual Training & Updates

Exclusive online training sessions that cover home health topics based on company and industry trends and initiatives (e.g., documentation; home health clinical pathways; best practices for billing, OASIS, documentation, and practice in the home health setting)

Billing Audits

Ensure accuracy of end of month visit reconciliation between agency electronic medical record and company electronic medical record

Investigations

Investigate all violations of company policy with consistent and effective methodology

EMR (Electronic Medical Record) Parameters

Partner with IT to ensure all EMR parameters meet CMS' & other payers' guidelines for regulatory compliance

Additional Services

New projects are always in progress and additional projects may be developed when needed

Quality Assurance & Compliance for Skilled Nursing

HealthPRO® Heritage's QAC Division is committed to ensuring successful execution and operation of our skilled nursing services both throughout our markets and for our skilled nursing facility (SNF) partners. The QAC Division supports our skilled nursing division through the following outlets:

Compliance Metrics Monitoring

Analyze trends, perform root cause analysis, and develop a workplan [with Operations] to address trends identified (e.g., late documentation; timely evaluations; coding usage; denial trends)

Focused Audits

Chart audits in identified SNF markets to ensure documentation excellence and prevent denials; Ongoing updates by QAC and Operations based on current regional trends

Denials & ADR Assistance

Strategic approach/partnership to monitor and address any therapy related ADR or denials

Blog Posts: Updates on SNF + Patient-Driven Payment Model (PDPM)

Collaborate with Operations and Clinical Strategies to publish clinical, operational, and strategic articles of educational content relevant to the skilled nursing industry

PDPM Work Group + Core Group Calls

Discussions with employees across varying departments and focused expertise with the intention to develop strategies and initiatives for successful PDPM implementation

Podcasts: On-the-Go Education

Episodic, digital education on topics that range from company and industry trends to initiatives specific to the SNF setting (e.g., documentation; PDPM; clinical pathways; best practices for billing, documentation, and practice)

Webinars: Virtual Training & Updates

Exclusive online training sessions that cover skilled nursing topics based on company and industry trends and initiatives (e.g., documentation; clinical pathways; best practices for billing, documentation, and practice in the skilled nursing setting)

Billing Audits

Ensure accuracy of end of month visit reconciliation between agency electronic medical record and company electronic medical record

Investigations

Investigate all violations of company policy with consistent and effective methodology

EMR (Electronic Medical Record) Parameters

Partner with IT to ensure all EMR parameters meet CMS' & other payers' guidelines for regulatory compliance

Additional Services

New projects are always in progress and additional projects may be developed when needed

Is Your Current Therapy Provider Involved in a CIA?

If your current therapy provider is under a CIA (Corporate Integrity Agreement), it is likely that your facility will be subjected to 3-5 years of claims review and that these claims be conducted by an Independent Review Organization (IRO). An IRO is required to review claims associated with facilities under a CIA to assure multiple quality and compliance elements are adhered to, including:

- Eligibility for therapy services
- Physician orders
- Comprehensive assessments
- Comprehensive care planning
- Provision of nursing, therapy, and NTA services outlined in the care plans
- Medically necessary therapy services
- Comprehensive discharge planning
- MDS (Minimum Data Set) information is supported by the medical record
- As of June 2020, HealthPRO® Heritage is now partnered with five organizations that are currently involved in a CIA due to actions taken by their prior therapy provider.
- Skilled rehab facilities under the pressure associated with CIA/IRO processes seek out HealthPRO® Heritage's compliance expertise to leverage the security and peace of mind associated with our widely recognized commitment to above board compliance practices.
- Our QAC Division works closely with the assigned IROs and these organizations to help fulfill the IROdefined requirements.
- The IRO is required to review the facility's and HealthPRO® Heritage's policies and procedures, interview key staff members, attend care planning meetings, review documentation, and even observe the provision of therapy services at multiple locations to ensure services provided are medically necessary and reasonable; appropriate and sufficient to meet patient needs; appropriately documented; and whether the paid claims were correctly coded, submitted, and reimbursed.
- HealthPRO® Heritage is responsible for gathering data. We meet quarterly when the IRO agency completes
 audits and furnishes a "Review of Annual Audit Report" which is mandatory and pursuant to the CIA. We
 help formulate an official response to the report's queries and comments, and our compliance experts
 customize follow-up trainings and audit processes to proactively assure necessary changes are in place.

Case Study

Client Profile

A large national multi-site senior living chain sought supercharged QAC support to supplement from HealthPRO® Heritage.

Identified Need

Improved documentation across the organization's portfolio of CCRCs was identified as a priority.

Approach

HealthPRO® Heritage's QAC Division launched a successful **company-wide initiative leveraging the following tangible, results-oriented actionable steps**:

- Established a standardized audit template, incorporating PDPM and medical necessity components, to be used enterprise-wide.
- Enlisted cross-functional HealthPRO® Heritage team members to utilize the template to complete the following:
 - o Rehab Directors completed chart audits;
 - o Regional Vice President of Operations completed chart audits for inter-reliability; and
 - o QAC Division experts completed audits and established small group, targeted education initiatives.
- In collaboration with community leadership, customized workplans based on audit findings were established and updated quarterly RE: Documentation Improvement. For example, targeted Q1 2020 Documentation Improvement Areas included:
 - o Evaluations: Therapy Necessity & Spontaneous Recovery Statements;
 - o Progress Reporting: Justification for Continued Skilled Services; and
 - o Use of Standardized Testing.
- Rehab Directors participate in monthly webinar trainings to reinforce consistent execution on compliance, clinical, and operational initiatives in support of appropriate, defensible documentation inclusive of medical necessity.