



U.S. Department
of Veterans Affairs

In Reply Refer To: **FOIA Request 21-06268-F**

August 10, 2023

Ryan Mulvey
Americans For Prosperity Foundation
1310 N. Courthouse Rd
Arlington, VA, 22201

Dear Mr. Mulvey:

This letter is the thirteenth email production in response to your May 27, 2021, request under the Freedom of Information Act (FOIA), 5 U.S.C. § 552, submitted to the Department of Veterans Affairs (VA) Veterans Health Administration (VHA) Central Office FOIA Office, requesting the following records:

1. "Records reflecting aggregate totals and percentages for pending and completed appointment wait times and related data, as previously disclosed in summary form at the Veterans Health Administration ("VHA") "Patient Access Data" portal, <https://www.va.gov/health/accessaudit.asp>. The time period for this item is March 1, 2021 to the present records that reflect the requested data on a monthly basis (e.g., total number of scheduled appointments for each month of the requested time period) or per reporting period. If month-by-month or period-by-period data is unavailable, please provide the requested data in the form otherwise maintained by the agency. If responsive records are kept in a CSV or Excel format, please produce the records in their native format.
2. All records concerning the VHA's decision to eliminate proactive disclosure of patient access in nation-wide summary form, as previously available at the "Patient Access Data" portal, <https://www.va.gov/health/access-audit.asp>. The time period for this item of the request is January 1, 2021 to the present.
3. All guidance documents, legal opinions, administrative orders, directives, or policy statements issued by the VA concerning any of the following topics:
 - a. Interpretation of the VCCP regulations and designated access standards, including the agency's method for calculating wait times (e.g., discussion of the difference between "date of request," "patient preferred date," and "clinically indicated date");
 - b. The process by which the VA obtains patient consent to schedule an appointment outside the 20-/28-period established by the VCCP designated access standards;
 - c. Limiting or dissuading veterans from using community care; and
 - d. The impact of the COVID-19 pandemic on administration of the VCCP.

4. All records reflecting communications between or amongst any of the following entities, offices, or components concerning any of the topics listed in Item Three: (a) VHA, (b) VA Office of the Secretary, (c) VA Office of General Counsel, (d) White House Office of Management and Budget, (e) White House Domestic Policy Council, or (f) Office of the White House Counsel.
5. All records concerning congressional requests or inquiries pertaining to any of the topics listed in Item Three. This item includes, but is not limited to, records originating with any Member or entity of Congress, formal agency responses thereto, and internal VA communications regarding the congressional request or inquiry. Searches should be conducted, at a minimum, within the VHA, VA Office of the Secretary, VA Office of General Counsel, and VA Office of Public and Intergovernmental Affairs.”

As noted in our November 19, 2021 letter, also on or around May 28, 2021; fourteen (14) VA Medical Center FOIA Offices received the following requests:

“Pursuant to the Freedom of Information Act, 5 U.S.C. § 552 (“FOIA”), AFPP hereby requests access to the following categories of records concerning operation of the (previously indicated) VA Medical Center hospital. The time period for all items of this request is January 1, 2020 to the present. Please note: to the extent an item of this request seeks data (i.e., Items 1–7 and 9), please provide records reflecting that data on a monthly basis (e.g., total number of scheduled appointments for each month of the requested time period). If month-by-month data is unavailable, please provide the requested data in the aggregate or in the form otherwise maintained by the agency. If responsive records are kept in a CSV or Excel format, please produce the records in their native format.

1. Records reflecting the total number of appointments scheduled.
2. Records reflecting the total number of appointments completed.
3. Records reflecting the total number of appointments cancelled:
 - a. By a VA health care provider; and
 - b. By a patient.
4. Records reflecting the total number and percentage of appointments for primary care, mental health care, or non-institutional extended care services scheduled:
 - a. Within 20 days of a patient’s date of request; and
 - b. Over 20 days of a patient’s date of request.
5. Records reflecting the total number and percentage of appointments for specialty care scheduled:
 - a. Within 28 days of a patient’s date of request; and
 - b. Over 28 days of a patient’s date of request.
6. Records reflecting the total number of patients who, in consultation with a VA health care provider, agreed to schedule an appointment outside the 20-/28-day period established by the VCCP designated access standards.
7. Records reflecting the total number of patients who refused to schedule an appointment outside the 20-/28-day period established by the VCCP designated access standards.

8. All records reflecting the policies and practices for documenting whether a patient agrees or refuses to schedule an appointment outside the 20-/28-day period established by the VCCP designated access standards. This item would include, for example, any blank, standardized form(s) for memorializing such patient consent.
9. Records reflecting the total number and percentage of patients:
 - a. Eligible for community care under the VCCP;
 - b. Who have elected to receive community care under the VCCP; and
 - c. Who have declined to receive community care under the VCCP.
10. All guidance documents, legal opinions, administrative orders, directives, policy statements, or communications exchanged between the (previously indicated) VA Medical Center hospital and the Veterans Health Administration, VA Office of General Counsel, VA Office of the Secretary, White House Office of Management and Budget, or White House Domestic Policy Council concerning:
 - a. Interpretation of the VCCP regulations and designated access standards, including the agency's method for calculating wait times (e.g., discussion of the difference between "date of request," "patient preferred date," and "clinically indicated date");
 - b. The process by which the VA obtains patient consent to schedule an appointment outside the 20-/28-period established by the VCCP designated access standards;
 - c. Limiting or dissuading veterans from using community care; and
 - d. The impact of the COVID-19 pandemic on administration of the VCCP."

Consolidation:

Per communication in or about September 2021, we notified you through counsel that we consolidated all of the above-mentioned FOIA requests into one tracking number, 21-06268-F (appearing at the top of this letter), for ease of use and tracking post litigation filing. Any further communication will be under FOIA tracking number 21-06268-F.

Search Terms:

As agreed upon on in discussions and memorialized in writing (via email) around May 16, 2022, the parties agreed on the following search terms and custodians:

Search Item	Search Terms	Custodians
<p>Search #1, <u>HQ</u> <u>FOIA ITEM 2</u></p>	<p>[(“access to care” OR “patient access”) AND (“data” OR “numbers”)]</p> <p>AND (“website” OR “site” OR “portal”)</p> <p>AND (“transfer” OR “move” OR “shift” OR “relocate” OR “create date” OR “inspector general”)</p>	<ul style="list-style-type: none"> • Kirsh • Lieberman • Hudson • Oshinski • Stone

<p>Search #2, <u>HQ</u> <u>FOIA ITEM 3a & 4-5 and VAMCs</u> <u>FOIA Item 10a</u></p> <p><u>(W/O CACMI)</u></p>	<p>(“MISSION Act” OR “VCCP” OR “Veterans Community Care”)</p> <p>AND (“date of request” OR “request date” OR “patient preferred date” OR “create date” OR “clinically indicated date” OR “patient indicated date” OR “wait time standard” OR “access standard” OR “file entry date” OR “community care eligibility”)</p> <p>AND [(“guidance” OR “direct*” OR “policy” OR “memo*”) OR (“inquiry” OR “request” OR “question” OR “inspector general”)]</p>	<ul style="list-style-type: none"> • Kirsh • Upton • Matthews • Boyd • Cunningham • Lieberman • Greenstone • MacDonald • Tucker • Bradsher • Sauber • Hudson • Blauert • Henson • Powers • Raftery • Stone • Clancy • Oshinski • Wilkie (x2) • McDonough (x2)
<p>Search #3, <u>HQ</u> <u>FOIA ITEM 3a & 4-5 and VAMCs</u> <u>FOIA Item 10a</u></p> <p>(w/VHACACMI)</p>	<p>(“MISSION Act” OR “VCCP” OR “Veterans Community Care”)</p> <p>AND (“date of request” OR “request date” OR “patient preferred date” OR “create date” OR “clinically indicated date” OR “patient indicated date” OR “wait time standard” OR “access standard” OR “file entry date” OR “community care eligibility”)</p> <p>AND [(“guidance” OR “direct*” OR “policy” OR “memo*”) OR (“inquiry” OR “request” OR “question” OR “inspector general”)] AND “VHACACMI@va.gov”</p>	<ul style="list-style-type: none"> • Mary Fields
<p>Search #4, <u>HQ</u> <u>FOIA ITEM 3b & 4-5 and VAMCs</u> <u>FOIA ITEM 10b</u></p>	<p>(“VCCP” OR “Community Care” OR “MISSION Act”)</p> <p>AND (“access standards” OR “wait times”)</p> <p>AND [(“method*” OR “calculat*”) AND (“process” OR “procedure” OR “direct*” OR “policy” OR “memo*”)]</p>	<ul style="list-style-type: none"> • Upton • Matthews • Boyd • Cunningham • Lieberman • Greenstone • MacDonald • Tucker • Bradsher

		<ul style="list-style-type: none"> • Sauber • Hudson • Blauert • Powers • Henson • Raftery • Stone • Clancy • Oshinski • Wilkie (x2) • McDonough (x2)
<p>Search #5, <u>HQ</u> <u>FOIA ITEM 3c &</u> <u>4-5 and VAMCs</u> <u>FOIA ITEM 10c</u></p>	<p>[(“community care wait time”) AND (“eligible” OR “eligibility”)] AND (“script” OR “referral coordination initiative”)</p>	<ul style="list-style-type: none"> • Kirsh • Upton • Matthews • Boyd • Cunningham • Lieberman • Greenstone • MacDonald • Tucker • Bradsher • Sauber • Hudson • Blauert • Henson • Powers • Raftery • Stone • Clancy • Oshinski • Wilkie (x2) • McDonough (x2) •
<p>Search #6, <u>HQ</u> <u>FOIA ITEM 3c &</u> <u>4-5 and VAMCs</u> <u>FOIA ITEM 10c</u></p> <p><u>(w/VHACACMI)</u></p>	<p>((“community care wait time”) AND (“eligible” OR “eligibility”))AND (“eligible” OR “eligibility”)) AND (“script” OR “referral coordination initiative”) AND “vhacacmi@va.gov”</p>	<ul style="list-style-type: none"> • Mary Fields

<p>Search #7, <u>HQ</u> <u>FOIA ITEM 3d &</u> <u>4-5 and VAMCs</u> <u>FOIA ITEM 10d</u></p>	<p>[(“COVID*” OR “pandemic”) AND (“VCCP” OR “community care” OR “MISSION Act”)]</p> <p>AND (“referral management” OR “consult management” OR “eligibility” OR “wait time standard” OR “access standard” OR “pause”)</p>	<ul style="list-style-type: none"> • Kirsh • Matthews • Boyd • Sauber • Hudson • Hipolit • Blauert • Upton • Tucker • Bradsher • Powers • Henson • Raftery • Stone • Wilkie (x2) • McDonough (x2)
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Email Production:

This production is in response to Search #5 of your request.

Search #5-

3. All guidance documents, legal opinions, administrative orders, directives, or policy statements issued by the VA concerning any of the following topics:
 - c. Limiting or dissuading veteran from using community care;

4. “All records reflecting communications between or amongst any of the following entities, offices, or components concerning any of the topics listed in Item Three: (a) VHA, (b) VA Office of the Secretary, (c) VA Office of General Counsel, (d) White House Office of Management and Budget, (e) White House Domestic Policy Council, or (f) Office of the White House Counsel.”

5. “All records concerning congressional requests or inquiries pertaining to any of the topics listed in item three. This item includes, but is not limited to, records originating with any Member or entity of Congress, formal agency responses thereto, and internal VA communications regarding the congressional request or inquiry. Searches should be conducted, at a minimum, within the VHA, VA Office of the Secretary, VA Office of General Counsel, and VA Office of Public and Intergovernmental Affairs.”

10. All guidance documents, legal opinions, administrative orders, directives, policy statements, or communications exchanged between the (previously indicated) VA Medical Center hospital and the Veterans Health Administration, VA Office of General Counsel, VA Office of the Secretary, White House Office of Management and Budget, or White House Domestic Policy Council concerning:

c. Limiting or dissuading veteran from using community care;

The time period for this item of the request is January 1, 2020 to the present.

As noted above, the search terms include:

("VCCP" OR "Community Care" OR "MISSION Act") AND ("access standards" OR "wait times") AND [("method*" OR "calculat*") AND ("process" OR "procedure" OR "direct*" OR "policy" OR "memo*")]

These search terms were applied to the following custodian mailboxes:

- Mark Upton
- Kameron Matthews
- Teresa Boyd
- Kristen Cunningham
- Steven Lieberman
- Clinton Greenstone
- Jennifer MacDonald
- Brooks Tucker
- Tanya Bradsher
- Richard Sauber
- William Hudson, Jr.
- Susan Blauert
- Pamela Powers
- Christopher Henson
- Meghan Raftery
- Richard Stone
- Carolyn Clancy
- Renee Oshinski
- Robert Wilkie (x2)
- Denis McDonough (x2)

We processed twenty (20) pages as non-responsive. Additionally, we processed four hundred and ninety-five (495) responsive pages for this search.

The Bates numbers for this dataset start at number 5241 and are located at the top center of the pages. The Bates numbering appears on the top center of the documents, any additional numbering that appear are original to the documents.

Determination:

My review of the documents revealed that they contained information that falls within the disclosure protections of FOIA Exemption 6, 5 U.S.C. § 552(b)(6).

FOIA Exemption 6 permits VA to withhold a document or information contained within a document if disclosure of the information would constitute a clearly unwarranted invasion of a living individual's personal privacy. Stated another way, VA may withhold information under FOIA Exemption 6 where disclosure of the information, either by itself or in conjunction with other information available to either the public or the FOIA requester, would result in an unwarranted invasion of an individual's personal privacy without contributing significantly to the public's understanding of the activities of the federal government.

More specifically, the information I am withholding, as indicated on the enclosed documents, under FOIA Exemption 6 consists of: employee names as the individuals associated with this information have a personal privacy interest in it.

The coverage of FOIA Exemption 6 is absolute unless the FOIA requester can demonstrate a countervailing public interest in the requested information by demonstrating that the individual is in a position to provide the requested information to members of the general public and that the information requested contributes significantly to the public's understanding of the activities of the Federal government. Additionally, the requester must demonstrate how the public's need to understand the information significantly outweighs the privacy interest of the person to whom the information pertains. Upon consideration of the materials provided, I have not been able to identify a countervailing public interest of sufficient magnitude to outweigh the privacy interest in this case. The individuals associated with this information have a personal privacy interest in information that outweighs any public interest served by disclosure of their identities under FOIA. Consequently, I am denying your request for this information under FOIA Exemption 6, 5 U.S.C. § 552 (b)(6).

Thank you for your interest in VA. If you have any further questions, please feel free to contact me at (202) 738-2974 or via email at darryl.webb@va.gov.

Sincerely,

Darryl Webb

Darryl Webb
VA FOIA Officer

Enclosures:

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>



Choose VA

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>



Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs

SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>Claims payment data is complete, accurate, and timely</p>	<p>POM</p>	<ul style="list-style-type: none"> • Process and control documentation complete. Ready for testing. • File transfer controls to be documented. • Compensating control to be identified if file wasn't received. • Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Internal Controls Audit Completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  </div> <p style="text-align: center;"> Completed Pending Review </p>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1064 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1064 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
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QCAP Update

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OCC CAP Overview – OIG Reports

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OCC CAP Overview-OIG Reports

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June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>



OCC CAP Overview-GAO Reports

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September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. CI- TCD April 2021 Rec 2 Requested Closure
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>

Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  </div> <p style="text-align: center;"> Completed Pending Review </p>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
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FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
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2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
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QCAP Update

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OCC CAP Overview-GAO Reports

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June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>



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March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
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Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>



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Overview of Front-End Corrective Actions

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Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>



Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs



SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 475 1321 589"> <tr> <td data-bbox="788 475 962 525">Planning</td> <td data-bbox="962 475 1145 525">Fieldwork</td> <td data-bbox="1145 475 1321 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1321 589">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 848 1321 962"> <tr> <td data-bbox="788 848 962 898">Planning</td> <td data-bbox="962 848 1145 898">Fieldwork</td> <td data-bbox="1145 848 1321 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1321 962">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 12%							

QCAP Update

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OCC CAP Overview – OIG Reports

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<p>June 2017 January 2021</p>	<p>OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080</p>	<p>1 of 3 Rec 3</p>	<p>Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021</p>
<p>December 2017 October 2020</p>	<p>OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036</p>	<p>5 of 7 Rec 1-5</p>	<p>Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure</p>
<p>August 2019 January 2021</p>	<p>OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150</p>	<p>1 of 11 ,</p>	<p>Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed</p>

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U.S. Department of Veterans Affairs
Veterans Health Administration
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Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

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<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>



Choose VA

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

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Ongoing External Audits

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SSAE 18 Subcommittee Report

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(b)(6) Co-Chairs

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- SOC Evaluation SOP is being finalized
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- Training slides being routed for final concurrence
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- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 475 1323 589"> <tr> <td data-bbox="788 475 962 525">Planning</td> <td data-bbox="962 475 1145 525">Fieldwork</td> <td data-bbox="1145 475 1323 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1323 589">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 848 1323 962"> <tr> <td data-bbox="788 848 962 898">Planning</td> <td data-bbox="962 848 1145 898">Fieldwork</td> <td data-bbox="1145 848 1323 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1323 962">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
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QCAP Update

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OCC CAP Overview – OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
<p>June 2017 January 2021</p>	<p>OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080</p>	<p>1 of 3 Rec 3</p>	<p>Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021</p>
<p>December 2017 October 2020</p>	<p>OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036</p>	<p>5 of 7 Rec 1-5</p>	<p>Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure</p>
<p>August 2019 January 2021</p>	<p>OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150</p>	<p>1 of 11 ,</p>	<p>Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed</p>

OCC CAP Overview-OIG Reports

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June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

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December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

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September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

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March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

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SSAE 18 Subcommittee Report

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Co-Chairs

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CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  </div> <p style="text-align: center;"> Completed Pending Review </p>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
 Amber=In Progress
 Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 474 1323 588"> <tr> <td data-bbox="788 474 962 525">Planning</td> <td data-bbox="962 474 1143 525">Fieldwork</td> <td data-bbox="1143 474 1323 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1323 588">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 846 1323 961"> <tr> <td data-bbox="788 846 962 898">Planning</td> <td data-bbox="962 846 1143 898">Fieldwork</td> <td data-bbox="1143 846 1323 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1323 961">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 12%							

QCAP Update

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OCC CAP Overview – OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2017 January 2021	OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080	1 of 3 Rec 3	Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021
December 2017 October 2020	OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036	5 of 7 Rec 1-5	Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure
August 2019 January 2021	OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150	1 of 11 ,	Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed

OCC CAP Overview-OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill

Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>



Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs

SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> In Progress - Referral process documentation and risk assessment. File transfer controls to be identified. Compensating control identified whereby TPA informs OCC if file wasn't received. Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	OIT	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

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Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits


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Department of Internal Audits (DIA) Update

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Planning	Fieldwork	Reporting												
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VACC PIIA Team Audits

Green=Complete
 Amber=In Progress
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Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 475 1321 589"> <tr> <td data-bbox="788 475 966 525">Planning</td> <td data-bbox="966 475 1143 525">Fieldwork</td> <td data-bbox="1143 475 1321 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1321 589">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
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CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 848 1321 962"> <tr> <td data-bbox="788 848 966 898">Planning</td> <td data-bbox="966 848 1143 898">Fieldwork</td> <td data-bbox="1143 848 1321 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1321 962">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
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QCAP Update

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OCC CAP Overview – OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
<p>June 2017 January 2021</p>	<p>OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080</p>	<p>1 of 3 Rec 3</p>	<p>Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021</p>
<p>December 2017 October 2020</p>	<p>OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036</p>	<p>5 of 7 Rec 1-5</p>	<p>Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure</p>
<p>August 2019 January 2021</p>	<p>OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150</p>	<p>1 of 11 ,</p>	<p>Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed</p>

OCC CAP Overview-OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
<p>December 2016 January 2021</p>	<p>GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52</p>	<p>1 of 2 Rec 2</p>	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p>	<p>9 of 10</p>	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021 Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>



Choose VA

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>



Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none">In Progress - Process and control documentation complete.File transfer controls to be documented.PIIA audit test plans to be developed and transactions to be audited quarterly (TBD).	<ul style="list-style-type: none">Process Documentation and Risk Assessment CompletedAUP Review Phase II CompletedRecurring PIIA testing initiated	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
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VACC PIIA Team Audits

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QCAP Update

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OCC CAP Overview – OIG Reports

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September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>

Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM



SSAE 18 Subcommittee Report

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SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  </div> <p style="text-align: center;"> Completed Pending Review </p>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
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2021 CHAMPVA PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
 Amber=In Progress
 Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
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2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
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OCC CAP Overview-GAO Reports

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September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
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OCC CAP Overview- DIA Internal Audit Reports

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Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill

Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

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Choose VA

VA



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Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs

SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	OIT	<ul style="list-style-type: none"> Meeting with OIT completed 12/2/2020. DAS file transfer documentation and testing documentation is forthcoming. User logical access documentation and testing to be received from impacted system owners. End-to-end system controls to be discussed. Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> User authorization controls Documented and Tested. Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input checked="" type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 475 1323 589"> <tr> <td data-bbox="788 475 966 529">Planning</td> <td data-bbox="966 475 1143 529">Fieldwork</td> <td data-bbox="1143 475 1323 529">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 529 1323 589">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 848 1323 962"> <tr> <td data-bbox="788 848 966 902">Planning</td> <td data-bbox="966 848 1143 902">Fieldwork</td> <td data-bbox="1143 848 1323 902">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 902 1323 962">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
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QCAP Update

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OCC CAP Overview – OIG Reports

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June 2017 January 2021	OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080	1 of 3 Rec 3	Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021
December 2017 October 2020	OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036	5 of 7 Rec 1-5	Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure
August 2019 January 2021	OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150	1 of 11 ,	Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed

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June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

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December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

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Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



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Welcome and Opening Remarks

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Open recommendations on front-end processes

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Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
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Ongoing OIG Engagements

Audit Topic	OCC Program
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Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
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Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs



SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
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- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

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CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  </div> <p style="text-align: center;"> Completed Pending Review </p>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 475 1323 589"> <tr> <td data-bbox="788 475 966 525">Planning</td> <td data-bbox="966 475 1143 525">Fieldwork</td> <td data-bbox="1143 475 1323 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1323 589">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 848 1323 962"> <tr> <td data-bbox="788 848 966 898">Planning</td> <td data-bbox="966 848 1143 898">Fieldwork</td> <td data-bbox="1143 848 1323 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1323 962">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 12%							

QCAP Update

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OCC CAP Overview – OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2017 January 2021	OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080	1 of 3 Rec 3	Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021
December 2017 October 2020	OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036	5 of 7 Rec 1-5	Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure
August 2019 January 2021	OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150	1 of 11 ,	Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed

OCC CAP Overview-OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

OCC CAP Overview-GAO Reports

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September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill

Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

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Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
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Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
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SSAE 18 Subcommittee Report

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(b)(6) Co-Chairs

SSAE18 Subcommittee Update

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Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
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2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
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Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
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2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1064 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1064 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1456 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1456 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 475 1323 589"> <tr> <td data-bbox="788 475 966 529">Planning</td> <td data-bbox="966 475 1143 529">Fieldwork</td> <td data-bbox="1143 475 1323 529">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 529 1323 589">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 848 1323 962"> <tr> <td data-bbox="788 848 966 902">Planning</td> <td data-bbox="966 848 1143 902">Fieldwork</td> <td data-bbox="1143 848 1323 902">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 902 1323 962">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 12%							

QCAP Update

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OCC CAP Overview – OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2017 January 2021	OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080	1 of 3 Rec 3	Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021
December 2017 October 2020	OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036	5 of 7 Rec 1-5	Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure
August 2019 January 2021	OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150	1 of 11 ,	Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed

OCC CAP Overview-OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.



Choose VA

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Community Care

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>Sept. 2018 January 2021</p>	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA’s new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
<p>Sept. 2020</p>	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>

Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs

SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> • Process and control documentation complete. Ready for testing. • File transfer controls to be documented. • Compensating control to be identified if file wasn't received. • Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Internal Controls Audit Completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
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Appendix

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Internal Controls Testing Status/DICA

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Department of Internal Audits (DIA) Update

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VACC PIIA Team Audits

Green=Complete
 Amber=In Progress
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QCAP Update

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OCC CAP Overview-OIG Reports

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June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

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December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

OCC CAP Overview-GAO Reports

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September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.

Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>

Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs

SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	OIT	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
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2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
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Planning	Fieldwork	Reporting												
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FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
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QCAP Update

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OCC CAP Overview-GAO Reports

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Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

Agenda

- Welcome and Introduction – Dr. Elizabeth Brill
- Open Recommendations on Front-End Processes –
- Ongoing External Audits –
- SSAE 18 Committee –
- Closing and Wrap Up –

Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

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<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

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<p>Sept. 2018 January 2021</p>	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA’s new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
<p>Sept. 2020</p>	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>

Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> In Progress - Referral process documentation and risk assessment. File transfer controls to be identified. Compensating control identified whereby TPA informs OCC if file wasn't received. Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1060 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1060 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1454 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1454 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 474 1323 588"> <tr> <td data-bbox="788 474 966 525">Planning</td> <td data-bbox="966 474 1143 525">Fieldwork</td> <td data-bbox="1143 474 1323 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1323 588">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 846 1323 961"> <tr> <td data-bbox="788 846 966 898">Planning</td> <td data-bbox="966 846 1143 898">Fieldwork</td> <td data-bbox="1143 846 1323 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1323 961">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
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QCAP Update

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OCC CAP Overview – OIG Reports

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December 2017 October 2020	OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036	5 of 7 Rec 1-5	Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure
August 2019 January 2021	OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150	1 of 11 ,	Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed

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Risk Oversight Committee (ROC) Monthly Meeting

2/5/2021



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

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Welcome and Opening Remarks

Dr. Elizabeth Brill



Open recommendations on front-end processes

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Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
<p>June 2018 January 2021</p>	<p>GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 2,3,4,6,8, and 9</p>	<p><u>Recommendation 1.</u> The Under Secretary for Health should establish an achievable wait-time goal for the consolidated community care program that VA plans to implement that will permit VHA to monitor whether Veterans are receiving VA community care within time frames that are comparable to the amount of time they would otherwise wait to receive care at VHA medical facilities.</p>	<p>Use of the Decision Support Tool, at the time of reviewing and scheduling consults</p> <p>Use of the HSRM Cycle Time report, which also reflects the community care wait time by Standardized Episode of Care (SEOC)</p> <p>Average wait times are being monitored and discussed in multiple forums to include Referral Coordination Initiative VISN calls</p> <p>The OCC Directive (VHA Directive 1670) was submitted to the VA Office of General Counsel (OGC) for legal review and concurrence in November 2020.</p> <p>The OVAC consult and scheduling directive was expected to publish by March 2021, due to delays resulting from additional policy changes, it is currently being finalized</p> <p>TCD August 2021</p>

Overview of Front-End Corrective Actions

Published/ Last Update	Report Name	Recommendation	Corrective Action Status as of 01/30/2021
Sept. 2018 January 2021	<p>GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671</p> <p>Owner-CIFO</p>	<p><u>Recommendation 1.</u> Once VA's new software for managing authorizations has been fully implemented, the Undersecretary for Health should monitor data on SAR approval decision timeframes to ensure VA medical facilities are in adherence with VA policy, assess the reasons for nonadherence with the policy, and take corrective actions as necessary.</p>	<p>SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3. The HSRM project team continues to coordinate with the AET team to determine when the interface can be put into scope.</p> <p>TCD April 2021</p>
Sept. 2020	<p>GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643</p> <p>Owner-CIFO</p> <p>Requested Closure on Recommendations 1 and 2</p>	<p><u>Recommendation 3:</u> Direct VAMC leadership to assess their community care staffing and resource needs and develop a plan to address any identified risks to their ability to schedule appointments in a timely manner, including strategies to adjust staff levels and address recruitment and retention challenges as needed.</p>	<p>The recommended resource assessment is underway through the Referral Coordination Initiative (RCI) which is a joint effort between OCC and the Office of Veterans Access to Care (OVAC).</p> <p>TCD December 2020</p>

Ongoing External Audits

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Ongoing External Audits

- OCC is currently tracking 4 ongoing OIG audits and 3 ongoing GAO audits
- These audits have had an entrance conference but have not been completed yet
- Completed audits (where reports and recommendations have been issued), as well as audits with draft reports pending publication are listed in the QCAP slides in the appendix

Ongoing OIG Engagements

Audit Topic	OCC Program
Audit of Billing of Veteran's Other Health Insurance for Non-Service Connected Medical Care Provided Through a Community Provider (Project Number: 2021-00846-AE-0029)	RO, CIFO
Audit of Acupuncture and Chiropractic Purchased Care (2020-01099-R5-0001)	DO, CIFO
OIG Audit of Community Care Consults during COVID-19 (Project No. 2021-00497-AE-0013)	CIFO
Review of Alleged Address Mismanagement at the Central Plains Consolidated Patient Account Center (CPAC) and the Minneapolis VA Health Care System (VACHS) (Project No. 2020-03086-AE-0054)	RO

Ongoing GAO Engagements

Audit Title/Topic	OCC Program
VA Access to Community Care (104473)	CIFO
VA Community Provider Denials and Revocations (103695)	NM
VA Community Care Provider Oversight: Follow Up Questions on Medicare Sanction Data (103850)	NM

SSAE 18 Subcommittee Report

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Co-Chairs

SSAE18 Subcommittee Update

- Current Actions

- SOC Evaluation SOP is being finalized
- CONOPs being routed for final concurrence
- Training slides being routed for final concurrence
- CUEC plan and tracker being updated for progress/discussion
 - plan is on track and no major issues at this time

- Upcoming Actions/Activities

- SSAE18 Subcommittee Training – training materials for SSAE18 101 being finalized

CUEC Action Tracker – Eligibility

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Eligibility information is complete, accurate, and timely	Member Services (MS) & NM	<ul style="list-style-type: none"> • Meeting with MS and NM completed 11/30. • File transfer controls identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • OCC & Member Services to scrutinize file data elements and determine controls and processes to ensure data integrity. • Decision memo may be needed to explain known issues with eligibility data quality and status of VA activities to address. • Process to ensure veteran and eligibility information updated by TPA is communicated back to VA needed – but out of scope at this time. 	<ul style="list-style-type: none"> • File Transfer Controls Documented and Tested • Memo on Data Quality Completed 	<p>Q3</p> <p>Q3</p>

CUEC Action Tracker – Referral

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Referral information is complete, accurate, and timely	CI	<ul style="list-style-type: none"> • In Progress - Referral process documentation and risk assessment. • File transfer controls to be identified. • Compensating control identified whereby TPA informs OCC if file wasn't received. • Confirming whether field guidance will cover local level controls and monitoring activities (affecting data quality). • Decision memo may be needed to explain known issues/risks with referral data quality and status of VA activities to address. • Further discussions needed with CBI and FQAMs to engage in VAMC control monitoring and testing. 	<ul style="list-style-type: none"> • Process documentation and risk assessment completed • Gap remediation plan completed • File Transfer Controls Documented and Tested • Memo on Data Quality • Agreement reached with CBI/FQAMs for local control testing 	<p>Complete</p> <p>Q2</p> <p>Q3</p> <p>Q3</p> <p>Q4</p>

CUEC Tracker – Healthcare Payment Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Claims payment data is complete, accurate, and timely	POM	<ul style="list-style-type: none"> Process and control documentation complete. Ready for testing. File transfer controls to be documented. Compensating control to be identified if file wasn't received. Decision memo may be needed to explain known issues/risks with payment data quality and status of VA activities to address. 	<ul style="list-style-type: none"> Process documentation and risk assessment completed Internal Controls Audit Completed Gap remediation plan completed File Transfer Controls Documented and Tested Memo on Data Quality Completed 	<p>Complete</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3</p>

CUEC Tracker – Admin Fee Processing

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
Admin Fee payment data is complete, accurate, and timely	NM	<ul style="list-style-type: none"> In Progress - Process and control documentation complete. File transfer controls to be documented. PIIA audit test plans to be developed and transactions to be audited quarterly (TBD). 	<ul style="list-style-type: none"> Process Documentation and Risk Assessment Completed AUP Review Phase II Completed Recurring PIIA testing initiated 	<p>Q2</p> <p>Q2</p> <p>Q2</p>

CUEC Tracker – VA Authorized Access

CUEC	Owner	Summary of Actions Taken/Needed	Action	ECD
<p>VA ensures logical access to VA systems by authorized users.</p> <p>Users restricted to performing authorized actions.</p>	<p>OIT</p>	<ul style="list-style-type: none"> • Meeting with OIT completed 12/2/2020. • DAS file transfer documentation and testing documentation is forthcoming. • User logical access documentation and testing to be received from impacted system owners. • End-to-end system controls to be discussed. • Discussion surrounding ATO credentialing for impacted systems. 	<ul style="list-style-type: none"> • User authorization controls Documented and Tested. • Confirm documentation and testing is complete. 	<p>Q3</p> <p>Q4</p>

Closing and Wrap Up

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Recap and Follow-Up Actions

- Questions
- Recap of assigned actions

Appendix

- DICA Internal Controls Testing Status – (b)(6) (b)(6)
- DIA – (b)(6) (b)(6)
- QCAP Update – (b)(6) (b)(6)

Internal Controls Testing Status/DICA

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Internal Controls – Audit Statuses (as of Jan 29)

- In-Process Audits

Program	Audit Type*	Phase	Number of Controls	ECD
eCAMS	TOD	Fieldwork	18	February 2021
eCAMS Denials Testing	AUP	Fieldwork	N/A	February 2021
CCCA – Administrative Invoices (Phase II)	AUP	Fieldwork	N/A	March 2021
CCRS	TOD/TOE	Fieldwork	13	March 2021
COVID-19 Reporting	AUP	Planning	N/A	March 2021
FM Travel	FPA	Planning	N/A	March 2021
FM Gov't Purchase Cards	FPA	Planning	N/A	March 2021
FM Accruals	AUP	Planning	N/A	March 2021


*TOD = Test of Design; TOE = Test of Effectiveness; AUP = Agreed-upon Procedures; FPA = Financial Performance Audit


Department of Internal Audits (DIA) Update

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Audit Name	Audit Status	Additional Information												
FY21 : Camp Lejeune Family Member Program Focused Audit	<table border="1"> <tr> <td>Planning</td> <td>Fieldwork</td> <td>Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 89%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 89%			<ul style="list-style-type: none"> Fieldwork is complete Report routing for leadership review 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 89%														
2021 SHPDP PIIA	<table border="1"> <tr> <td>Planning</td> <td>Q1</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> <td>Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 62.13%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 62.13%						<div style="text-align: center;">  <p>■ Completed ■ Pending Review</p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 62.13%														

Audit Name	Audit Status	Additional Information												
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave One	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 85%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 85%			<ul style="list-style-type: none"> Fieldwork is complete Reporting is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 85%														
FY21 Spina Bifida Health Care Benefit Program Overlapping Services Data Analysis - Wave Two	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Fieldwork</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="3">Overall Audit Completion: 0%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 0%			<ul style="list-style-type: none"> Planning is underway 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 0%														
2021 CHAMPVA PIIA	<table border="1"> <tr> <td style="background-color: #d3d3d3;">Planning</td> <td style="background-color: #d3d3d3;">Q1</td> <td style="background-color: #d3d3d3;">Q2</td> <td style="background-color: #d3d3d3;">Q3</td> <td style="background-color: #d3d3d3;">Q4</td> <td style="background-color: #d3d3d3;">Reporting</td> </tr> <tr> <td colspan="6">Overall Audit Completion: 68%</td> </tr> </table>	Planning	Q1	Q2	Q3	Q4	Reporting	Overall Audit Completion: 68%						<div style="text-align: center;">  <p> <input type="checkbox"/> Completed <input type="checkbox"/> Pending Review </p> </div>
Planning	Q1	Q2	Q3	Q4	Reporting									
Overall Audit Completion: 68%														

VACC PIIA Team Audits

Green=Complete
Amber=In Progress
Blue=Not Started

Audit Name	Audit Status	Additional Information												
FY21 eCAMS Denied Claims Audit	<table border="1"> <tr> <td data-bbox="479 272 678 329">Planning</td> <td data-bbox="678 272 871 329">Fieldwork</td> <td data-bbox="871 272 1058 329">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="479 329 1058 386">Overall Audit Completion: 2%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 2%			<ul style="list-style-type: none"> • Planning is underway • Pre-audit survey distributed to stakeholders 1/26/2021 						
Planning	Fieldwork	Reporting												
Overall Audit Completion: 2%														
2021 VACC PIIA	<table border="1"> <tr> <td data-bbox="479 472 658 536">Planning</td> <td data-bbox="658 472 826 536">MISSION</td> <td data-bbox="826 472 935 536">CCN</td> <td data-bbox="935 472 1141 536">Traditional</td> <td data-bbox="1141 472 1277 536">VCP</td> <td data-bbox="1277 472 1450 536">Reporting</td> </tr> <tr> <td colspan="6" data-bbox="479 536 1450 615">Overall Audit Completion: 45%</td> </tr> </table> <ul style="list-style-type: none"> • Second interim communication expected 3/31/21 • Testing MISSION Act inpatient and emergency care payments 	Planning	MISSION	CCN	Traditional	VCP	Reporting	Overall Audit Completion: 45%						 <ul style="list-style-type: none"> ■ Completed ■ Pending Review
Planning	MISSION	CCN	Traditional	VCP	Reporting									
Overall Audit Completion: 45%														

Audit Name	Audit Status						
eCAMS Reimbursement Audit – Wave Four	<p>The audit plan was distributed 11/18/2020. There are four planned focus areas. The first focus area over Maryland outpatient facility claims is complete and interim communication was sent 12/22/2020. Focus area two over outpatient infectious disease claims is underway is also complete and interim communication was sent 1/22/2021.</p> <table border="1" data-bbox="788 474 1323 588"> <tr> <td data-bbox="788 474 962 525">Planning</td> <td data-bbox="962 474 1143 525">Fieldwork</td> <td data-bbox="1143 474 1323 525">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 525 1323 588">Overall Audit Completion: 59%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 59%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 59%							
CCN Pharmacy Reimbursements	<p>Planning is underway. Initial pre-audit survey meeting with key stakeholders was 1/7/2021. Second pre-audit survey meeting with PBM was 1/13/2021. Auditors are coordinating with CORs and TPA to define data requirements and determine data availability.</p> <table border="1" data-bbox="788 846 1323 961"> <tr> <td data-bbox="788 846 962 898">Planning</td> <td data-bbox="962 846 1143 898">Fieldwork</td> <td data-bbox="1143 846 1323 898">Reporting</td> </tr> <tr> <td colspan="3" data-bbox="788 898 1323 961">Overall Audit Completion: 12%</td> </tr> </table>	Planning	Fieldwork	Reporting	Overall Audit Completion: 12%		
Planning	Fieldwork	Reporting					
Overall Audit Completion: 12%							

QCAP Update

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OCC CAP Overview – OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2017 January 2021	OIG Report: Review of Alleged Overpayments for Non-VA Care Made by Florida VA Facilities 15-01080	1 of 3 Rec 3	Florida Overpayments (Jcodes)-Awaiting AUSH decision concerning whether pursuit of collection on these claims is in the best interest of VA and Veterans. BIC-TCD June 2021
December 2017 October 2020	OIG Report: Audit of the Timeliness and Accuracy of Choice Payments Processed Through FBCS 15-03036	5 of 7 Rec 1-5	Rec 1-Awaiting output from the Fee Modernization effort to document Medicare payment rules, and exceptions for TPA's. POM-TCD March 2021 Rec 2 and 4- Need resolution of competing priorities for getting data from the Enterprise Program Reporting System to close these recs. POM-TCD December 2020 Rec 3- Dependent on the identification and collection of data to demonstrate we are collecting OHI. POM-TCD December 2020 Rec 5-Requested Closure
August 2019 January 2021	OIG Report: Non-VA Emergency Care Claims Inappropriately Denied and Rejected 18-00469-150	1 of 11 ,	Rec1-Reprocessing of improperly denied claims in accordance with Wolfe vs Wilke. POM-TCD May 2021 Rec 10 Closed

OCC CAP Overview-OIG Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
June 2020 November 2020	OIG Report: Overtime Use in OCC not Effectively Monitored 18-06292	4 of 4	All Recs-Requested Closure
June 2020 December 2020	OIG: Report: VA Should Examine Options to Expand Retail Pharmacy Drug Discounts 19-07281	2 of 2	Work group met and recommended pursuit of Big 4 discounted pricing. Legislative proposal has been drafted.
September 2020	OIG Report: Lack of Adequate Controls for Choice Payments Processed through the Plexis Claims Manager System 19-00226-245	8 of 8	Action Plan Completed.
Draft July 2020	DRAFT: OCC Oversight of Non-VA Healthcare Claims processed by its Contractor (Signature)	6 of 6	Action Plan Completed. Awaiting final report.
Draft Aug 2020	DRAFT: VHA Homemaker Home Health	3 of 3	Action Plan Completed. Awaiting final report.
Draft December 2020	DRAFT: VA Needs Better Internal Communication and Data Sharing to Strengthen the Administration of Spina Bifida-Related Benefits	4 of 4	Action Plan Completed. Awaiting final report.

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
December 2016 January 2021	GAO Report: Improved Monitoring Needed for Effective Oversight of Care for Women Veterans 17-52	1 of 2 Rec 2	<p>Rec 2- TriWest- Agreed to a quality monitoring plan for appointment timeliness for mammography, gynecologic and maternity visits. The monitoring plan will begin immediately and VHA expects to have actionable data by August 2021.</p> <p>Optum-Changes to quality improvement projects require modification to the Community Care Network contract. The modification language has been sent to Optum. Contracting is waiting for a response.</p> <p>TCD August 2021</p>
June 2018 January 2021	GAO Report: VCP: Improvements Needed to Address Access-Related Challenges as VA Plans Consolidation of its CC Programs 18-281	9 of 10	<p>Recs 2, 3, 4, 6, 7, 8 and 9 Requested Closure</p> <p>Rec 1 - Comparison of Community Care wait times to VAMCs-Dependent on publication of OCC and OVAC Directives. TCD August 2021</p> <p>Rec 10- Publication of VHA Directive 1670 TCD June 2021</p>

OCC CAP Overview-GAO Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
September 2018 January 2021	GAO Report: Veterans Choice Program: Further Improvements Needed to Help Ensure Timely Payments to Community Providers 18-671	2 of 2	<p>Rec 1 SAR/Request for Services (RFS) tracking is dependent on the interface with EDI/Automated Eligibility Tool (AET) The interface is awaiting funding and prioritization for Q2 or Q3.</p> <p>CI- TCD April 2021</p> <p>Rec 2 Requested Closure</p>
March 2019 December 2020	GAO Report: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Natives 19-291	1 of 1	<p>Rec 2 Target completion date for finalization of the Reimbursement Agreement Program is TCD-January 2021.</p>
September 2020	GAO Report: VCCP Improvements Needed to Help Ensure Timely Access to Care 20-643	3 of 3	Action Plan Completed
August 2020 December 2020	GAO Report: Additional Steps Could Help Improve the Community Care Budget Estimates 20-669	1 of 1	Status Update Completed
February 2021	GAO: Immediate Actions Needed to Ensure Health Providers Associated with Poor Quality Care Are Excluded GAO-21-71	3 of 3	Action Plan Completed. Final Report published on February 1, 2021.

OCC CAP Overview- DIA Internal Audit Reports

Published/ Last Update	Report Name	Open Recs	Corrective Action Status as of 01/30/2021
March 2020 November 2020	DIA/VACC IPERA: Acute Care Inpatient Payments Approved Under 1725	1 of 3	Rec 3-Coordinate with FSC to obtain a report of all Millennium Act claims with OHI processed for payment between September 9, 2019, and September 16, 2019, and ensure appropriate action is taken. TCD Feb 2021
May 2020 October 2020	DIA/VACC: eCAMS Does Not Apply Medicare Physician Fee Schedule Credential-Based Adjustments	2 of 2	Status update is in progress.
May 2020 January 2021	DIA/VFPAT: FY20 Spina Bifida Health Care Benefits Program Inpatient Claim Payments Audit	1 of 2	Rec 2- Development of Dashboard that will identify and report overlapping claims for review/audit.
May 2020 October 2020	DIA/SAT: VACC Signature Choice LLC	3 of 5	Status update is in progress.
July 2020 October 2020	DIA/SAT: eCAMS Reimbursement Wave Two	1 of 6	Rec 5 -Identify and Correct Improperly Paid Claims Subject to CY 2020 MPFS. Adjustments have begun. TCD March 2021
August 2020 December 2020	DIA Report: CHAMPVA IPERA Focused Audit- Ambulatory Surgery Center Payments	1 of 2	Rec 2- Ensure controls or automation exist within ClaimsXM to prevent improper payments when VEs split ASC charges into separate claims.
October 2020	DIA/SAT: eCAMS Reimbursement Audit Wave Three	4 of 4	Status update is in progress.
November 2020	DIA/SAT Nationwide Dialysis Services Contract Follow-Up	1 of 2	Action Plan completed. Rec 1 is closed.