

Compliance 360 Addresses Healthcare Reform Challenges for Customers

Compliance 360 Publishes a Series of Whitepapers Outlining Best Practices for PPACA Compliance and Audit Requirements

Atlanta, GA. – July 14, 2010 – The healthcare reform bill passed into law as the Patient Protection and Affordable Care Act (PPACA) on March 23, 2010 creates many new and pending regulatory challenges for healthcare providers and health insurance organizations. Compliance 360, a leading provider of Software-as-a-Service (SaaS) solutions for enterprise governance, risk management and compliance (eGRC) has analyzed the legislation and today announces a series of whitepapers for Compliance 360 customers to use as a “Best Practices” framework for addressing compliance and audit challenges emanating from the legislation.

“Sweeping healthcare reform measures will establish new regulations and audit programs that will in turn, create a deluge of challenges for healthcare providers and health insurance organizations. These challenges will manifest from new and expanded revenue recovery audits, expanded anti-fraud programs and audits, mandates for the establishment of formal compliance programs, increased requirements for transparency related to third party relationships, and many others,” said Steve McGraw, president and CEO of Compliance 360. “Compliance 360 is widely proven to cost-effectively help healthcare organizations address compliance, risk and audit requirements such as these. And, our solutions go far beyond merely supporting the requirements by also streamlining the burden-of-proof during an audit. Our unique Virtual Evidence Room will be highly valuable as the new regulations are written and enforced.”

One example of Compliance 360’s applicability to healthcare reform is highlighted by the new and expanded revenue recovery audits. In a speech given on March 11, 2009 in support of the pending healthcare reform legislation, President Obama stated “The health care system has billions of dollars that should go to patient care, and they're lost each and every year to fraud and abuse and massive subsidies... It's estimated that improper payments cost taxpayers almost \$100 billion last year alone. If we created a Department of Improper Payments, it would be one of the biggest departments in our government.” In recent years, revenue recovery audits designed to identify and recoup overpayments in Medicare and Medicaid have increased significantly and PPACA will expand these further. As an example, current Medicaid audit contractors will soon be competing with contingency fee-paid RAC audit contractors.



The Compliance 360 Claims Auditor serves as the claims audit system of record for healthcare organizations by providing a central point of management for a wide variety of revenue recovery audits and denials, including Medicare Recovery Audit Contractor (RAC) audits, Medicaid Integrity Contractor (MIC) audits, Medicare Program Safeguard Contractor (PSC) audits, Medicare Comprehensive Error Rate Testing (CERT) audits, Medicaid Fraud Control Unit (MFCU) audits and more. This industry-leading solution functions as a 'Virtual Audit Coordinator', automating the assignment of responsibilities and ensuring that critical due dates are not missed to minimize the potential loss of legitimate revenues.

In the coming months as the new healthcare mandates are rolled out, Compliance 360 will publish a series of papers outlining the solution's capabilities and benefits related to the key regulations and audit requirements. To request the first paper in the PPACA compliance framework series, please visit www.compliance360.com/HealthcareReform.

About Compliance 360 for Healthcare

Compliance 360 is the leading provider of enterprise governance, [risk management](#), [compliance](#) and [audit management](#) solutions for healthcare. With these solutions, healthcare providers and insurance companies reduce risks, improve efficiencies and protect their brands using a single platform to address their comprehensive GRC requirements. The Compliance 360 solution for healthcare addresses the need for [policy management](#), [centralized regulatory management](#) including [HITECH](#), [HIPAA](#), [EMTALA](#), [STARK](#) and others, [Joint Commission Accreditation](#), [OIG corporate integrity agreements \(CIA\)](#), [False Claims Act \(FCA\) Compliance](#), [adverse-event management](#), [contract management](#), [surveys](#), remediation projects, [claims audits and denials](#), [Medicare RAC audits](#), [Medicaid MIC Audits](#), self assessments, [internal audits](#), and enterprise [risk management](#). Over 150,000 active users rely on Compliance 360 everyday to manage their risk, audit and compliance programs. To learn more about the Compliance 360 solution for healthcare, visit www.compliance360.com.

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