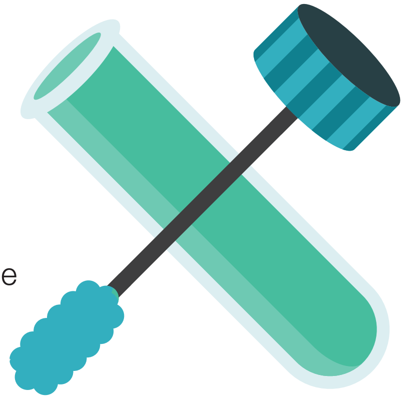
#ForensicPerspectives

Provider Self-Disclosure Protocol: **Selecting a sample**



Healthcare providers and life sciences organizations face many compliance challenges. CRA shares practical insights gained working through challenges involving the Provider Self-Disclosure Protocol (SDP).

Confirm the non-compliant conduct has ended

Before finalizing the date range for the study population and selecting a statistically valid sample of paid claims, consider performing a robust self-validation process to confirm the non-compliant conduct has ended.

Select a population

A sample is typically selected from the population of paid claims, including payers and patients, during the date ranges the disclosing party determines to be most defensible

Validate the population

Disclosing entities will sometimes reconcile the population they selected with their audited financial statements. Often there are other available "control totals" that can be triangulated to reasonably demonstrate the population selected for analysis is valid and complete.

Ensure your sample is statistically valid

The SDP requires that a sample must contain at least 100 units, but that may not necessarily be large enough to yield statistically-defensible results. The OIG historically required a minimum confidence level of 90%. The SDP no longer states a minimum precision range, but a tighter range will yield a more defensible estimate.

Select a sampling unit

The sampling unit used (e.g., a claim, a claim line, a patient) will be impacted by a variety of factors (e.g., the type of service of interest, how the data are available).

Deal with missing sample items

The SDP does not allow alternate sampling units. It states that missing sample items should be treated as errors, citing Federal health care program rules which require the retention of supporting information for submitted claims.

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