

Offshore Healthcare Vendor Compliance Scorecard

A structured way to evaluate any offshore vendor or contractor arrangement before granting access to PHI, payer systems, or billing workflows. Based on the article *Healthcare Outsourcing Compliance: Managing Legal and Operational Risk in Offshore Teams*.

How to score

Score every item **0, 1, or 2** and write the evidence you saw in the Notes column.

0 = No, or unclear. The vendor cannot answer, or the answer is vague.

1 = Partial, or verbal only. A process is described but not documented or shown.

2 = Yes, with documentation. The vendor shows you a policy, record, or system, not just a claim.

Ask for these answers **in writing, before the sales demo**. How quickly and specifically a vendor responds is itself a signal. Total the sections at the end and compare against the interpretation bands.

1. Legal and Organizational Structure	0	1	2	Notes / evidence
What is the vendor's registered legal name, and in which countries or states is it registered?				
Who is contractually responsible for service delivery?				
Are workers employees, direct contractors, or subcontractors?				
Is subcontracting prohibited without your written approval?				
Who supervises the offshore team day to day?				
Is there a named backup if the primary supervisor becomes unavailable?				
Section subtotal				____ / 12

2. Privacy and Security	0	1	2	Notes / evidence
Will the vendor sign a BAA before receiving any PHI access?				
Does every worker have a unique account? (No shared logins.)				
Is multifactor authentication required on all systems?				
Is access approved, reviewed, and removed through a documented process?				
Are workers prevented from downloading or locally storing PHI?				
Are devices managed or controlled by the organization?				
Are audit logs available to you on request?				
Is there a documented incident-reporting and investigation process?				
Section subtotal				____ / 16

3. Workforce Governance	0	1	2	Notes / evidence
Are workers screened with identity verification and background checks?				
Is HIPAA and security training required and documented?				
Are confidentiality obligations signed by each worker?				
Are workers barred from recruiting or managing other workers without approval?				
Are performance and quality reviewed on a defined schedule?				
Are departures and replacements handled through a documented process?				
Section subtotal				____ / 12

4. Revenue Cycle Controls	0	1	2	Notes / evidence
Is claim submission reviewed for quality before it goes out?				
Are adjustments, refunds, and write-offs controlled and approved?				
Are payer communications documented in your system of record?				
Are errors corrected and reported to you, not quietly reworked?				
Are quality and productivity metrics monitored and shared?				
Is client data segregated so workers only see your accounts?				
Section subtotal				____ / 12

5. Business Continuity	0	1	2	Notes / evidence
Is process documentation maintained outside any one individual's control?				
Is cross-training in place so work continues when someone is out?				
Is there a plan for internet, power, or system outages?				
Can access be suspended quickly, and is it clear who can do it?				
Is data return or destruction at termination defined in writing?				
Section subtotal				____ / 10

Interpreting the total (max 62)

Total score	What it means
52–62	Structured vendor. Governance, security, and continuity are documented and demonstrable. Proceed with normal contracting and periodic review.
32–51	Workable but incomplete. Identify every 0 and 1, set written remediation deadlines, and limit PHI and system access until the gaps close.
Below 32	High risk for PHI or billing work. Suitable only for low-risk, non-PHI tasks, if at all. Do not expand scope on promises alone.

Automatic red flags

Regardless of the total score, treat any of the following as a stop-and-investigate signal: shared logins, undisclosed subcontracting, workers recruited by other workers without screening, personal email or messaging used for work, no BAA offered before PHI access, one person holding all passwords and process knowledge, or access that stays active after someone leaves.

About this scorecard. Prepared by Kevin Jamito, CPC, CPB, CPPM, CRCR, CHBME, founder of RCM Staff LLC, a Florida-registered healthcare outsourcing company with service delivery operations in the Philippines. It provides general educational information and is not legal advice; consult qualified counsel about your specific contracts and obligations.

Read the full article: www.rcmstaff.com/blog/healthcare-outsourcing-compliance-risks

Discuss a structured offshore model: www.rcmstaff.com/get-a-staffing-plan