

North Broward Hospital District Board Of Commissioners
1700 Northwest 49th Street, Suite #150, Ft. Lauderdale, 33309

COMPLIANCE AND ETHICS COMMITTEE MEETING Immediately Following the Audit Committee Meeting January 15, 2020

1. NOTICE

Official notice and agenda of this meeting is attached to the Minutes, as EXHIBIT I and EXHIBIT II, as presented for consideration of the Committee.

2. CALL TO ORDER 11:03 a.m.

3. COMMITTEE MEMBERS

Present: Commissioner Nancy W. Gregoire, Chair
Commissioner Christopher T. Ure, Vice Chair
Commissioner Ray T. Berry
Commissioner Stacy L. Angier
Commissioner Marie C. Waugh (WebEx)

Senior Leadership

Additionally Present: Gino Santorio/Chief Executive Officer, President, Alan Goldsmith/Chief Administrative Officer, Alex Fernandez/Chief Financial Officer, Linda Epstein/Corporate General Counsel, Jerry Del Amo/ Deputy, General Counsel

4. PUBLIC COMMENTS None

5. APPROVAL OF MINUTES DATED DECEMBER 11, 2019

MOTION It was *moved* by Commissioner Angier, *seconded* by Commissioner Berry, to:

Approve the Compliance and Ethics Committee meeting minutes, dated December 11, 2019.

Motion *carried* unanimously.

6. TOPIC OF DISCUSSION

6.1. Resolution FY20-16 Resolution of District Commitment to Trauma Centers

MOTION It was *moved* by Commissioner Ure, *seconded* by Commissioner Berry, that:

The Compliance and Ethics Committee recommend that the Board of Commissioners of the North Broward Hospital District reaffirm its commitment to offer trauma services at both Broward Health Medical Center and Broward Health North by approving Resolution FY20-16, with revision to the date listed at the end of the document.

Motion *carried* unanimously.

6.2. Chief Compliance Officer Report – Brian Kozik

6.2.1. Compliance Department Update – Brian Kozik

Mr. Kozik reported on departmental activities that had taken place since his last monthly report.

- Compliance Work Plan for FY 2020
 - 10 reviews from FY 2019,
 - 9, completed
 - 1, final stages of completion
 - 14 reviews for FY 2020
 - 3, in process with external assistance
 - 5, in process internally
 - 6, pending commencement
- Completed review of the Two-Midnight Rule. Final report pending.
- Fiscal year review of Focus Arrangements in progress at IRO's request. Error rate was 12.31%. Aggressive corrective plan is in place.
- Observation Stay/Code 44 audit, in process.
- Acute Care Discharge Transfer audit, 25% complete.
- Home Health Claims audit, completed. No findings. Final report issued in December.
- (3) Additional compliance audits began in January 2020:
 - Medicare's DRG 3 Day Window
 - Physicians at Teaching Hospitals
 - Hyperbaric Oxygen Therapy
- Broward Health Medical Center Short Stay audit conducted by Medicaid providers. Report pending.
- Hyperbaric Oxygen Therapy claims audit conducted by First Coast has been completed. Minor error rates identified. The six (6) year retroactive review of claims is in process.
- Enterprise Risk Assessment audit results identified 19 system wide high-risk areas. Each high-risk area will be assigned a senior leader and team to implement risk mitigation plan.
- Department of Records contacted to determine timeframe and compliance requirements related how long documents should be maintained prior to destruction.
- Greenberg Traurig firm currently conducting a review of the HIPAA privacy program, including policies and procedures.
- HIPAA Breaches for the month of December reported. Corrective action was taken.
- Medical record coders review of inpatient coding was at 99% accuracy rate and outpatient coding was at 94% accuracy rate.

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- Accountable Care Organization Board of Directors (ACO) approved Brian Kozik as Chief Compliance Officer for ACO.
- Discussion of fundraising activities with the William Diggs, President of Broward Health's Foundation keeping HIPAA in mind.
- Internal investigation manual, in process.
- Meetings and collaboration continue between the internal compliance and audit departments.

6.2.2. OIG/CIA Update – Brian Kozik

- CIA Fourth Annual Report has been completed and routed to the OIG.
- Sleep Study audit, in which the OIG requested a (6) year look back, is in process of being finalized.
- Conflict of Interest Disclosure survey for 2020 is automated via C360 and pending completion.

6.3. Report from the Executive Compliance Group

6.3.1. IRO Plan of Correction - Linda Epstein, Corporate General Counsel

- Reviewed focus arrangements listed on the IRO's report.
- Reviewed contracts and IRO's recommendations for accuracy.

6.3.2. Training - Melanie Hatcher, SVP, Chief Human Resource Officer

- Training Subcommittee finalizing revisions to the year-five training program.
- Timeline for year five of training program being established.
- HIPPA training for regions in process.

6.3.3. Sanction Screening - Lee Ghezzi, SVP, Quality and Case Management

- Complexed Sanction Screening processes were broken down to ensure potential issues were addressed by broadening the committee to include staff feedback, along with the managers and directors. Areas included were the following:
 - Human resource
 - Credentialing
 - Patient access
 - Contracts
 - Department of learning
 - Review of all the Boards
- Low Risk screenings categories were removed from review
- High Risk areas were also identified
 - Agency staff

MINUTES

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- Temporary hires
- Non-credentialed physicians
- Final revision of the sanction screening policy in process by compliance

6.3.4. Disclosures – Lauren Brown, Director, Compliance and Privacy Operations

- 0% open disclosures over two years old.
- 49 open disclosures within 90 - 364 days, the largest related to HIPAA.

6.3.5. Risk Assessment/Auditing & Monitoring - Alex Fernandez, SVP, Chief Financial officer

- Risk Assessment and Auditing & Monitoring have been split into their own committees.
- Risk assessment on 19 items identified, in process.

6.3.6. Policies & Code of Conduct - Denise Moore, VP, Corporate Communication and Marketing

- Incorporating IRO's recommendations to various compliance policies.
- Annual review of the Code of Conduct, completed.
- Policy platform streamlined and revised for user friendly navigation for the organization.

6.4. Regulatory Update - Brian Kozik, SVP, Chief Compliance Officer
Mr. Kozik presented a compliance training related to: Exit Interviews

7. **ADJOURNMENT** 11:50 a.m.

MOTION It was *moved* by Commissioner Angier, *seconded* by Commissioner Ure to:

Adjourn the Compliance and Ethics Committee meeting.

Motion *carried* unanimously.

Respectfully submitted,
Commissioner Stacy L. Angier, Secretary/Treasurer