

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

COMPLIANCE AND ETHICS COMMITTEE MEETING Immediately following the Human Resources Committee Meeting September 8, 2020

The Compliance and Ethics Committee Meeting of the North Broward Hospital District was held on September 8, 2020, immediately following the Legal Affairs and Governmental Relations Committee meeting, via WebEx video conference.

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

There being a quorum present, the meeting was called to order by Chair Nancy W. Gregoire at 9:48 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

Senior Leadership

Additionally Present:

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

4. GOVERNOR'S EXECUTIVE ORDER ANNOUNCEMENT

General Counsel delivered the Governor's Executive Order for the record.

"This public board committee meeting is being conducted through communications media technology in accordance with the Governor's Executive Order No. 20-69, as extended by the Governor's Executive Order No. 20-193 Section §120.4(5)(b)2 of the Florida statutes. This meeting is open to the public who are able to attend this meeting via telephone conference call. The conference call information is currently posted on Broward Health's website. All requirements

of Florida's Sunshine Law are still in effect, including memorialization of minutes. While not a requirement under Florida law, we will attempt to record this meeting and post it on Broward Health's website for the public and for those who may not be able to attend this live telephone conference."

5. PUBLIC COMMENTS

Chair Gregoire opened the floor for public comments, in which there were none.

6. APPROVAL OF MINUTES

Without objection, Chair Gregoire approved the Compliance and Ethics Committee Meeting Minutes for August 19, 2020.

Motion *carried* without dissent.

7. TOPIC OF DISCUSSION

7.1. Chief Compliance Officer Report – presented by Brian Kozik, SVP, Chief Compliance Officer

7.1.1. Compliance Department Updates

- Two-Midnight Rule Audit, completed
 - Objective is that if a physician believes that a patient requires two or more nights of medically necessary care, but the patient goes home before two midnights, the provider is still eligible to receive the inpatient rate based on the initial documentation.
 - 22% error rate resulted in a little over \$103k payback.
 - Audit is a reportable event, which will be shared with the OIG Monitor.
 - Meeting with Case Management and HIMMS to share results, pending.
- Non-Focus Arrangements Audit, completed
 - Objective is to review a sample of contracts and related documents to ensure internal review, approval process, and other internal procedures were followed and documented as required.
 - Draft report issued on August 24, 2020.
 - Pending responses.
- Broward Health Medical Center's Institutional Review Board (IRB), in progress
 - The objectives of the review is to use an FDA checklist to determine that Broward Health IRB is following the Code of Federal Regulations, subchapter part 56, Institutional Review Boards, the

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

- Centers for Medicare, and Medicaid Services regulations and guidelines regarding the operations of an IRB.
- 40% completed.
 - Focus Arrangements Review for CIA Year 5, Q2, completed
 - Objective is to ensure internal review and approval processes and procedures were properly followed.
 - Draft report issued the end of August 2020.
 - Focus Arrangements Review for CIA Year 5, Q3 and Q4, in progress
 - Objective is to ensure internal review and approval processes and procedures were properly followed.
 - 10% completed.
 - Tracking and Remuneration Audit for Employed Physicians Agreements, in progress
 - Objective is to review payments made during review period and verify internal controls were effective and consistent with terms of agreement.
 - 30% completed.
 - Sampling 30 agreements.
 - BHIP/BHMC Coding Audit for Q2, in progress
 - Objective is to review inpatient and outpatient coding to ensure the coding meetings federal coding guidelines and Broward Health's accuracy rate of 95%.
 - BHIP, 85% completed.
 - BHMC, 50% completed.
 - Observation Stay/Condition Code 44 Audit, completed.
 - Condition Code 44 is when the Hospital Utilization Review Committee changes a physician's order for inpatient status to outpatient due to lack of certain criteria.
 - Report to be finalized.
 - Emergency Medical Treatment and Active Labor Act (EMTALA), in progress
 - Objective is to ensure a proper medical screening examination is conducted in the Emergency Department in compliance with EMTALA regulations. The review is being conducted at Broward Health Medical Center.
 - Review may be pushed out, as the next phase requires onsite engagement within the Emergency Department.
 - SafeGuard Services Audit of Broward Health Medical Center Short Stay, completed
 - Objective is to determine whether Medicaid payments made for inpatient stays less than two days were in accordance with state and federal laws, regulations, and policies between October 1, 2014 through March 31, 2018.

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

- 36 denied claims based on the Two-Midnight Rule.
- Broward Health submitted an appeal with all the supporting documentation at the end of August for 35 of the denied claims, response pending.
- Enterprise Risk Assessment, completed
 - Conducted the ERA process for the second year. The goal is for the system leadership to identify high risk areas within their operations. The results systemwide will be used to identify risks that will be addressed by internal teams and/or added to the work plans of Compliance and Internal Audit. Results will be reported to the Auditing/Monitoring subcommittee.
 - Results currently under management review; to be included in internal audit and compliance work plans.
- Executive Compliance Group (ECG)
 - The ECG is the group that supports the Chief Compliance Officer (CCO) in carrying out compliance program responsibilities. To assist the CCO, the ECG implemented the following subcommittees that meet monthly:
 - Code of Conduct/Policies and Procedures
 - HIPAA/Disclosures
 - IRO Plan of Correction
 - Risk Assessment/Auditing and Monitoring
 - Sanctions Screening
 - Training
 - To bring Charter to ECG to review and approve.
 - Self-Assessment, completed. Results being compiled; to be shared at the September 15, 2020 ECG meeting and the Compliance Committee October 21, 2020 meeting.
 - Monthly meetings to continue until CIA year 5 is over; then the goal is to reduce to bi-monthly meetings and eventually quarterly meetings.
- Compliance Council
 - Objective is to develop a sounding board to determine what is successful in compliance. They will provide feedback on what improvements they think are needed. Council includes members throughout the system: clinical and nonclinical staff from all shifts.
 - Promotional campaign launching October 25, 2020 to all employees via several emails.
- Compliance Department Rebranding, in progress
 - Two videos produced at the end of August.
 - Video 1: Introduction to Compliance and code of conduct.
 - Video 2: Completion of the CIA.

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

7.1.2. OIG/CIA Update

- CIA ended on August 30, 2020
- OIG Virtual Site Visit – Additional virtual site visit information provided to OIG Monitor, per her request.
- Sleep Study – Six-Year Look-Back Audit
 - OIG feedback pending on self-disclosure protocol and its effectiveness related to the sleep study audit.
- Certifying Employees, in progress
 - Annual certifications in progress.
 - Frequently Asked Questions (FAQ) provided to each certifying employee.
- HIPAA Breaches – August
 - Two breaches reported to Monitor.
 - Impermissible disclosures of patient health information (PHI).
 - (1) Broward Health Community Services – Bernard Alicki Community Health Center.
 - (1) Broward Health North.
 - OIG Monitor notified Broward Health that reporting of the breaches is no longer required.
- IRO Communications for CIA Year-5 Plan
 - Systems and transaction review required in 2019. Only the transaction review is required for 2020 (50 transactions).
- Year-5 Annual Report, in progress
 - Report being prepared within Broward Health.
 - Report is due November 4, 2020.
- Post-Corporate Integrity Agreement (CIA) Transition Plan, completed
 - Plan to be shared at the September 5, 2020 ECG meeting and made available to the Compliance and Ethics Committee.

7.2. Compliance Work Plan – Fiscal Years 2021 and 2022 – presented by Brian Kozik, SVP, Chief Compliance Officer

- Compliance Work Plan – Fiscal Year 2020, in progress
- Two-year plan for Fiscal Year 2020 and Fiscal Year 2021
 - 56 reviews in total.
 - 10 reviews in process.
 - 46 reviews pending.

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

The Compliance and Ethics Committee recommend that the Board of Commissioners of the North Broward Hospital District approve FY21/22 Compliance Work Plan.

MINUTES

NORTH BROWARD HOSPITAL DISTRICT

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

Motion confirmed by roll call vote:

- YES** Commissioner Berry
- YES** Commissioner Angier, Vice Chair
- YES** Commissioner Waugh, Secretary/Treasurer
- YES** Commissioner Ure
- YES** Commissioner Gregoire, Chair

Motion *carried* 5/0.

7.3. Board of Commissioners Compliance Consultant Update – presented by Steve Forman, Board of Commissioners Compliance Consultant

- Compliance Program Structure (for more detail, see the Compliance Program Structure PowerPoint presentation)
 - Compliance Officer
 - Written Compliance Guidance
 - Compliance Communication
 - Reports on Violations Reported and Investigated
 - Reports on the Responses to Identified Issues
 - Disclosure Program
 - Compliance Education and Training
 - Evidence of Compliance Program Effectiveness
 - Changing Regulatory Environment
 - Claims Processing Error Rates
 - Sanction Screening
 - Risk Assessment Process Report
 - Summary/Conclusions
 - The Board should continue to receive regular reports on Compliance Program status.
 - All Compliance Program elements should be covered during the year.
 - The Board should maintain a good understanding of the status and effectiveness of the Compliance Program.

8. **ADJOURNMENT**

There being no further business on the agenda, the Chair adjourned the meeting at 10:35 a.m.

Respectfully submitted,
Commissioner Marie C. Waugh, Secretary/Treasurer