Compliance and Ethics Committee Meeting
Legal Affairs and Governmental Relations Committee Meeting
August 21, 2019

1. **NOTICE**

Notice of this meeting is attached to the official Minutes as EXHIBIT I. The official Agenda for this meeting, as presented for the consideration of the Board, is attached to the official Minutes as EXHIBIT II.

2. **CALL TO ORDER**

There being a quorum present, the meeting was called to order by Chair Nancy W. Gregoire at 2:29 p.m.

3. **COMMITTEE MEMBERS**

- √ Commissioner Nancy W. Gregoire, Chair
- x Commissioner Andrew M. Klein
- √ Commissioner Christopher T. Ure
- √ Commissioner Ray T. Berry
- √ Commissioner Stacy L. Angier
- x Commissioner Marie C. Waugh

**ADDITIONALLY PRESENT** Gino Santorio/President/CEO, Alan Goldsmith/CAO, Alex Fernandez/CFO, Linda Epstein/General Counsel, Jerry Del Amo/Managing Sr. Associate, General Counsel, Brian Kozik/SVP, Compliance and Privacy, Steve Forman/Compliance Consultant, Nigel Crooks/Chief Internal Auditor

4. **PUBLIC COMMENTS** None.

5. **APPROVAL OF MINUTES**

Approval of the Compliance and Ethics Committee Meeting minutes, dated July 24, 2019

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

**APPROVE THE COMPLIANCE AND ETHICS COMMITTEE MEETING MINUTES DATED JULY 24, 2019.**

Motion carried unanimously.
6. **TOPIC OF DISCUSSION**

6.1. Chief Compliance Officer Report- Brian Kozik

6.1.1. Compliance Updates

Mr. Kozik updated the committee on the departmental activities since his last monthly report, as seen below.

- Completed third quarter Focus Arrangement audit
- Completed tracking and remuneration audits for Leases, Call Coverage and Medical Directorship
- Observation Stay/Condition code 44 audit, in progress
- Acute Care Discharge Transfer audit, in progress
- Completed Home Health Claims audit
- Internal Audit department conducting a review of the Compliance department’s Tracking & Monitoring of Focus Arrangements, Hotline Calls and Remuneration
- Outside firm retained to complete internal compliance reviews for Physicians at Teaching Hospital (PATH) Review for Modifier Reporting, Same Day Readmissions, Medicare’s Two Midnight Rule
- Finalization of annual Conflict of Interest Survey and Process, in progress
- Contracting outside consultant with HIPAA Privacy experience to assist in conducting a HIPAA Privacy Rule Gap Assessment
- Director of Pharmacy Services disclosed a drug diversion issue to the Health Resource and Services Administration. The specifics of the corrective action plan was included in the disclosure
- Notification received from HRSA regarding Broward Health Medical Center’s corrective action plan from HRSA review conducted at BHMC during the period of July-October 2018
- Proposed organizational chart submitted to Human Resource
6.1.2. OIG/CIA Updates

- Additional items requested by Monitor to be included in the Annual Report
- Certifying and sub-certifying employees to determine if there were specific issues they would be disclosing
- Completed Year-4 Arrangements Training sessions for all Covered Persons, including board members
- Conference call scheduled with Monitor on August 26, 2019
- Email received on August 12, 2019 from Monitor requesting copy of the settlement agreement entered into with former CEO Pauline Grant and to add as a Reportable Event
- Update on Sleep Study audit, $35k repayment
- Status on items requested by IRO, draft report will be provided last week of August
- Response from Monitor pending regarding waivers requested
- Reported to Monitor: HMS (external auditor) identified overpayment related to outpatient claim 48-hour Rule
- Reported to Monitor: identified overpayment related to Gold Coast Hospice
- Reported to Monitor: identified overpayment related to First Coast Service Options, Inc., Medicare Administrator Contractor of Broward Health’s region

6.2. Compliance Policy Submission for Board Approval

6.2.1. GA-004-285 Deficit Reduction

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

APPROVE THE GA-004-285 DEFICIT REDUCTION POLICY.

Motion carried unanimously.
6.2.2. GA-004-345 Monitoring and Auditing

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

**APPROVE THE GA-004-345 MONITORING AND AUDITING POLICY.**

Motion carried unanimously.

6.3. Report from the Executive Compliance Group

6.3.1. Training- Melanie Hatcher

Mr. Kozik presented updates in Ms. Hatcher’s absence.

- Year-3 Training completed:
  - Live Manager Training

- Year-4 Training completed:
  - Online Training
  - Live Manager Training
  - Credentialing Staff Training
  - Covered Person Arrangements Training
  - 2,045 physicians’ training completed

  - Year-5 Training is the current focus

6.3.2. Sanction Screening- Lee Ghezzi

Mr. Ghezzi reported that all of the areas his sub-committee was assigned to review had been completed. A number of changes were made to the process and a revision was made to the policy. The subcommittee was working closely with the audit and compliance departments to create an audit and monitoring system for sanction screening.

6.3.3. Disclosures/HIPAA/COI- Ana Calderon Randazzo

Ms. Randazzo shared the breakdown of the remaining 144 open disclosures. She further reported that HIPPA violations remained in the lead of open disclosures.
MINUTES

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

- 8: Over 2-years old
- 64: over 90 days old
- 41: between 30-90 days old
- 39: Less than 30 days old

* Note, Mr. Kozik modified the reporting order of the Subgroups (6.3.4 is below 6.3.6)

6.3.5. Policies- Denise Moore

Lauren Brown presented the policies update in the absence of Ms. Moore.

- All compliance policies and procedures were reviewed during the year, as required by the CIA
- Deficit Reduction Act and Monitoring and Auditing policies were been approved by the board
- 6 additional policies were approved that did not require board approval
- General Counsel Interactions Policy, pending approval by board

6.3.6. IRO Plan Correction- Beth Cherry

Ms. Cherry reported that 37 of the 43 items on the IRO plan of correction had been completed.

- 4 remained in progress
- 2 were substantially complete

6.3.4. Risk Assessment Alex Fernandez

Mr. Fernandez reported that the initial risk assessment had been completed and that a team was selected to rate the internal controls. The team consisted of CFO, Alex Fernandez, CAO, Alan Goldsmith, CIO, Brian Kozik and CIA, Nigel Crooks. Once results were complied, the team would begin to identify risks, manage them and create an action plan to mitigate the risks from reoccurring.
The Auditing and Monitoring subcommittee would be transitioned to more of a monitoring type committee, which would include oversight of the audits performed within the compliance department, internal audit department and regional compliance committees. Updates, performance and outcomes would be monitored for said audits as well.

6.3.7. Annual Report- Lucia Pizano-Urbina

Ms. Pizano reported on the members within the new Annual Report Subcommittee, which included members from the legal and compliance departments, Alan Goldsmith and Gino Santorio. The goal of the subcommittee is to stay organized with the completion of the report and to ensure it's completed in a timely manner. An outline was created for required items on the annual report, including additional items requested by the Monitor. Once the pending IRO report is received, a response will be drafted, as the response is one of the most significant sections to the annual report.

6.4. NBHD 2019 Compliance – Arrangements Training

Due to lack of certain commissioners being present to receive the Covered Persons Training, item 6.4 was deferred to the August 28th, Board of Commissioners meeting.

7. ADJOURNMENT 3:22 pm.

MOTION It was moved by Commissioner Ure, seconded by Commissioner Berry, to:

ADJOURN THE COMPLIANCE AND ETHICS COMMITTEE MEETING.

Motion carried unanimously.

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