

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 May 27, 2020**

The Compliance and Ethics Committee of the North Broward Hospital District was held on May 27, 2020, immediately following the Audit 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 Vice Chair Christopher T. Ure at 3:20 p.m.

#### **3. COMMITTEE MEMBERS**

*Present:* Commissioner, Christopher T. Ure Vice Chair  
Commissioner Ray T. Berry  
Commissioner Stacy L. Angier  
Commissioner Marie C. Waugh

*Not Present:* Commissioner Nancy W. Gregoire, Chair

*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, as seen below.

“This public meeting of the Compliance and Ethics Committee of the board of commissioners of the North Broward Hospital District is being conducted through communications media technology in accordance with the Governor's Executive Order No. 2020-69, dated March 20, 2020, and § 120.54(5)(b)2., 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 the requirements of Florida's Sunshine Law are still in

# MINUTES

## NORTH BROWARD HOSPITAL DISTRICT

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effect including the 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

None.

### 6. APPROVAL OF MINUTES

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

Staff Recommendation: That the Compliance and Ethics Committee approve meeting minutes for April 28, 2020, with a modification to capitalize the words North Broward Hospital District, within the Executive Order read by General Counsel.

**Staff recommendation carried unanimously.**

### 7. TOPIC OF DISCUSSION

#### 7.1. Chief Compliance Officer Report – Brian Kozik

##### 7.1.1. Compliance Department Update – Brian Kozik

Mr. Kozik reported on the status and observations of audits that occurred in the past month, as listed below.

- Two-Midnight Rule audit, completed.
  - Error rate 22%.
  - Reported to OIG as a reportable event.
  - Finance has voided the claims in the amount of \$103,940.49.
  - Additional testing in process at request of OIG.
- Managed Care Auto Renewal Audit.
  - No deficiencies identified.
- Focus Arrangements and Tracking and Remuneration audit for first quarter, Year 5, completed.
  - Error rate 1.71%.
- Non-Focus Arrangements audit, in process.
  - 60% completed. Anticipated completion late May 2020.
- Observation Stay / Condition Code 44, audit, in process.
  - 85% completed.
- Inpatient Psychiatric Stays Certification and Re-Certification, in process.

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- Findings report in review with management.
  - Completion anticipated late May 2020.
- SafeGuard Services audit of BHMC Short Stay Claims to Medicaid, completed.
  - 40% error rate.
  - SafeGuard initial findings report submitted to CMS.
  - Due to Covid-19 pandemic, the audit report was placed on hold.
- Greenberg Traurig review of Broward Health's HIPAA Privacy Program, in process.
  - All policies and questionnaires requested are completed.
  - Positive feedback received.
  - On-site visit postponed to mid-June due to pandemic.
- Broward Health North Coding audit, completed.
  - Inpatient, accuracy rate 98%.
  - Outpatient, accuracy rate 95%.
- Broward Health Coral Springs Coding audit, completed.
  - Inpatient, accuracy rate 99.4%.
  - Outpatient, accuracy rate 98.6%.
- Auditing and Monitoring and Risk Assessment.
  - (3) Standard Operating Procedures guidelines created for management.
  - Corrective Plan Action.
    - Written guidelines for the staff to use in developing a corrective action plan.
    - Written guidelines for management of the area reviewed in preparing a written corrective plan of action.
    - Written guidelines for the staff to follow when recording information on the tracking of outstanding compliance worksheet.
- Enterprise Risk Management Process.
  - ERM process will be launched in August 2020.
  - Process will be reviewed every two years.
- The Human Resource, IT Security, Legal and Compliance departments decided that teleworking would not include printing from home.
- Disclosures sub-committee update.
  - (0) open disclosures over two years old.
  - (5) open disclosures between one and two years old.
  - 49% of open disclosures are related to HIPAA. Corrective actions implemented.
  - 18% open disclosures related to Human Resource. Plan is to allow HR to us Comply Track to monitor their own disclosures.
- Policy sub-committee update.
  - (10) compliance policies were part of annual review. Several highlighted below.

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- Medical Director/Program Director Arrangement Policy (new).
  - Tracking and Monitoring Activity Policy (new).
  - Standard Operating Procedure for Compliance Audit Plan of Correction Policy (new).
  - Enforcement and Discipline Policy (revised).
  - Sanction Screening Policy (revised).
  - Master Procurement Code Policy (revised).
  - Broward Health Medical Center, Chief Medical Officer, Dr. Kumar requested that the compliance department participate in June's Compliance/Bylaws Workshop.
  - External Audit update.
    - Warren Averett requested the following from Compliance Department.
      - Provide all reportable events within FY 2020.
      - Correspondences with the OIG in FY 2020 to include Covid waivers.
      - Update on reportable events previously disclosed in the June 30, 2019 financial statements.
      - Update on CIA.
  - Rebranding Compliance Department.
    - June 1, 2020, Chief Compliance Officer being filmed highlighting the Code of Conduct handbook, in addition to brief tips on patient confidentiality.
- 7.1.2. OIG/CIA Update – Brian Kozik
- Annual Report Year 4 OIG response.
    - Leadership's response will be submitted prior to the June 1<sup>st</sup> deadline.
  - HIPAA breaches for month of April.
    - Reported to Monitor.
    - (5) Impermissible disclosures.
      - (5) patients impacted.
      - Analysis performed.
      - Corrective action taken.
  - Broward Health CIA Year 5 plan:
    - IRO noted a Systems and Transaction Review is not needed.
    - Monitor's letter and responses will be provided to IRO.
    - A summary report of material policy changes will be provided to IRO.
    - IRO field work launching July 2020.
  - Long Term Care Facilities impacted by COVID19.
    - Patients being transferred to and from Broward Health facilities.

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- Monitor provided waivers language within specific sections in the CIA related to such transfers.
- Post Corporate Integrity Agreement (CIA) Transition Plan.
  - Drafted.
  - Steve Forman's recommendations were included in plan.

Mr. Kozik gave a brief update on the status of the Compliance Work Plan FY 2020.

- (27) audits within plan in total.
  - (12) reviews complete.
  - (6) reviews in process.
  - (9) reviews pending.

#### 7.1.3. Conflict of Interest Update (Presenter - Lauren Brown, Director, Compliance/Privacy

##### Operations

- 91% completion rate.
- Conflict of Interest (SOP) Standard Operation Procedure, in process.

#### 7.1.4. Annual Compliance Mandatory Education Update - Presenter - Brian

##### Kozik, SVP, Chief Compliance Officer and Lauren Brown

- 81.4% training completion rate.
- Receiving weekly facility breakdowns from HR.
- Marketing sending staff reminders to complete training.
- Annual Arrangements Training pending.

- 8. Special Compliance Liaison to Board of Commissioners - Presenter - Steve Forman, Board of Commissioners Compliance Consultant

Due to time restrictions, Mr. Foreman was not able to complete his Board of Commissioner's training presentation related to the 2020 Healthcare Compliance Benchmark Survey Results, Compliance Officer Priorities, which will be continued at a subsequent Compliance and Ethics Committee meeting.

**\*Please note**, Item 10. was heard prior to item 9.

#### 10. Policy GA-004-500, Call Coverage Policy

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

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The Compliance and Ethics Committee of the North Broward Hospital District approve item 10., on the Topic of Discussion, with a modification to the *Procedure section, 3.a.i., Qualified Physicians*, as seen below.

3. Qualified Physicians:

a. In order to be a Qualified Physician, the physician shall be appropriately credentialed and a member of the Medical Staff in good standing, with the requisite training or certification in the clinical Specialty, as determined by the credentialing process.

i. In determining whether a physician is a Qualified Physician, the MSO shall consult with the Call Coverage Management Team to determine whether a particular Specialty has additional criteria that must be met for a physician to be considered a Qualified Physician. The Call Coverage Management Team shall maintain a current list of Broward Health system-wide, Specialty-specific criteria, developed by, at minimum, the Broward Health Chief ~~Operating Officer~~ ("COO") Chief ~~Administrative Officer~~ ("CAO") or similarly equivalent position...

**Staff recommendation carried unanimously.**

9. Chief Information Officer Report - Presenter - Katherine Ross, Chief Information Officer

Ms. Ross noted that item 9 was more of an informational report, which was discussed in detail in past briefings. No presentation was given.

11. **ADJOURNMENT**

There being no further business on the agenda, the Vice Chair adjourned the meeting at 4:00 p.m.

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