

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

**COMPLIANCE AND ETHICS COMMITTEE MEETING  
Immediately following the Legal Affairs and Governmental Relations Committee Meeting  
Wednesday, November 18, 2020**

The Compliance and Ethics Committee Meeting of the North Broward Hospital District was held on November 18, 2020, immediately following the Legal Affairs and Governmental Relations Committee Meeting, at the Broward Health Corporate Spectrum location, 1700 Northwest 49 Street, Fort Lauderdale, Florida.

**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 11:29 a.m.

**3. COMMITTEE MEMBERS**

*Present:*

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

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

**5. APPROVAL OF MINUTES**

Without objection, Chair Gregoire approved the Compliance and Ethics Committee Meeting Minutes for October 21, 2020.

Motion *carried* without dissent.

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

## 6. TOPICS OF DISCUSSION

### 6.1. Chief Compliance Officer Report – presented by Brian Kozik, SVP/Chief Compliance and Privacy Officer

#### 6.1.1. Compliance Department Updates

- Two-Year Work Plan
  - 55 reviews scheduled: 23 for FY21 and 22 for FY22.
    - FY21
      - 17% audits completed.
      - 26% audits in-process.
      - 57% audits 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.
  - Audit period: November 1, 2019 – January 31, 2020.
- Observation Stay/MOON/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.
- Focus Arrangements Review for CIA Year 5, Q2, completed
  - Objective is to ensure internal review and approval processes and procedures were properly followed.
  - Audit period: December 2019 – February 2020.
- Two-Midnight Rule Audit Lookback, 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 \$103,940.49 payback.
  - Lookback period was October 1, 2018 through December 31, 2018.
- BHIP/BHMC Coding Audit for FY20, in process
  - Objective is to review inpatient and outpatient coding to ensure it meets federal coding guidelines and Broward Health’s accuracy rate of 95%.
- Coding Review for stroke patients who underwent a mechanical thrombectomy (“coiling”) or received intravenous thrombolysis (IV) tissue-type plasminogen activator (tPA), in process

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

- Objective is to ensure the coding was accurate for patients that underwent a mechanical thrombectomy.
- Tracking and Remuneration Audit for Employed Physician Agreements, in process
  - Objective is to examine payments made during the review period and verify internal controls were effective and consistent with terms of agreement.
- Broward Health Medical Center's Institutional Review Board (IRB), in process
  - The objective of the review is to determine if BHMC's Institutional Review Board is following the requirements under:
    - Code of Federal Regulations, subchapter part 56 Institutional Review Boards.
    - Centers for Medicare and Medicaid Services regulations.
    - Guidelines regarding the operations of an IRB.
  - Clinical trials ongoing.
- Focus Arrangements Review for CIA Year 5, Q3 and Q4, in process
  - Objective is to ensure internal review and approval processes and procedures were properly followed.
  - Audit period: March 1, 2020 through August 31, 2020.
- Education on Focus Arrangement Reviews
  - Mr. Kozik shared the process in detail, which included how a review period is selected and use of RAT-STATS software to randomly select 40 arrangements for examination.
  - Arrangements selected from four groupings:
    - Physician leadership and on-call.
    - Physician lease services.
    - Physician and resident employment.
    - Services non-physician and miscellaneous.
- Emergency Medical Treatment and Active Labor Act (EMTALA) Screening Examination, on hold
  - 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.
  - On hold due to pandemic.

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

- 21st Century CURE Act
  - Information Blocking Rule
    - Incentivizes you to deliver patient medical information to a patient at their request and in the format in which they prefer to receive it.
    - Broward Health is prepared for the rule when it goes into effect.
    - Rule was to take effect November 1, 2020; postponed until April 2021.
- 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.
  - Medical Center contested 35 of 36 accounts.
  - Auditor has submitted documentation to Centers for Medicare and Medicaid Services (CMS), and a response is pending.
- HIPAA Breaches
  - Impermissible disclosures of patient health information (PHI).
    - (1) Broward Health Corporate Central Billing Office.
- Cyber Attacks and Ransomware
  - Objective is to determine necessary actions in case of a cyber-attack.
  - Impact to health information systems.
  - Table-top exercises to simulate attacks in planning stages.
- District-Wide Investigation Policy
  - Objective is to create a master policy for the District, allowing individual departments to have their own standard operating procedure (SOP) on how investigations are conducted internally.
  - Compliance, Legal, Risk, and Human Resource departments to develop a district-wide investigation policy. Each department will also have a department-level SOP.
  - Draft policy currently with the ECG group.
  - To be brought to the Compliance and Ethics Committee for approval.
- 340B Program External On-Site Audit
  - Objective is to provide external audit documentation as requested by the Health Resources and Services Administration (HRSA) auditor for integrity of the program. All sites are required to have an external audit of each 340B registered location.

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

- July 2019 – disclosed to HRSA that unqualified sites existed.
  - Submitted action plan.
  - Paid fees to vendors that received letters.
  - November 3, 2020 – received thank-you letter from HRSA for continuing to follow compliance requirements and that the case is now closed.
- Comprehensive Pharmacy Services to kick off on November 30, 2020:
  - Evaluate compliance and integrity.
  - Conduct mock HRSA audits.
  - Recommend best practices.
- Centers for Medicare and Medicaid Services (CMS) Audit of 20% Bonus for COVID-19 Inpatient Waivers
  - Objective is to complete CMS's first medical review of the 20% add-on payment for treating COVID-19 inpatient waivers.
  - Proactive steps: Health Information Management (HIM) directors to determine if Broward Health would pass an audit today. Each HIM director is auditing 25 cases for the period from April 1, 2020 through August 30, 2020 to ensure all guidelines were followed.
- Other Department Activities
  - Compliance and Ethics Week held November 2 through November 7, 2020.
  - New Compliance Council – first meeting scheduled for December 7, 2020. Thirty-two people from across Broward Health, clinical and non-clinical, applied to attend the council.
- Staffing
  - Restructured and promoted staff.
    - Lucia Pizano, promoted to Associate Vice President (AVP), Compliance.
    - Leslie Hernandez was promoted to Director, Privacy and Data Gathering.
    - Sophie Ulysse was promoted to Senior Privacy Specialist.
    - Changed the titles of the Regional Compliance Managers to Regional Compliance Officers and, now assigned individual Officers full-time to an entity as follows:
      - Joanne Beral was promoted to Regional Compliance Officer for Ambulatory, CDTC, and CHS.
      - Danielle Granger was promoted to Regional Compliance Officer for Broward Health Imperial Point.
      - Dan Villavisanis was promoted to Regional Compliance Officer for Broward Health Medical Center.
      - Mark Green was assigned as Regional Compliance Officer for Broward Health Coral Springs.

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

- Denna Nicolozakes remains the Regional Compliance Officer for Broward Health North.
- The Regional Compliance Officers report directly to Mr. Kozik.

6.1.2. **OIG/Fifth Annual Report Update** – presented by Brian Kozik, SVP, Chief Compliance and Privacy Officer

- Annual Report Committee meets biweekly.
- Annual report is in Legal review.
- Requested due date extension from OIG Monitor (November 4, 2020 to December 18, 2020) as a result of the IRO review being delayed (IRO Report/Transaction Review received November 15, 2020).
- Resolution FY21-07, Resolution Certifying Implementation of an Effective Compliance Program
  - The CIA requires a Board resolution regarding the operation of the compliance program and the Chief Compliance Officer.

6.1.3. **Compliance Education** – presented by Brian Kozik, SVP, Chief Compliance and Privacy Officer

Mr. Kozik shared an overview of the “Health Care Fraud and Abuse Control (HCFAC) Program Report” issued annually by the Department of Health and Human Services-Office of Inspector General (OIG) and the Department of Justice (DOJ).

## 7. **ADJOURNMENT**

There being no further business on the agenda, the Chair adjourned the meeting at 11:53 a.m.

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