

# ***Compliance and Ethics Committee Meeting Chief Compliance Officer Report***

**Deborah Hall**

*Chief Internal Audit*

*Interim Chief Compliance & Privacy Officer*

*January 25, 2023*

# COMPLIANCE REPORT AGENDA

- Corporate Compliance Update
- Privacy Update
- Compliance, Privacy, FY 23 Work Plans

# ***Corporate Compliance Update***

# FY22 COMPLIANCE AUDIT UPDATE

## **Closed Audits:**

Referral Source Arrangements & Tracking Remuneration

EMTALA – All Facilities (4)

Hospital General Consent – All Facilities (4)

Covered Persons Screening

Physician Compensation

Tracking Remuneration: Medical Directorship Audit

Coding FY21-Q1 - BHCS

Coding FY21-Q1 - BHN

Coding FY21-Q2 - BHIP

Coding FY21-Q2 - BHMC

Coding FY21-Q3 - BHCS

Coding FY21-Q3 - BHN

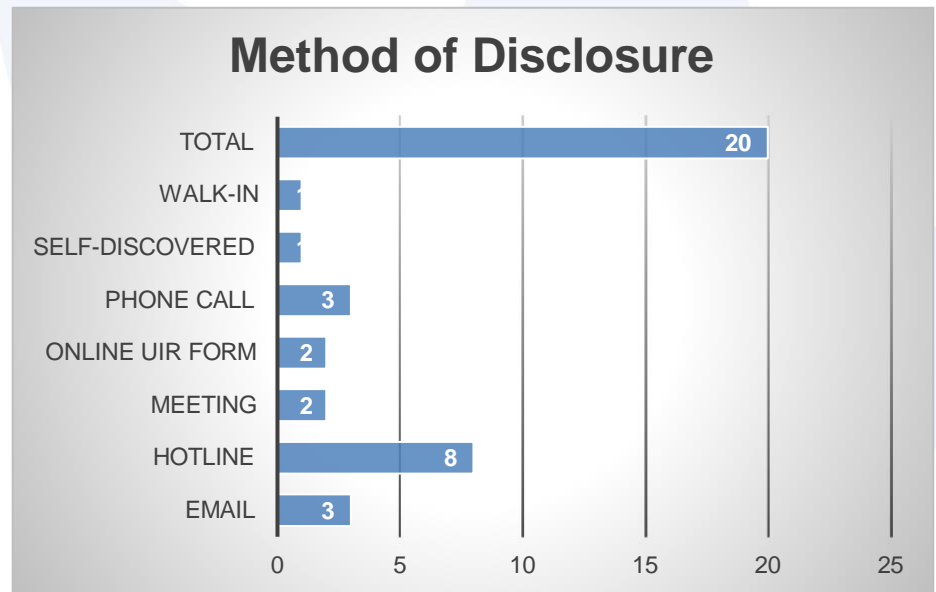
Coding FY21-Q4 - BHIP

Coding FY21-Q4 - BHMC

# OPEN INCIDENTS

*as of 12/06/2022*

Category	Activity Total
Billing	1
Conflict of Interest	1
Customer Satisfaction/Grievance	2
Documentation	1
Environment of Care/Workspace	4
HIPAA Privacy	4
Patient Safety	2
Physician Agreements	1
Policy Procedure	2
Retaliation	1
Safety	1
<b>Total</b>	<b>20</b>



# ANNUAL CONFLICT OF INTEREST ASSESSMENT

## COI Completion

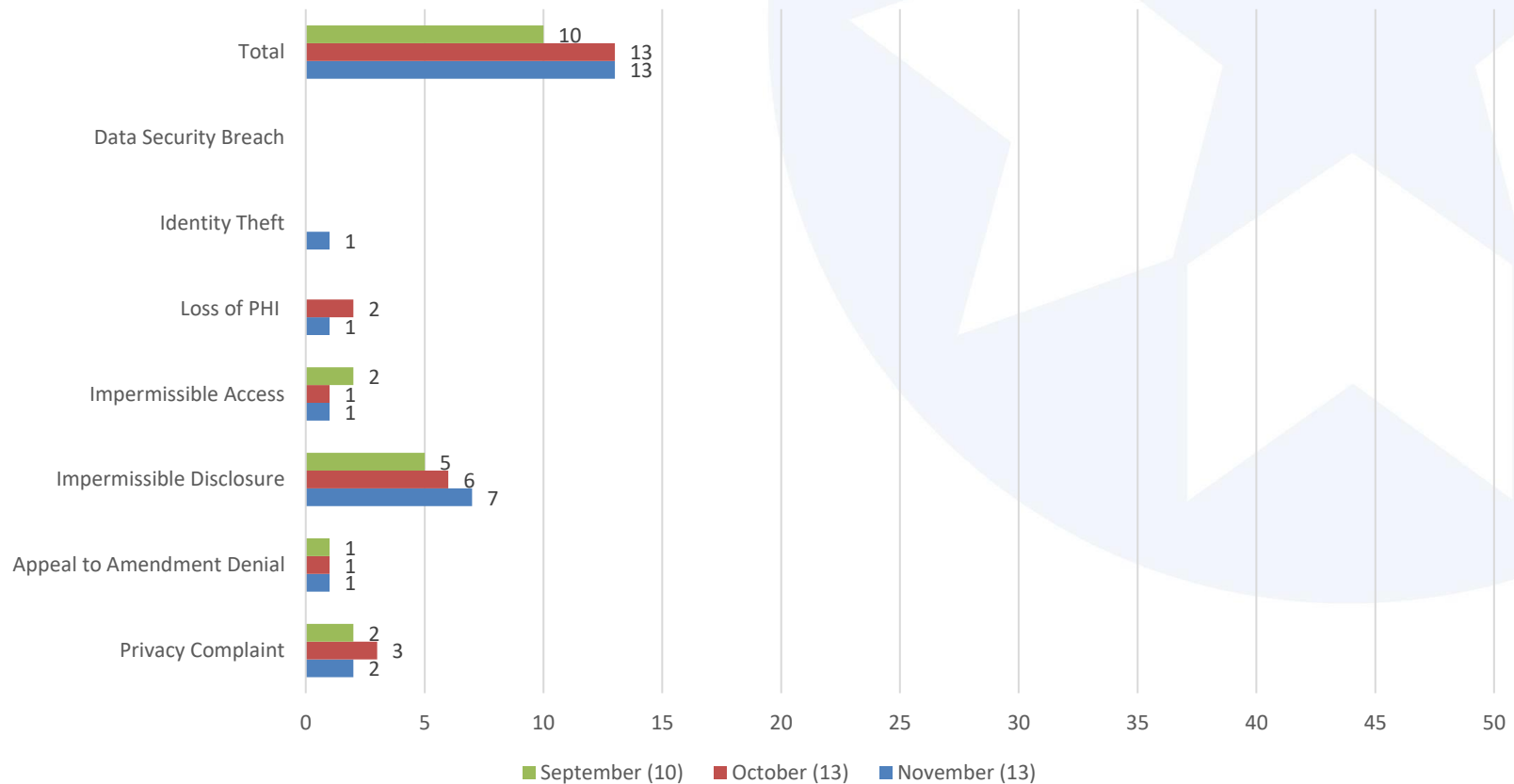
	Completed	Total
<u>Boards</u>	35	54
<u>Key Medical Staff</u>	160	283
<u>Key Employees</u>	524	604
<b>Total</b>	<b>719</b>	<b>941</b>

## Pending Management Plan

Total	
Disclosure under Review	38
Pending Management Plan Completion	23
<b>Total</b>	<b>61</b>

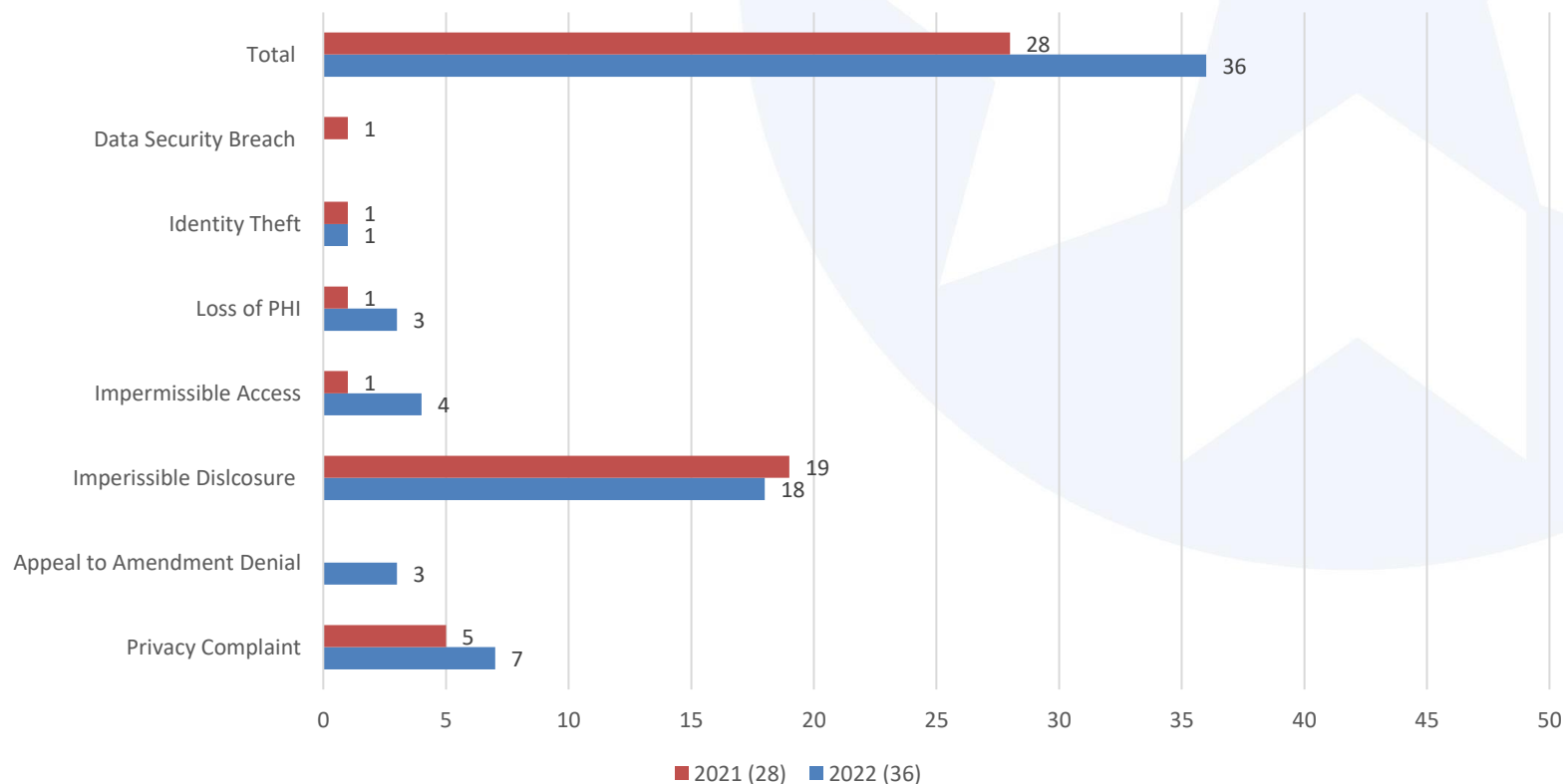
# ***Privacy Update***

# REPORTED PRIVACY INCIDENTS BY TYPE IN SEPTEMBER, OCTOBER, & NOVEMBER 2022





## REPORTED PRIVACY INCIDENTS BY TYPE: 2021 VS. 2022 (SEPTEMBER, OCTOBER, & NOVEMBER)



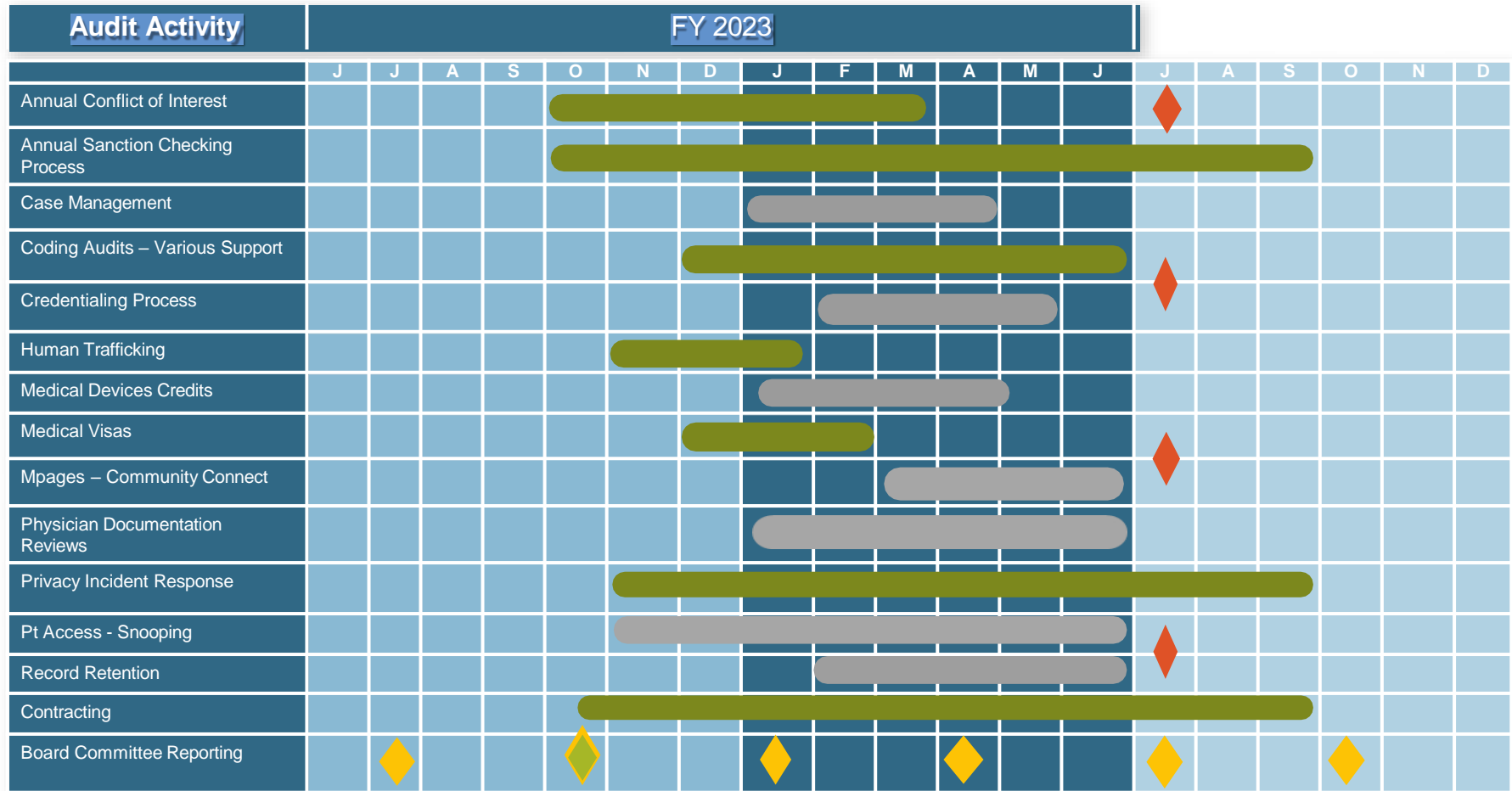
# PRIVACY INCIDENTS SUMMARY

## SEPTEMBER-NOVEMBER 2022

- There were a total of 36 investigations. 7 were substantiated, 26 unsubstantiated and 3 are in progress.
- The 7 confirmed breaches were 3 BHCS were impermissible disclosures (patient bill, collections letter, prescription). There were 3 Healthpoint: 2 impermissible disclosures (prescriptions) and 1 patient ID error.
- There was 1 substantiated at BHMC for impermissible disclosure related to prescription.

# ***Corporate Compliance Annual Work Plan FY23***

# CORPORATE COMPLIANCE WORK PLAN STATUS FY23



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Corporate Compliance  
& Ethics Department