

# UConn HEALTH

**POLICY NUMBER 2009-04**

**June 9, 2015**

## **POLICY: EXTERNAL INVESTIGATIONS, INSPECTIONS AND REQUESTS FOR INFORMATION**

**Background and Reasons for the Policy:** External audits and agency reviews of UConn Health are performed by representatives of federal, state, or local governments, or other entities (“external agencies”). External agency personnel may visit or otherwise contact UConn Health personnel to perform investigations, inspections or other data collections. Such external processes should be coordinated and communicated. Any questions regarding this policy should be directed to the Office of Audit, Compliance and Ethics (OACE) at 860-679-4180.

**Applicability of Policy:** This policy applies to all faculty, staff, administrators, students and volunteers. Residents and fellows are required to follow the “Critical Incident Policy” which can be found in the resident’s handbook: <http://gme.uhc.edu/current/policybook.html>

This policy does not apply to routine planned audits or accreditation/licensure reviews that are coordinated with an external agency. However, the Office of the Assistant Attorney General (AAG) and/or Senior Counsel for Health Affairs and OACE should be informed of these planned reviews.

**Policy:** It is the policy of UConn Health to comply fully with all financial, administrative, and audit requirements that arise from its role as a recipient of public and other extramural funds, and to cooperate fully with external auditors or other agency officials conducting external investigations or requesting UConn Health information. All external audit activity or requests for information pursuant to a regulatory review will be reviewed for proper authorization and tracked and communicated internally. Required responses to audit findings will be coordinated with and communicated to management and external agencies. All faculty, staff, administrators, volunteers, and students have the responsibility to cooperate with external investigations or audits but may not consent to provide information or cooperate with such reviews without obtaining approval through either the Assistant Attorney General (AAG) or Senior Counsel for Health Affairs (the AAG should be the first call). Individuals must not obstruct or impede an investigation or audit in any way. The following procedures are meant to guide individuals in responding to requests by external investigators or auditors.

**Procedures: The following steps must be considered in total when determining the responsibilities and actions in response to audits, investigations, and regulatory reviews:**

- Any UConn Health faculty, staff, administrator, volunteer, or student contacted by an external investigator should immediately refer the investigator to the AAG and should provide the AAG with information regarding the external investigator's name, government affiliation, stated purpose of the visit (if provided) and planned arrival time or nature of requested information. Individuals may contact the UConn Health Operator at 860-679-2000 to contact the AAG. If the AAG is not available, request that Senior Counsel for Health Affairs be contacted.
- The AAG and/or Senior Counsel for Health Affairs will advise how to proceed and coordinate with management the UConn Health response, including designating an individual to act as liaison for the external audit activity or information request.
- Once the referral to UConn Health legal counsel is completed, the individual should inform their supervisor and/or on-call administrator, unless legal counsel determines there are legal reasons for not doing so. The supervisor and/or on-call administrator should in turn immediately provide this information to his or her department or division head.
- The Office of Audit, Compliance and Ethics (OACE) will be notified of all external investigations or audits, unless legal counsel determines there are legal reasons for not doing so.
- Legal counsel, through or together with the appropriate executive leaders (or OACE where appropriate) will coordinate the disclosure of documents and other information. This may include payment and claims information, patient charts, remittance advice, correspondence, transactional documents, policy and procedures, etc.
- Individuals are not authorized to give the organization's documents to government investigators without approval through the appropriate administrative channels. Many such documents may be protected by HIPAA, FERPA or other privacy statutes and require redaction.
- Individuals must not change, move, alter, or destroy any records, including paper, tape, and electronic records that are the subject of any government investigation.
- A representative from UConn Health legal counsel shall be notified of all scheduled government interviews and searches.

Andrew Agwunobi (Signed)

7/23/15

---

**Andrew Agwunobi, M.D., M.B.A.**  
**Interim Executive Vice President for Health Affairs**

---

**Date**

**New Policy: 10/16/09**

**Revised: 6/9/15**