



Administrative Policy

2023-08 Healthcare Compliance & Privacy Program – Monitoring and Auditing

Title	Healthcare Compliance & Privacy Program – Monitoring and Auditing
Policy Owner and Contact Information	Office of Healthcare Compliance & Privacy Phone: 860-679-6060 Email: ohcp@uchc.edu Home Office of Healthcare Compliance & Privacy
Campus Applicability	All UConn Health campuses, including John Dempsey Hospital
Applies to	UConn Health Workforce Members
Effective Date	October 3, 2023

PURPOSE:

This document outlines the Office of Healthcare Compliance & Privacy’s monitoring and auditing activities designed to identify non-compliance with the Healthcare Compliance & Privacy Program (the “Program”) related policies and requirements.

POLICY STATEMENT:

1. Monitoring

- 1.1. The Office of Healthcare Compliance & Privacy (OHCP) shall establish monitoring activities for Program-related risk areas identified through a Compliance and Privacy Risk Assessment, investigations, complaints, reports, enforcement agency targets, and industry trends, among others.
- 1.2. The OHCP shall design Program-related monitoring plans intended to:
 - (a) Identify and prevent criminal and unethical conduct;
 - (b) Improve information privacy and security in healthcare and related functions;
 - (c) Improve policy and procedure compliance;
 - (d) Detect and report errors early to minimize loss to the government from false claims and to reduce the risk of civil damages and penalties, criminal sanctions, and administrative remedies, such as exclusion from federal or state-funded healthcare programs.
- 1.3. The OHCP shall participate in committees and workgroups that routinely review matters related to the Program, including those that hold operational discussions pertaining to the identified risks, activities, and any corresponding corrective actions monitored or otherwise reviewed by the OHCP. The OHCP may participate in any committee or workgroup in an invitee or ad hoc role. Expected OHCP committee participation includes but is not limited to:
 - (a) University of Connecticut Board of Trustees’ and University of Connecticut Health Center Board of Directors’ Joint Audit and Compliance Committee;
 - (b) UConn Health Board of Directors;

- (c) University of Connecticut: Healthcare Compliance & Privacy Committee;
- (d) University of Connecticut: Compliance and Ethics Committee;
- (e) University of Connecticut: Identity Theft Prevention Program Committee;
- (f) UConn Health: Government Payment Oversight Committee;
- (g) UConn Health: Clinical Conflicts of Interest Committee;
- (h) UConn Health: Information Security and Privacy Governance Committee;
- (i) UConn Health: 340B Oversight Committee;
- (j) UConn Health: Health Information Management (HIM) Committee;

2. Auditing

- 2.1 The OHCP shall develop an annual work plan that considers the Compliance and Privacy Risk Assessment, the US Department of Health and Human Services Office of Inspector General's (OIG) work plan, other enforcement agency targets, internal reports and findings, and industry trends. The annual work plan shall outline priorities and tasks expected to be completed by the OHCP, including Program-related audits.
- 2.2 Regarding Program-related government audits, including from the Recovery Audit Contractor (RAC), Certified Error Rate Testing (CERT), Medicare Audit Contractor (MAC), and Quality Improvement Organization (QIO) audit programs, the OHCP shall participate in oversight of tracking requests, monitoring timeliness of record submissions, tracking submissions and appeals, reviewing and analyzing findings, and reporting out on overall outcomes including patterns, trends, and significant findings, as applicable to each program.

3. Follow-Up

The OHCP shall take and/or recommend action for potential violations or improvement opportunities identified through monitoring or auditing. Such actions may include investigation, sanction or corrective action recommendations, policy revision, or other actions and shall be taken and/or recommended according to applicable policies.

4. Reporting

The OHCP shall report trends, activity progress, and findings to appropriate oversight and/or stakeholder committees, as applicable.

DEFINITIONS:

Auditing: Formally reviewing compliance with internal and/or external standards.

Monitoring: Ongoing review of routine operations to test compliance with internal and/or external standards.

Workforce Member: Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for UConn Health, is under the direct control of UConn Health, whether or not they are paid by UConn Health.

REFERENCES:

OIG Supplemental Compliance Program Guidance for Hospitals, Vol 70, 4858 FR, No. 19 (Jan. 31, 2005).
 Publication of the OIG Compliance Program Guidance for Hospitals, Vol. 63, 8987 FR, No. 35 (Feb. 23, 1998)

Office of Inspector General Work Plan: www.oig.hhs.gov/reports-and-publications/workplan/index.asp

Recovery Audit Contractor: www.cms.gov/research-statistics-data-and-systems/monitoring-programs/medicare-ffs-compliance-programs/recovery-audit-program

Comprehensive Error Rate Testing: www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Improper-Payment-Measurement-Programs/CERT

Quality Improvement Organization: www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityImprovementOrgs

PROCEDURES/FORMS:

None

RELATED POLICIES:

2023-10 Healthcare Compliance & Privacy Program – Oversight and Enforcement
Healthcare Compliance & Privacy Program

ENFORCEMENT:

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

APPROVAL:

Bruce Liang (Signed)
Bruce Liang, MD, FACC
Interim Chief Executive Officer, UConn Health
Executive Vice President for Health Affairs

10/3/2023
Date

Elle Box (Signed)
Elle Box
Chief Healthcare Compliance & Privacy Officer
Administrative Policy Committee Co-Chair

10/2/2023
Date

Janel Simpson (Signed)
Janel Simpson
Chief Administrative Officer
Administrative Policy Committee Co-Chair

10/2/2023
Date

POLICY HISTORY:

New Policy Approved: 10/23

Revisions:

Reviewed Without Changes: