OCPA Overview

OCPA implements ongoing efforts to improve and mitigate risks to the San Francisco Department of Public Health, and educates workforce members on how to work with integrity and adhere to regulatory requirements. OCPA’s main areas of responsibility are:

- Compliance – including claims accuracy, provision of covered services, coding, preventing fraud, waste, and abuse, use of federal funds (research grants and other contracts)
- Privacy – HIPAA, HITEC, and State privacy laws
- Data Security – Agreements to legally share data
- Whistleblower Investigations – Controller’s Office, Hotline, direct complaints
Laws that Govern

False Claims (Federal and State)
Anti-kickback
Deficit Reduction Act
Affordable Care Act
HIPAA and CMIA
FY 18-19 Activities and Accomplishments

Developed New Interactive Privacy and Compliance Training Module

Increased Compliance Monitoring at ZSFG and LHH

Compliance Officer Hired for PHD

New Code of Conduct and Summary

Publication of Bi-monthly Compliance Matters
Compliance Program Overview

DPH Compliance Program helps DPH and its workforce conduct operations and activities ethically; with the highest level of integrity, and in compliance with legal and regulatory requirements.

The goal of the program is to practice and promote good behavior, and avoid conduct that may cause financial or reputational harm to DPH.

OCPA partners with department managers to identify and manage risks; provide education and training to staff and providers, and integrate compliance into the daily operations of DPH.
Elements of a compliance program

8 Elements

1. Standards of conduct and policy and procedure that addresses compliance and high risk areas
2. Designating high level individuals to manage day to day compliance operations; development of compliance committee
3. Conducting effective training and education
4. Developing effective lines of communication
5. Conducting internal monitoring and auditing
6. Enforcing standards through well publicized disciplinary standards
7. Responding promptly to detected offenses and taking corrective action
8. On-going monitoring of risk
Trends and Risk Areas

**Risk Areas to Watch**
- EPIC Implementation
- Quality of Care
- Coding and Documentation
- Exclusion Screening

**Decrease in Disallowances from Incorrect Claims**

<table>
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<tr>
<th>Year</th>
<th>Disallowance from External Audit (In Millions)</th>
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<tbody>
<tr>
<td>FY 16-17</td>
<td>6</td>
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<tr>
<td>FY 17-18</td>
<td>4</td>
</tr>
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<td>FY 18-19</td>
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Privacy Program Overview

The Privacy Program is intended to:

- Ensure the confidentiality, integrity, and availability of all Protected Health Information (PHI) that DPH creates, receives, maintains or transmits;
- Protect against any anticipated threats or hazards to the security or integrity of such information;
- Protect against improper disclosures; and
- Ensure compliance by its workforce.

OCPA works to engage and educate staff at all levels to protect patients’ privacy by providing practical tips on privacy protection.
Trends and Risk Areas

Risk Areas to Watch

EPIC Implementation

Handling of Paper Records

Improper Access

Increased Reporting of Privacy Incidents
Data Sharing

Overview

- Allows for Legal Sharing of PHI with Vendors/Partners
  - Established Agreements Related to Sharing PHI
  - Registers and Monitors Data Sharing Agreements
  - Assures Checks are Completed Before Sharing (Data Security, Privacy, Business Need)
  - Assists with Continuum of Care Allowing for Shared Data of Clients

Completed Agreements

<table>
<thead>
<tr>
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<th>FY 16-17</th>
<th>FY 17-18</th>
<th>FY 18-19</th>
</tr>
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<tbody>
<tr>
<td>Completed Data Sharing Agreements</td>
<td>60</td>
<td>80</td>
<td>50</td>
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Overview

- Investigate complaints related to:
  - Allegations of fraud, waste, and abuse;
  - Privacy Breaches;
  - Suspected violations of the DPH Code of Conduct, DPH policies, and Conflicts of Interest;
  - Theft or Misuse of DPH and/or City Resources;
  - Nepotism/Favoritism

- Maintain 24/7 toll-free Compliance and Privacy Hotline to provide a safe place for employees to report suspected violations
Moving Forward
FY 19-20 Planned Activities

• Develop DPH-wide Compliance Program
  • Establish Executive Level Compliance Committee
  • Hire Vacant LHH Compliance Officer
  • Expand Compliance Program to Primary Care

• Increased Monitoring for Unauthorized Access to Records
  • Monitoring Through EPIC Tools and Reports
  • Dedicated Staff to Audit and Monitor Access to Records
  • Develop Audit Tracer Protocol

• Increased Education and Outreach for Compliance and Privacy
  • Live Refresher Trainings
  • Targeted Topics to Known Risk Areas
Thank you!

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