

ZSFG CHIEF OF STAFF REPORT
Presented to the JCC-ZSFG on January 28, 2020
01/13/20 Leadership MEC and 01/16/20 Business MEC

ADMINISTRATIVE/LEAN MANAGEMENT/IMPROVEMENT WORK/EPIC STATUS:

EPIC Updates:

Thrive trainings: The network is launching enhanced/ followup training for Epic, starting with Providers and then quickly expanding to all staff. Flyers for 'Thrive trainings' were distributed to MEC leaders. It will be a mix of topics that came to the forefront of the training team's attention and will be offered as a series of drop in sessions by the Epic Training team. Also, trainers are available upon request to be scheduled to meet with departments for training on identified issues.

Update on Epic training for new members of the medical staff: DET manages a training schedule for onboarding of new members; most specialties have trainings 2x a month, although some trainings (with low numbers needing training) are only arranged on an ad-hoc basis. Another option: occasionally training can be done on a provider-to-provider basis on a pre-determined schedule – if the department has a "P2P" trainer who is available and willing to do this training.

Annual Learning:

Annual learning completion rates remain low for UCSF faculty and staff (50%). Because the platform has presented multiple challenges, we have not enacted suspensions as a mechanism to improve training rates; however, this is concerning given the importance of compliance to this requirement. Roger Mohamed from the Dean's office reported on the current issues. Regarding the problems with glitches in the modules that may have prevented timely completion in 2019, it was explained that some of the modules were produced by outside vendors and DPH is looking at the compatibility with DPH's system once it is produced. DPH and the Office of the Dean plans to send the new Privacy and Compliance module to some test users before it is launched. Work to boost 2019 module completion will be ongoing over the next 1-2 months.

The new annual learning period for 2020 will be launched in March, and the due date will be the end of September. The launch was pushed to March because one of the stakeholders that DPH-HR has to work with, the Controller's Office, is upgrading their system in mid-February. Also, there has been a separation between the annual learning piece from the Compliance and Privacy training piece, and the Dean's Office communicates in bulk to the UCSF users as one set of annual training that needs to be completed throughout the year. There is not a definitive date for the launch on Privacy training modules, but it should be around the same time as the annual training.

Federally Qualified Health Centers (FQHC) Overview:

The goal of the presentation was to update the members on ZSFG's ambulatory billing practices. An "FQHC" is a health center that serves a special medically underserved population; many of our clinics (both on campus and off) have this designation under the Homeless HRSA grant and in affiliation with the San Francisco Clinic Consortium. This system is regulated by the Bureau of PHC and the Centers for Medicare and Medicaid Service of the US DHHS and includes an enhanced payment rate for Medicaid services provided by ZSFG or CPC. The billing is provider dependent, meaning the billing under FQHC is tied to the providers who rendered the services. This includes physicians as well as many members of the affiliated staff (physician, PA, NP, CNM, clinical psychologist, licensed clinical social worker, or visiting nurse - licensed residents can bill with the FQHC program). Of note, it was explained that if a patient has two separate diagnoses/conditions, the hospital may bill for two visits in one day (otherwise, the FQHC rate is supposed to be comprehensive and cover all services rendered on that day.). When a patient has Medicare as their primary insurance, or when they are dual eligible (aka "medi-medi") the billing issues are more complex; evaluation and management (E&M) codes play a role in billing, unlike for MediCal-only patients. In the past, when Medicare patients had ambulatory visits, we billed the facility fee only and not the professional fee ("profee"). When we launched Epic, the decision was made to move ahead with profee billing in addition. Several clinical leaders at MEC had questions about continuing with this practice without appropriate training and oversight of our providers in E&M coding and (for the hospital clinics) for trainee oversight and attestation, and expressed interest in scheduling these trainings and better understanding current practice and current billing data. Susan Ehrlich suggested that an offline discussion among the Billing and Compliance departments and clinical/operational leaders, to

assure we are adhering to all necessary standards. MEC members expressed appreciation for the billing department's very useful presentation and willingness to partner on these issues.

Workplace violence

The workplace violence A3 was 'catchballed' in November and one of the commitments made was to create a forum to listen to staff and acknowledge profound issues. On January 29, staff will be leading a Townhall meeting at Noon, 5PM (Carr Aud), and 10 PM (Bld 25, 7th floor) for addressing exclusively 'workplace violence'. The theme will be trying to manage the issue system wide and, what it means to have zero tolerance at ZSFG, noting that 'compassionate care does not mean accepting abuse'. Also, identifying what some of the mistakes have been, how to be more proactive about the problem, and how to respond to them are included among the panel discussions. All were invited to attend one of the sessions.

CLINICAL SERVICE REPORT: None