



# SLU COMPLIANCE E-NEWS



OFFICE OF UNIVERSITY COMPLIANCE

## FOND FAREWELL

Anne K. Garcia, Sr. Associate General Counsel and Executive Director of Compliance

As many of you know, my last day of employment with Saint Louis University is January 4, 2016. I have accepted a job as the Senior Associate Vice President and Senior Associate General Counsel (following standard licensing procedures with the Ohio Bar) for the Health Sciences Campus and the Wexner Medical Center at The Ohio State University.

I am very excited about this new opportunity and my family is preparing for the relocation to Columbus. Along with this excitement

comes some sadness as I will miss many of my colleagues at SLU. Over the last 6 ½ years, I have been lucky enough to work with some of the best and brightest representing the University. The faculty and staff work hard every day to provide exceptional care to patients, protect the

University, and represent the best part of what it means to be a Billiken and a member of the St. Louis community. I am very thankful for my time at SLU and for the privilege to work with and learn from so many of you. After working over the last several years on the hospital transactions, I believe that SLUCare is well positioned to expand

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its care delivery across the St. Louis region and Southern Illinois. I will be looking on from Ohio, eager to see new facilities

on this campus that strengthen our faculty and staff’s ability to care for patients. However, even with new facilities, after working with all of you, I know that it is the people at Saint Louis University that make what we do special.

## MODIFIER 59

Distinct Procedural Service

When used appropriately, modifier 59 tells a payer that, due to special circumstances, two codes that are normally “bundled” (by either

National Correct Coding Initiative (NCCI edit) or CPT guidelines) should be paid separately. But because modifier 59 is such a powerful tool,

## Goodbye and Good Luck!

The New Year will bring new beginnings for two members of the Compliance Department. Anne Garcia will begin a bright new opportunity at The Ohio State University. Anne has been invaluable in helping to bring about our new partnership with SSM Health, bringing the costs of our medical malpractice insurance down, and integral in helping to bring compliance into the spotlight here at SLU and the department will strive to maintain the course she has set for us. We wish her much success and happiness in her new role.

Sydney Colyott has decided to pursue a career in nursing; she will begin the New Year in the classroom at SIUE. She has been an asset to the Compliance department and her outstanding organizational skills were vital in the new partnership with SSM Health. We wish Sydney the best of luck with her future education.

Both Anne and Sydney’s talents will be missed by Compliance. We wish them both the best of luck!

and because it may be applied to increase payments inappropriately, payers watch modifier 59 claims closely.

Modifier 59 is used appropriately for different anatomic sites during the same encounter only when procedures which are not ordinarily performed or encountered on the same day are

performed on different organs, or different anatomic regions, or in limited situations on different, non-contiguous lesions in different anatomic regions of the same organ. Modifier 59 should only be used to identify clearly independent services that represent significant departures from the usual situations described by

NCCI edit. The treatment of contiguous (sharing a common border; touching) structures in the same organ or anatomic site does not constitute treatment of different anatomic sites.

Below are a few examples of appropriate use of modifier 59:

**Example 1:**

Treatment of nail, nail bed, and adjacent soft tissue on the same toe or finger constitutes treatment of a single anatomic site:

CPT Code 11055 – Paring or cutting of benign hyperkeratotic lesion (corn or callus); single lesion

CPT Code 11720 – Debridement of nail(s) by any method(s); one to five

CPT codes 11720 and 11055 should not be reported together for services performed on the same toe. Modifier 59 should not be used if a nail is debrided on the same toe on which a hyperkeratotic lesion is pared. Modifier 59 may be reported with code 11720 if one to five nails are debrided and a hyperkeratotic lesion is pared on a toe other than one with debrided nail

**Example 2:**

Treatment of posterior segment structures in the eye constitutes treatment of a single anatomic site:

CPT Code 67210 – Destruction or localized lesion of retina (e.g., macular edema, tumors), 1 or more sessions; photocoagulation

CPT Code 67220 – Destruction of localized lesion of choroid (e.g., choroidal neovascularization); photocoagulation (e.g., laser), 1 or more sessions

CPT code 67220 should not be reported and modifier 59 should not be used if both procedures are performed during the same operative session because the retina and choroid are contiguous structures of the same organ

On January 1, 2015 CMS defined four new HCPCS modifiers to selectively identify subsets of Distinct Procedural Services (-59):

**XE** – “Separate Encounter, A service that is distinct because it occurred during a separate encounter” This modifier should only be used to describe separate encounters on the same date of service.

**XS** – “Separate Structure, A service that is distinct because it was performed on a separate organ/structure”

**XP** – “Separate Practitioner, A service that is distinct because it was performed by a different practitioner”

**XU** – “Unusual Non-Overlapping Service, The use of a service that is distinct because it does not overlap usual components of the main service”

More information will be provided on NCCI edits and modifier 59 at the Billers Meeting on January 12, 2016 which has been approved for 1.0 CEU (AAPC).

## EXPORT CONTROLS

Through Export Controls regulations the federal government restricts what information, technology and software can be shared with foreign nationals. One of the main areas of concern for SLU is foreign travel by faculty, staff and students. To verify compliance with this complex area of federal regulation, we are asking for international travelers to contact the Export Control Officer prior to any foreign travel. If you are traveling internationally for SLU business or taking SLU equipment, please contact the Export Control Officer Michael Reeves at [mreeves8@slu.edu](mailto:mreeves8@slu.edu) or 977-5880.

## AUTOMATED MONITORING OF EHR ACCESS

### Better Patient Care through Privacy

Patients expect healthcare providers to safeguard sensitive information about them and assure their confidentiality. While healthcare providers are expected to use and share information in the delivery of care, maintaining privacy is an important part of that process.

Saint Louis University recently invested in the acquisition of new monitoring technology, *FairWarning*, which allows greater visibility into the activities of its Electronic Health Record (EHR) system, Epic. This tool will allow automated monitoring of what information is accessed and by whom.

Use of clinical or billing systems access to gain access to patient information is only permitted for legitimate business reasons. Below are examples of inappropriate activities that will be monitored through the use of the new tool.

- Accessing other employees' medical records
- Accessing a family member's medical record
- Accessing a VIP or person of media attention's medical record

*Patient privacy is everyone's responsibility. Only access patient information for legitimate job-related reasons.*

## Coding Corner with Cindy

### Review of Systems (ROS)

Review of systems is an inventory of body systems obtained through a series of questions seeking to identify signs and/or symptoms which the patient may be experiencing or has experienced.

For purposes of ROS, the following systems are recognized:

- Constitutional symptoms (e.g., fever, weight loss)
- Eyes
- Ears, Nose, Mouth, Throat
- Cardiovascular
- Genitourinary
- Musculoskeletal
- Integumentary (skin and/or breast)
- Neurological
- Psychiatric
- Endocrine
- Hematologic/Lymphatic
- Allergic/Immunologic

**Problem Pertinent (1):** The patient's positive responses and pertinent negatives for the system related to the problem should be documented

**Extended (2-9):** The patient's positive responses and pertinent negatives for **two to nine systems** should be documented

**Complete (10 +): At least ten organ systems** must be reviewed. Those systems with positive or pertinent negative responses must be individually documented. For the remaining systems, a notation indicating all other systems are negative is permissible. In the absence of such notation, at least ten systems must be individually documented.

WPS states: For a comprehensive ROS, the physician must document the review of at least 10 organ systems. **The physician must document both the positive and the problem pertinent negative responses relating to the chief complaint.** Indicating the individual systems leaves no room for doubt as to the number of systems reviewed, **but "all other systems negative" is acceptable.**

Acceptable example:

The patient denies having a fever, chills, ear pain or a sore throat. She has had a productive cough for some time now, but denies SOB. She denies chest pain. Her appetite has been okay. She is voiding in normal amounts. All other systems were reviewed and negative. (Complete ROS)

Unacceptable example:

"10/14 negative unless otherwise stated" (The physician must document both the positive and the problem pertinent negative responses relating to the chief complaint).

## WHO'S IN THE



## DOG HOUSE?



On November 20, 2015, the Department of Justice announced that the University of Florida (UF) agreed to a \$19.875 million settlement related to a Department of Health & Human Service (HHS) Time and Effort Audit. HHS alleged misuse of grant funds by the University between 2005 and December 2010 by their overcharging the grants for salary costs of its employees. HHS claimed that UF "did not have documentation to support the level of effort claimed on grants. The government also contended that UF charged some of the grants for administrative costs for equipment and supplies when those items should not have been directly charged to the grants under federal regulations. Lastly, UF allegedly inflated costs charged to HHS grants awarded at its Jacksonville campus for services performed by an affiliated entity, Jacksonville Healthcare Inc." (DOJ News Release, 11/20/15)

The staggering amount of this settlement highlights the Effort Reporting risks relevant to Saint Louis University. The Office of Sponsored Programs Administration will provide Effort Training within your department upon request, and is available to respond to your questions about the manner in which our researchers document their level of effort claimed on grants. Please reach out to Assistant Director, Kathy Leiva-Rosario at 977-4219 or [leivarosario@slu.edu](mailto:leivarosario@slu.edu) with your questions.

## WHEN AN EXTERNAL INVESTIGATOR COMES KNOCKING

Federal regulators and research sponsors are devoting more resources to program integrity, which means you are more likely than ever to hear from an External Investigator. Investigators may arrive unannounced at the work place or home of University employees, although most audits will begin with a phone call or letter sent to the place of business. Here are a few steps you can take to reduce the stress of an external investigation and help to protect the University during the process.

If you receive a request for information or site visit:

- Immediately notify your supervisor and the Compliance Office (314) 977-5545;
- Ensure that the request has been formalized in writing on the entity's letterhead, and verify the investigator's name, agency affiliation and business telephone number;
- Identify the purpose for the investigator's request or visit, so that you have a clear understanding of each of their audit objectives;
- For requests for information by mail, try to meet the entity's requested deadline. If it is not reasonable, contact the investigator in a timely basis and request a reasonable extension; and
- Determine the level of access to Protected Health Information (PHI) they are requesting. Release of Information under HIPAA Security and Privacy is permissible when related to the treatment, payment or organizational needs of the University. Please keep our Privacy Officer, Ron Rawson, informed (314) 977-5884.

On the date of their site visit:

- Ask to see and make a photo copy of the investigator's agency identification card, and vouch it with the previously received written request;
- Escort the investigator to a sequestered conference room to await the arrival of your supervisor and/or Office of General Counsel (OGC) representative;
- Avoid engaging in unnecessary conversations with investigators, because what you say may be taken out of context in the future. Answer their questions about your record-keeping and supporting documents succinctly and truthfully, but avoid drawn-out conversations. If at any point you feel uncomfortable with the nature or direction of their questions, you may politely decline to answer these questions until an OGC representative arrives;
- Designate one person to deal with the investigators and their requests for records, so that you are certain that all records are handled in the same manner and all are returned intact;
- If there is a subpoena or warrant to be served, respectfully inform the investigator that University procedure for responding is to immediately involve supervisory personnel and General Counsel; and
- In all instances, be polite and courteous. Do not attempt to impede the investigator.

If contacted at home:

- Inform the investigator that you would be happy to conduct the interview during work hours with SLU OGC personnel present.

Your supervisor and the Compliance Office and/or Office of General Counsel will assist in securing the necessary information once the legitimacy of an External Investigation request is verified and evaluated. Investigations are stressful, so please involve the Compliance Office and the OGC early on so that we can help reduce your burden during the process.



### 2016 Biller's Meeting Schedule

*All meeting will be from 10:00-11:00am*

January 12, 2016--LRC Auditorium C

February 9, 2016--LRC Rm 112/113

March 8, 2016--LRC Auditorium C

April 12, 2016--LRC Auditorium C

May 10, 2016--LRC Auditorium C

June 14, 2016--LRC Auditorium C