Please join us in welcoming the new Vice President for University Compliance and Ethics. Saint Louis University has appointed Jessica M. Evenson as Vice President for University Compliance and Ethics, a newly established role that will serve as the primary architect and steward of enterprise-wide compliance initiatives at SLU. Her appointment was effective February 20, 2019.

Ms Evenson has more than 20 years of experience in higher education, most recently at the University of Minnesota Twin Cities as the director of compliance. In that role, she led the strategic direction and operations of the compliance program to include campus-wide risk assessments, policy development and oversight, budget management, staff supervision and hotline investigations.

The Vice President of Compliance & Ethics will report jointly to the Board and to the President — will lead SLU in identifying and managing legal and reputational risk, and in advancing a culture of ethical conduct throughout the University.

For more detailed information about Jessica and the role of the Vice President of Compliance & Ethics, please see the announcement published in Newslink on February 20, 2019. https://www.slu.edu/news/2019/february/vp-compliance-evenson-appointment.php

Do you have a Coding Question?
SLUCare has a new coding help line! Call or email the coding specialists at 314-977-6323 or email medicalcoding@health.slu.edu

Welcome New Employees!
All new employees of SLU, SOM, CADE, & DCHS are required to complete compliance training within 45 days of their start date. The module NEWEMPCUFY2019 can be found on the “Compliance Requirements” section of your mySLU Home page.

Current employees should check their compliance requirements on a regular basis.

CMS Training Summer of 2019:
Annual Compliance Update for FY2020 will launch in July of 2019, (this is a month earlier than in the past). We anticipate that this earlier launch date will eliminate redundant training requirements. Employees and volunteers of the School of Medicine, CADE, and Doisy College of Health Sciences will once again be expected to complete the training as required by federal regulations. Further information will be forthcoming via eblasts.

Did You Know?
The Saint Louis University Office of Compliance and Ethics has a hotline available and answered 24/7? Caller/Reporter may remain anonymous. Please call 877-525-KNOW (5669) if you wish to report any compliance concerns. Callers are protected by the University’s Whistleblower policy.
CMS Reduces Documentation Requirements!!

Summary CMS 2019 Documentation Changes

In January 2019, CMS released new direction in regards to reducing the documentation burden of providers. Otherwise known as the “Patients Over Paperwork” initiative. Please see the text below. It clarifies the changes regarding E/M visit documentation changes.

What parts of the history can be documented by ancillary staff starting in Calendar Year 2019?

The CMS CY 2019 PFS final rule broadened current policy for office/outpatient E/M visits starting January 1, 2019 to provide that any part of the chief complaint (CC) or history that is recorded in the medical record by ancillary staff does not need to be re-documented by the billing provider. Instead, when the information is already documented, the billing provider can review the information, update or supplement it as necessary, and indicate in the medical record that he or she has done so. This applies to the chief complaint (CC) and History of Present Illness (HPI), Past Family Social History (PFSH), or Review of Systems (ROS)) for new and established office/outpatient E/M visits. To clarify terminology, we are using the term “history” broadly in the same way that the 1995 and 1997 E/M documentation guidelines use this term in describing the CC, ROS and PFSH as “components of history that can be listed separately or included in the description of HPI.”

As always, if you have questions regarding this CMS guidance, please reach out to Mickey Coriell, CPC, CPMA of the Compliance Department or your coders and billers. All are happy to answer any of your questions.

Providers may choose to develop a dot phrase or templated statement to expedite their documentation.

For example: .agree

Example: “I reviewed the chief complaint, history of present illness, past, family & social history, review of systems documented by support staff. My amendments, if any, to their documentation is: _____.

Reminder:

A reminder to departments who are hosting foreign visitors, including foreign scholars, Saint Louis University requires all visitors to be screened by the Export Control Officer prior to their work commencing at SLU. This is particularly important for visitors with access to labs, University data, and/or controlled or restricted spaces. For questions, comments, or concerns, please contact the Chief Policy and Export Control Officer Michael Reeves, Ph.D. @ michael.reeves@health.slu.edu or 977-5880.
Should I Disclose the FOOD I receive when Speaking for a Company?

In-Kind gifts of food and drink should be recorded within the Outside Interest Disclosure (OID). The University’s Policy on Medical Center Conflicts of Interest in Patient Care and Service discourages the receipt of gifts because they can unduly influence providers’ prescribing patterns. However, the policy acknowledges that gifts of food can enable essential meetings and motivate attendance at valuable education sessions. As the classic grandmother caricature declares, “You need to eat,” to which the Compliance Office adds in, “You need to disclose it.”

The online system, called InfoEd, is the preferred way to enter one’s industry relationships. The current OID was launched on October 31, 2018, and was requested from every University healthcare provider and School of Medicine administrator. Following are guidelines on how you would update your current disclosure to record a recent meal provided by an industry sponsor.

1- InfoEd disclosure
Login with your SLU username and password at https://slu.infoedglobal.com. Or you can go to mySLU tools and choose InfoEd. On the home screen, you’ll select a button that reads "Recertify/Update Disclosure".

2- Answer the screening questions & identify all external entity relationships. Estimates of food amounts can be included in Question #2, “Have you or your immediate family received or expect to receive any gifts, promotional items, favors, or transfers of value from an Outside Entity?”
You do this by hovering over the grey word “Screening Questions” along the top title bar. Respond YES to Question 2.

3- Add the new entity, “Test Sponsor”
Use the function "Add/Locate Entities". Enter “Test” in the search box. Once you select “Test Sponsor” from the drop down box, hit the "Add" button. You should now see Test Sponsor in the list of Entities with whom you have a relationship.

4- Add the Gift
In Question #3, identify the nature of the gift by selecting the “Other” box & including a description such as “Guest at company-sponsored dinner on January ##, 2019”. All questions with a red asterisk (*) merit a response, but the key component for Food will be question #3. Question #5 asks for dollar amounts, where we ask that you estimate the value of the meal & likely enter $0-$4,999.

5- Submit the disclosure
Confirm that each section of your disclosure has a Green Check Mark next to it, signifying completion. If not, return to the sections by clicking on them. The section may be incomplete or the “Complete” box in the top right-hand corner may not be checked. Once each section has a green check mark, click the Submit button on the "Additional Information" page.

InfoEd also collects meal information through the Edit/Submit Travel button found on the home screen. If you receive meals alongside airfare, lodging or other travel expenses, you are welcome to bundle it all together in an “Estimated Value of Travel.” We do not expect precision in your estimates and understand that the sponsor rarely communicates the value of the food and travel “gifts” they are bestowing. We ask that you disclose the entity and a reasonable estimate or range (>$1000 -or- $2,000-$5,000) along with the dates and location of travel.

Please send your questions about disclosing relationships with outside entities and the InfoEd system to InfoEdHelp@slu.edu or call the Compliance Office 977-5545.
The United States has partially intervened in a lawsuit under the False Claims Act against Wheeling Hospital Inc. (Wheeling), R & V Associates Ltd. (R & V), and Ronald Violi in the U.S. District Court for the Western District of Pennsylvania, the Department of Justice announced today. The government intervened with respect to allegations that Wheeling, which is located in Wheeling, WV, violated the Stark Law and Anti-Kickback Statute, and that those violations were caused by R & V, Wheeling’s contracted management consultant, and Violi, Wheeling’s CEO.

The Stark Law prohibits a hospital from billing Medicare for services referred by physicians that have an improper financial relationship with the hospital. The Anti-Kickback Statute, in relevant part, prohibits offering or paying anything of value to encourage the referral of items or services covered by federal healthcare programs. The United States alleges that Wheeling’s compensation to a number of employed and contracted physicians violated these statutory prohibitions because that compensation was based on the volume or value of the physicians’ referrals or was above fair market value.

“Improper financial arrangements between hospitals and physicians threaten patient safety because they can influence the type and amount of health care that is provided,” said Assistant Attorney General Jody Hunt of the Department of Justice’s Civil Division. “The department is committed to taking action to eliminate improper inducements that can corrupt the integrity of physician decision-making.”

“By bringing allegations of fraud to light, whistleblowers play an important role in protecting the integrity of our healthcare system.” said Scott W. Brady, U.S. Attorney for the Western District of Pennsylvania.

The lawsuit was initially filed in December 2017 by Louis Longo, who was previously employed as Wheeling’s Executive Vice President, under the whistleblower provisions of the False Claims Act. Those provisions authorize private parties to sue on behalf of the United States for false claims and share in any recovery. The Act permits the United States to intervene and take over the lawsuit, as it has done here in part. Those who violate the Act are subject to treble damages and applicable penalties.

The government’s intervention in this matter illustrates the government’s emphasis on combating healthcare fraud. One of the most powerful tools in this effort is the False Claims Act. Tips and complaints from all sources about potential fraud, waste, abuse, and mismanagement, can be reported to the Department of Health and Human Services, at 800-HHS-TIPS (800-447-8477).

This matter was investigated by the Civil Division’s Commercial Litigation Branch, the U.S. Attorneys’ Office for the Western District of Pennsylvania, and the U.S. Department of Health and Human Services Office of Inspector General.

The case is captioned United States of America ex rel. Louis Longo v. Wheeling Hospital, Inc. et al., No. 17-cv-1654 (W.D. Pa.). The claims asserted against defendants are allegations only and there has been no determination of liability.
Protecting PHI: Electronic, Written, and Oral

Inappropriate Access of Electronic Patient Files

- **Coworker snooping** - Reviewing records out of curiosity, as a favor or other non-sanctioned use
- **Household snooping** - Reviewing records of family members, relatives or roommates
- **Accessing your own record** - Access to patient records is only permitted for legitimate job related activity. (Individuals may access their own health information with a personal MyChart account or by contacting Health Information Management.)
- **Any non-work related access** - Reviewing records of friends, celebrities or others without a genuine job related reason

The Electronic Health Record is actively monitored to assure individuals are accessing records for appropriate reasons. Violations of access are subject to sanctions in accordance with University policy.

Paper Medical Records Mishandling

- **After Visit Summary (AVS)** - Verify that each page of the AVS belongs to the recipient
- **Faxing of patient information** - Verify that the fax number is correct and make sure to include a required cover page. (For a misdirected fax, obtain confirmation from the recipient of appropriate destruction or return of the document)
- **Release of Information (ROI)** - Patient requests for medical records should be routed to Health Information Management (HIM) 977-6017.
- **Immunization record** - Clinics may release directly to patient or patient representative

Any unattended medical documents with patient information should be appropriately shredded or secured.

Employees Verbally Disclosing Information

*Individuals need to be mindful of their environment*

- Avoid discussing patient information in public spaces
- Obtain patient permission before discussing patient information in front of visitors
- Always verify identity of caller before sharing patient information by phone

When to Call the Office of General Counsel:

- For an adverse incident with significant harm, a significant unexplained complication, an unanticipated or unexplained death, or a retained object call 977-8778.
- If an attorney calls call 977-5767.
- Before accepting a request to serve as a medical expert witness call 977-5767.
- If a process server attempts to serve papers (e.g., subpoena or summons) on you call 977-5767.
- If you are asked to provide a deposition call 977-5767.
- For assistance handling a difficult patient/family call 977-5767.