

# Saint Louis University Office of University Compliance Winter 2018 Newsletter

We have significantly updated the Physician Billing FAQs on the Compliance Website. <https://www.slu.edu/general-counsel/compliance/trainings.php>

The current Code of Ethical Conduct for Faculty can be found on the Compliance Office's web page. <https://www.slu.edu/general-counsel/compliance/> and then click on the Code of Ethical Conduct for Faculty link.

## Conflict of Interest

Again this year the University is using a disclosure system called InfoED for disclosure, review, and management of conflicts of interest (COIs). The Research Integrity Group and the Compliance Office have collaborated in designing the system to integrate three unique COI policies into a single disclosure, which launched in late October. We are working with administrative staff within the departments to ensure that all individuals submit their disclosure before the calendar year end.

*Q1: What is the purpose of SLU's policy on Medical Center COI in Patient Care & Svc?*

A1: The purpose of SLU's Policy on Medical Center COI in Patient Care and Service describes the necessity for reporting, tracking, and monitoring relationships between Medical Center personnel and Healthcare products companies in order to protect the learning environment and the patient-centeredness focus of all practitioners.

*Q2: Why does LCME Accreditation require COI policies?*

A2: LCME Accreditation Standards expect a medical school to have effective policies and procedures for board members, faculty members, and any other individuals who participate in decision-making affecting the medical education program to avoid the impact of conflicts of interest in the operation of the medical education program, its associated clinical facilities, and any related enterprises.

*Q3: Which University healthcare employees are covered by the Policy on Medical Center Conflicts of Interest in Patient Care and Service?*

A3: The policy applies to health professions faculty and clinical, educational and research support staff (including full time, part time, adjunct, volunteer); as well as health professions trainees at the undergraduate, graduate and post graduate level, (including fellows and residents); and Medical Center Administration.

Access the disclosure through the InfoEd icon at MySLU:Tools or <https://slu.infoedglobal.com> and email your COI questions to [InfoEdHelp@slu.edu](mailto:InfoEdHelp@slu.edu).

**Upcoming Billers' Meetings**  
**10:00-11:00am**  
**Law Clinic Annex, 321 Spring Ave**

**January 8, 2019**  
**February 12, 2019**  
**March 12, 2019**

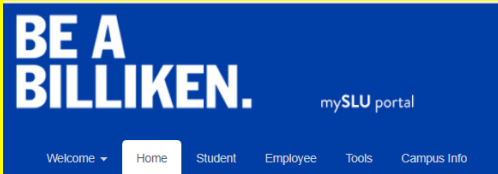
## Do you have a Coding Question?

SLUCare has a new coding help line! Call or email the coding specialists at 314-977-6323 or email [medicalcoding@health.slu.edu](mailto: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.



**Saint Louis University Compliance Toll Free 24/7 Hotline: 877-525-KNOW (5669)**

## Compliance & Coding

A core responsibility of providing medical care is to capture accurate and detailed documentation of the encounter in a timely manner. This can be complicated by the seemingly continuous stream of new billing and coding regulations and guidance documents. Following is a summary of the newest federal and institutional policy changes.

Split Shared Billing, aka Incident To Billing – Scenario in which an MD and a Non-Physician Provider (NPP) from the same provider group each perform individual E/M services for the same patient on the same calendar day. CMS previously allowed these visits to be combined and reported as a single service under the MD's identifier if certain criteria were met and appropriately documented. As of 9/15/2018, CMS will no longer allow inpatient split-shared billing. Furthermore, SLUCare recently revised our Billing and Reimbursement Compliance Policy to prohibit billing Incident To services in both ambulatory and in-patient settings. Our approach is to bill the encounter for the provider who administered the care according to the documentation. For example, in cases where a Nurse Practitioner and an Attending jointly see a patient, yet the NP authors the note, it will be billed under the NP's provider number. The practice encourages the NP to perform at the top of their license, which is an efficient use of their talents and credentials, as well as a means to satisfy third-party payers' expectations of the NP's value of extending healthcare services to our patients.

Copy-Paste Documentation – SLUCare recently revised our Billing and Reimbursement Compliance Policy to prohibit Copy, Paste, or Cloned documentation within the medical record. The CMS expectation is that the medical record must contain documentation showing the difference and the needs of the patient for each visit or encounter. It is unacceptable for multiple encounter notes within a patient's medical record to be identical except for the date of service, as the notes should reflect what actually occurred during each visit. There are infrequent times when copying forward information is efficient, for example, copying a medical device number, an extensive medication list, or a difficult spelling. To further support the need to copy forward information, the provider is encouraged to note, "I have copied Mr. Brown's medication list, reviewed and updated it. This list is accurate as of this visit."

Date of Service – SLUCare has recently adjusted the SmartText Attestation to include a reference to the date of service. This change is to avoid confusion in the frequent instances where a teaching physician documents at a later date than a resident or medical student, such as a subsequent morning. For payment, the composite of the teaching physician's entry and the resident's entry together must support the medical necessity of the billed service and the level of service billed by the teaching physician. To protect the integrity of the author's documentation and to prevent the charge from being unnecessarily down-coded or rendered unbillable, the text should now include an explicit date of service on every note.

### **System SmartPhrase Name: .ATTESTRESIDENTSLU**

"I have seen and examined the patient, and I agree with the findings and plan of care as documented by the resident.

Date of Service: \*\*\*

NOTE: If the teaching physician did not arrive at the same conclusion, they would be expected to adjust the Smart Phrase accordingly and document their determination.

Several SLUCare administrative teams strive to support you in satisfying your documentation responsibilities. Individuals from each of these offices are making progress on several Team 16 initiatives to standardize and simplify coding processes as we strive to achieve thorough documentation to satisfy "RIGHT CODING" appropriate for the excellent care we provide. Team 16's Project Manager, Kayla Hurley, welcomes your comments and suggestions on the matter. [Kayla.Hurley@health.slu.edu](mailto:Kayla.Hurley@health.slu.edu)

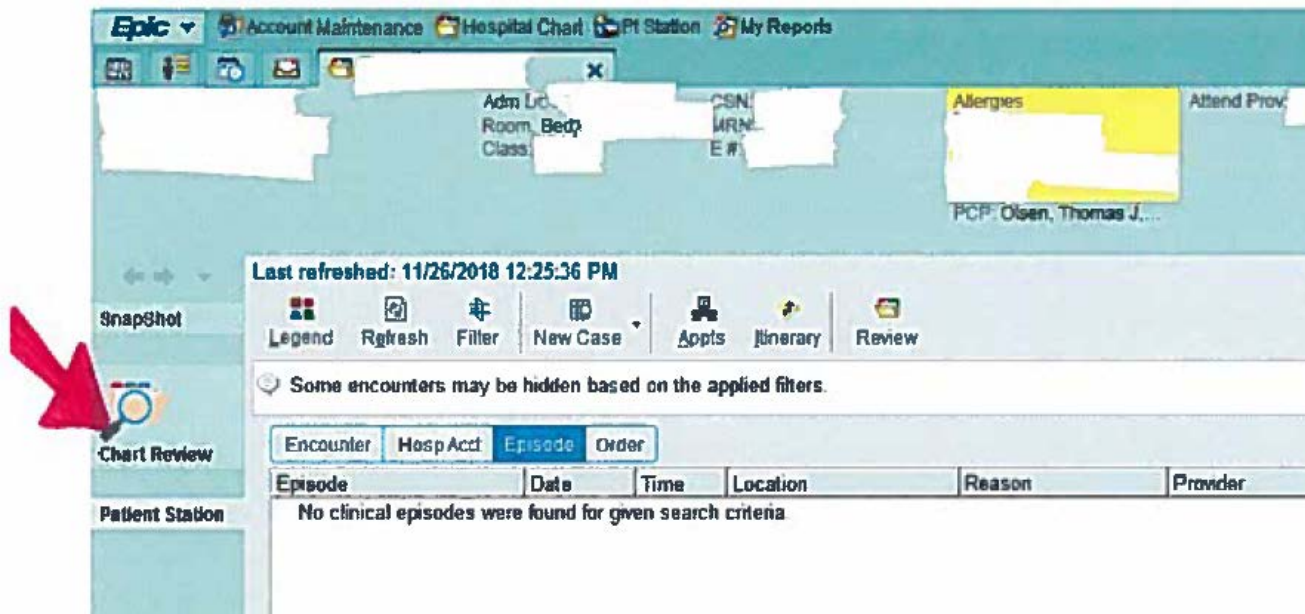
An exciting addition to real-time coding support includes the PMO's SLUCare Medical Coding Line. Coding specialists are available during traditional work hours to answer your questions "on the fly" and can be reached at 314-977-MDCD (6323) or [medicalcoding@health.slu.edu](mailto:medicalcoding@health.slu.edu).

### Auditing a record.

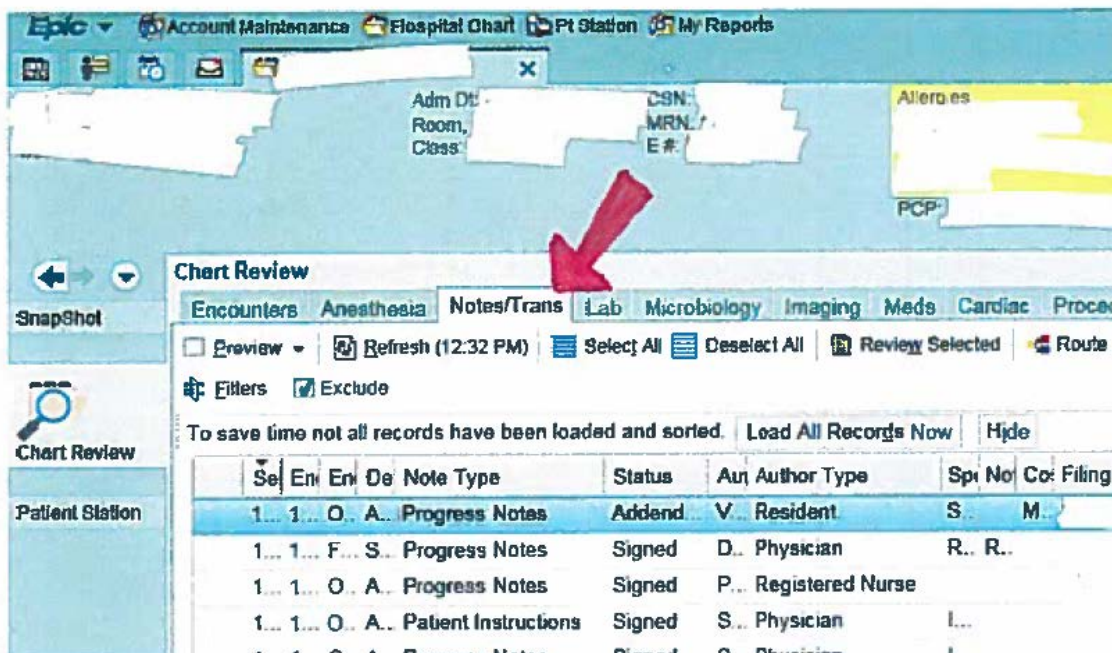
Have you ever wondered how a note is audited?

Many EPIC users are unaware that they are able to audit any note in EPIC. With just a couple of clicks, you can see who documented what, copied what, where, when and from whom. This information is available to anyone with EPIC access.

1. First pull up the patient record and click on Chart Review:



2. Click on the Notes tab:



## Auditing a Record, Continued

3. Open the note that you want to audit, click on the upper right Audit tool. You may choose to audit for manually entered documentation, templated documentation or copied documentation. Once you choose, you need to hover over the documentation.

In this example, this note was copied by a provider at 10/31/2018 @ 1:16 PM from a progress note of another provider from a year earlier.

The screenshot shows the 'Chen Review' interface for SLUCare Medical Group. The top navigation bar includes 'Encounters', 'Anesthesia', 'Notes/Trans', 'Lab', 'Microbiology', 'Imaging', 'Medis', 'Cardiac', 'Procedures', 'Other Orders', 'Episodes/Series', 'Mac Reports', 'Media', 'Letters', 'Referrals', 'Snapshot', and 'LDAs'. Below the navigation bar, there are buttons for 'Preview', 'Bethesda (12:32 PM)', 'Select All', 'Deselect All', 'Reverse Selected', 'Route', 'Bookmark', and 'Load Remaining'. A status bar indicates 'To save time not all records have been loaded and sorted. Load All Records Now Hide'. The main content area displays 'Progress Notes' for a patient. A filter menu is open, showing options for 'Manual', 'Template', and 'Copied' (which is selected). Below the filter, there is a checkbox for 'Hover for attribution information' and a 'Clear Filters' button. A tooltip is visible over the 'Copied' filter, displaying the text: 'Copied by [redacted] at 10/31/2018 1:16 PM from Progress Notes signed by [redacted] at 10/15/2017 6:37 AM'. The main text area shows a 'Chief Complaint' and a 'TREATMENT HISTORY' section with several lines of text, some of which are redacted. Two red arrows point to the filter menu and the tooltip.

This audit tool is used by the University auditor and coders when reviewing documentation.

SLUCare has recently updated their **Billing and Reimbursement Compliance Policy** to include the following direction:

5.2.4 Copy/Paste/Cloned Documentation - Inappropriate copying, pasting, cloning, template use or plagiarized notes are prohibited. Structured/templated notes and/or "dot phrases" may be used but should contain current, accurate information relevant to the patient's condition. The author of the note is responsible for the content and must confirm all information is updated, accurate and excludes unnecessary, redundant information. Copied information should be brief, relevant and medically necessary to the current encounter. Information that should never be copied: Signature blocks, information from one patient's chart into another patient's chart; or data that is copied and pasted from sources outside of the EHR.

Please refer to Policystat for the most recent "Billing and Reimbursement Compliance Policy" in its entirety. Guidance on using PolicyStat can be found on page 7 of this Newsletter.

## Seeking Family Medical Leave Act (FMLA) Information

As employees of Saint Louis University, our FMLA documentation is carefully managed and maintained by the Division of Human Resources (HR). Under this federal law, employers are allowed to request medical certification when employees request leave. The employer may request only the information available in the Department of Labor's (DOL) Medical Certification Statement (Form WH-380). The employer, through HR, may also contact the worker's health care provider, with the employee's permission, for clarification on the form.

The Department of Labor's form limits the employer's access to information from the health care provider to what is relevant to the employee's, or the employee's covered family member's, current serious health condition. This may include the following items:

- the medical facts that support the determination that the condition fulfills the FMLA's criteria of a serious medical condition;
- the date the medical condition began and the expected duration of the condition;
- whether leave will be intermittent, consecutive, or on a reduced leave schedule;
- the duration of the leave;
- if the serious medical condition is pregnancy or a chronic condition, whether the patient is presently incapacitated and the duration and frequency of episodes of incapacity; and
- if additional treatments are required, an estimate of the probable number of such treatments.

FMLA does not provide the employer with broad discretion to seek the release of information from the employee's health care provider. Under the statute, an employer may not acquire the employee's medical records or a summary medical report that contains any information beyond that set out in the DOL's sample certification form. If Saint Louis University determines it needs additional medical information regarding a SLU employee's FMLA covered leave, then a representative from HR will work with the employee to obtain it. Employers can avoid HIPAA privacy requirements by **getting the information directly from employees**, rather than accessing the health plan or the health care provider's files. It is never appropriate for a manager to reach out directly to a health care provider, even if that provider is also a University employee.

As health care providers, SLUCare Physician Group and the Center for Advanced Dental Education should avoid privacy concerns related to FMLA **by presenting information directly to the patient** and request that the patient be responsible for presenting it to their employer. The security of the patient's protected health information is a primary concern, and the only way to ensure absolute secure "release of information" is to provide it directly and exclusively to the patient.

The Department of Labor's FMLA website contains many frequently asked questions: <https://www.dol.gov/whd/fmla/fmla-fags.htm>. The University's Privacy Officer, Ron Rawson, welcomes your questions at 977-5545, as does our HR Consultant, Gillian Boscan at 977-7263.



## OIG Excludes Company and Owner from Federal Health Care Programs

Contact:  
HHS OIG Media Communications  
[Media@OIG.HHS.GOV](mailto:Media@OIG.HHS.GOV)

### 15-Year Exclusion is A Reminder to Industry

Washington, DC - On August 17, 2018, Administrative Law Judge (ALJ) Bill Thomas upheld OIG's 15-year exclusion of Karim Maghareh, Ph.D. and BestCare Laboratory Services, LLC from participation in all Federal health care programs under section 1128(b)(7) of the Social Security Act, the Office of Inspector General (OIG) for the U.S. Department of Health and Human Services (HHS). "The decision reached in this case illustrates how OIG will use its administrative exclusion authority to protect the Federal health care programs from untrustworthy individuals and entities who engage in Medicare fraud," said Gregory E. Demske, Chief Counsel to the HHS Inspector General.

Maghareh is the majority owner and CEO of BestCare, a clinical laboratory with its primary facility in Webster, Texas. Based on evidence presented at an administrative hearing, Judge Thomas found that Maghareh and BestCare submitted false claims to Medicare for reimbursement of travel costs associated with the collection of samples on which BestCare performed laboratory tests. Specifically, BestCare billed Medicare for trained personnel travel, but instead used commercial airline flights to ship samples that were unaccompanied by trained personnel.

Judge Thomas stated that BestCare and Maghareh's "billing scheme involved sending samples by air hundreds of miles for no discernible reason aside from maximizing billing revenue solely for their benefit. They clearly should not be trusted to access program funds."

Under section 1128(b)(7) of the Social Security Act, OIG may exclude persons from the Federal health care programs for presenting or causing to be presented claims for items or services that the person knows or should know were not provided as claimed, or are otherwise false or fraudulent. OIG's exclusion authority protects the integrity of the Federal health care programs from persons who present a risk to those programs.

## HAPPY HOLIDAYS FROM THE COMPLIANCE OFFICE



---

Saint Louis University Compliance Toll Free 24/7 Hotline: 877-525-KNOW (5669)

## Accessing Policies in PolicyStat

The University has implemented a Policy Management Software Solution called PolicyStat. This software currently maintains all policies and procedures within an internal location and is available to all SLU staff members through Single Sign On (SSO) with their SLUNet ID and password.

This system serves as a repository for managing new and historical policies and procedures. It provides a simple and easy way to locate University (and SLUCare) policies, including HIPAA privacy and security policies. The system includes a formal process for creating, editing and approving policies. Individuals involved with policy creation and management are assigned to workflows, which can be tailored for specific document areas (e.g. privacy, security, HR).

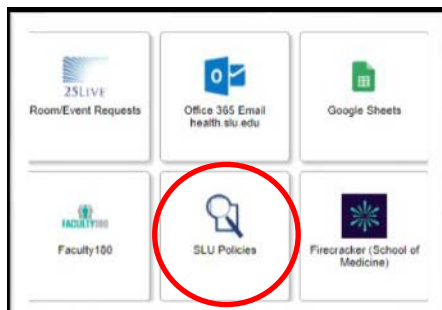
Similar to performing web searches on the internet, select the search box and type in a subject, policy number or other key word(s). As you type, the system will auto populate suggestions of what you may be looking for. If see the policy you are searching for, select it. Otherwise, select enter or click “search document” to view the list of matches. If a more advanced search is needed to narrow down your results, you may also search by Title, Document Area, Owners or References by selecting the corresponding tab.

For access to PolicyStat, follow the steps provided below:

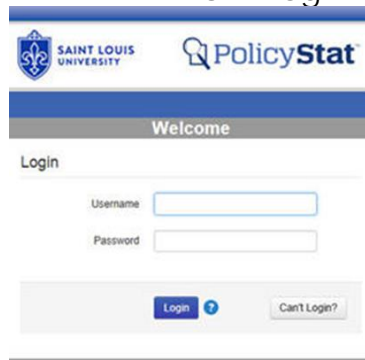
Step 1. Log in to your SLU account and access the mySLU Tools tab. Next, select the “SLU Policies” tile. Alternatively, you may enter the URL <https://slu.policystat.com/home/> into your web browser and sign in using your normal SLU username and password.

Step 2. PolicyStat’s default setting will be set to “SLU” meaning it will show only policies that apply to the entire University. To view policies at the clinical department level, simply hover your cursor over the “Change location” tab and select SLUCare.

PolicyStat tile in mySLU



URL Login



*What is a Research Conflict of Interest?*

Situation where a Researcher receives an outside financial benefit from their research sponsor that could directly & significantly affect the design, conduct or reporting of their research.

*What is a Patient Care Conflict of Interest?*

Situation where a SLU healthcare employee received something of value from industry that could create a perception of bias or questions the "Patient-Centeredness" of one's actions.

*What is an Institutional Conflict of Interest?*

Situation where a SLU Institutional Official received something of value that could create a perception of bias in any University research, education, clinical, or business transaction.

Saint Louis University Researchers, Clinicians & Institutional Officials are responsible for disclosing their business relationships on an Annual Disclosure within an online disclosure platform called InfoEd. This system gathers the disclosures to be reviewed by the Research COI Manager and/or the Compliance Office. Those relationships that appear to have a potential for creating a COI will be reviewed by the applicable committee. If the Committee makes a determination that a conflict does, in fact, exist, then the administrative offices will work with the employee to resolve the concerns. This may include eliminating or altering the relationship or adopting a formal Management Plan to mitigate the related risks. If you have questions or concerns about potential conflicts, please contact the Compliance Office at 314-977-5545.

Santa and Export Controls

I continue to be reminded of the arrival of Santa Claus by my three-year old son, which leads me to consider the export control obstacles Santa must face in his race to deliver presents on Christmas Eve.

As Santa is traveling he will be exporting many controlled items (i.e. laptops, tablets, UAV's), luckily similar to anyone traveling over the holidays, Santa is covered by the Gift (15 CFR 740.12) or BAG (personal technology, 15 CFR 740.14) exceptions. These exceptions allow the transport of gifts or personal technology without a license. However, if Santa or a SLU employee were taking their work computer on a personal trip, a TMP (Temporary license exception) would still be required and they should contact the Export Control Officer.

During the evening, Santa will be providing benefit to many people, which runs the risk of violating sanctions through the Office of Foreign Asset Control. However, by previously running his naughty or nice restricted party screening, Santa should be in the clear. SLU runs a restricted party screening on foreign collaborators. If SLU personnel will collaborate with foreign nationals over the holidays, the Export Control Officer should be contacted.

For both Santa and SLU it is important to fulfill their missions, however each must both do so while maintaining compliance with these complex federal rules.

For additional questions or comments on Export Controls, please contact Michael A. Reeves, Ph.D. 977-5880 [michael.reeves@health.slu.edu](mailto:michael.reeves@health.slu.edu)





## Listen to: Dr. Death

We recently found a true crime podcast that resonates with the compliance culture within the healthcare industry, and encourage those in our community who like to podcast to please, give this a listen. The nine-part series is titled Dr. Death, and its premiere on September 4, 2018 and has created a bit of a stir in compliance circles. The series explores the eighteen months of neurosurgery practice by a 33-year old University of Tennessee graduate named Christopher Duntsch, and his subsequent legal proceedings in Dallas, Texas, conviction and life sentence. It addresses the unusual circumstances of his residency and fellowship wherein he performed less than 100 surgeries, the time-consuming investigation process used by state medical boards, and countless other internal controls where the checkpoints failed and patients suffered as a result. This was a disturbing, yet thought-provoking story, published by Wonderly and written and reported by health and science writer, Laura Biel.



## 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 you receive a complaint from the Missouri Board of Healing Arts or the Attorney General (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).

## Did You Know?

The Saint Louis University Compliance Office 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, such as a HIPAA violation, potential Conflict of Interest, export control violation, or a physician billing violation. Callers are protected by the University's Whistleblower policy.

**SAINT LOUIS UNIVERSITY COMPLIANCE  
TOLL FREE 24/7 HOTLINE  
877-525-KNOW (5669)**

---

**Saint Louis University Compliance Toll Free 24/7 Hotline: 877-525-KNOW (5669)**