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COMPLIANCE HOTLINE (ETHICS POINT)......3-4



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Compliance Hotline

MARCH NEWSLETTER EDITION

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

Office of Institutional Compliance

—New Staff Members

The Office of Institutional Compliance welcomes two new staff members to the Compliance Team.

Sylvia Riojas, CPC is the Lubbock Senior Billing Analyst for Institutional Compliance starting in January 2016. Prior to joining the Compliance Office, she was the Lead Coder in Family Medicine. Prior to that Sylvia has been working in various physician offices and has been doing Billing/Coding for 28 years.

Shen Wang, M.S. is the Unit Manager of Compliance at TTUHSC, starting in January 2016. Shen also serves as the TTUHSC Conflict of Interest and Commitment Coordinator. Prior to joining TTUHSC, Shen was the Laboratory Manager at Purdue University. Shen received her



Master's degree from Texas Tech University and is excited to be part of the Institutional Compliance Office.



USB Flash Drive Vulnerability Drives, don't overlook the

When it comes to USB Flash basics. If you carry any sen-

sitive information around such as Protective Health Information (PHI), you must encrypt. You may say "It will never happen to me". But wait.... It can and it does every day. Someone, somewhere is accidently losing their flash drive or it gets taken right out of the front seat of their car.

Over time people become more and more careless of their devices. So careless that a study was conducted in London and New York by British security company Credent Technologist that found

12,500 iPods, laptops, and USB drives were left in taxis during a six-month period. These astounding numbers just go to show you that no data is safe unless it is encrypted. Texas Tech policy HSC OP 56.05 states that confidential data should not be stored on removable media such as flash drives or portable hard drives. However, in the event that there is no alternative to shared server storage, all sensitive Texas Tech University Health Science Center data must be encrypted using approved encryption techniques. The Institution has implemented a way to assist users with this security. When you plug your flash drive into an HSC owned device, you have a pop up that informs you that you have inserted an unprotected device into the computer. Do you want to encrypt this device? You should always answer yes. Even if you consider yourself a responsible individual who would never let such a thing happen, encrypting your portable devices is the best way to ensure your data doesn't fall into the wrong hands.



CMS's Final Medicare Overpayment Reporting and Refunding Rule

On February 11, 2016, CMS released its final overpayment reporting and refunding rule for Medicare Parts A and B (Final Rule). The Final Rule implements Section 6402(a) of the Affordable Care Act (Act), which addresses the identification, reporting, and refunding of certain overpayments and is now codified at 42 U.S.C. § 1320a-7k(d).

In the Final Rule, CMS addressed major provisions of the rule including clarifications around: the meaning of overpayment identification, the required lookback period for overpayment identification; and the methods available for reporting and returning identified overpayments to CMS.

Meaning of "Identification"

Section 1129J(d) of the Affordable Care Act provides that an overpayment must be reported and returned by the latter of:

• the date which is 60 days after the date on which the overpayment was **identified** and



• the due date of a corresponding cost report (if any).

The Final Rule states that a person has identified an overpayment when the person has or should have, through the exercise of **reasonable diligence**, determined that the person has received an overpayment and **quantified** the amount of the overpayment. This clarification is important because it allows a provider the opportunity to conduct the auditing work necessary to quantify the overpayment amount before the 60-day clock begins. This means that the 60-day clock does not start running until after the reasonable diligence period has concluded, which may take "at most 6 months from receipt of credible information, absent extraordinary circumstances". However, the 60-day time period does begin if an entity received credible information of a potential overpayment but failed to conduct reasonable diligence and an overpayment was received.

CMS considers **reasonable diligence** to include both proactive compliance activities to monitor claims and reactive investigative activities undertaken in response to receipt of credible information.

Lookback Period

Under the Final Rule, CMS adopts a six-year lookback period, rather than a ten-year period originally proposed by CMS in 2012. CMS reduced the lookback period to 6 years in order to avoid imposing unreasonable burdens or costs on providers and suppliers.

How to Report and Return Overpayments

The Final Rule provides that providers and suppliers must use an applicable claims adjustment, credit balance, self reported refund, or another appropriate process to satisfy the obligation to report and return overpayments. Essentially, CMS has instructed providers to use existing processes for overpayment refunds.

Annual Billing Compliance Education Training

It's that time again!

This year, the Billing Compliance Annual Education will focus on Teaching Physician (TP) rules, E/M documentation, and some ICD-10 tidbits. Departments are welcome to schedule a live presentation (plan for a minimum of an hour for the presentation and discussion). Just call your campus' Compliance Office to schedule. There is also the option to study the presentation on-line via ACME and take a review test. You must pass the test with at least 80% accuracy. In addition to the providers and residents, coders and clinical administrators are required to participate in the annual Billing Compliance training.



Conflict of Interest and Commitment

Conflict of Interest

The term "conflict of interest" is often used in many different ways. What is a conflict of interest? Generally speaking, a conflict of interest tends to occur in one of the following ways: when an individual has the opportunity to use his or her position at TTUHSC for personal financial gain or to benefit a company in which the individual has a financial interest; when outside financial or other interests may inappropriately influence the way in which an individual carries out his or her TTUHSC responsibilities; when an individual's outside interests otherwise may cause harm to TTUHSC' reputation, staff, or patients. Employees of TTUHSC are entrusted with protecting the trust

safety and welfare of the public's Cartoonbank

Conflict of Commitment

A conflict of commitment refers to a in external activities, either paid or commitment ligation and to and arrange their external interests in ability to carry out their obligations to occurs whenever an Employee's outlimits or whenever an Employee's TTUHSC.

"Try this—I just bought a hundred shares."

situation where an Employee engages unpaid, that interfere with his/her ob-TTUHSC. Employees should evaluate order to avoid compromising their TTUHSC. A conflict of commitment side activities exceed the permitted professional loyalty is not to

What should you do?

In May 2013, TTUHSC adopted HSC OP 10.05 Conflict of Interest and Commitment Policy. The purpose of the COIC Policy is to provide guidelines on TTUHSC's conflict of interest policies and to protect the ethical and civic responsibilities of the Institution and its mission. To comply with this policy, starting from the 2nd quarter of 2016, all employees of TTUHSC should:

- take conflict of interest and commitment training annually; •
- read HSC OP 10.05 Conflict of Interest and Commitment Policy; •
- fully and continually disclose professional and relevant personal activities and relationships that create a po-• tential or actual conflict of interest or commitment:
- remain aware of the potential for conflicts of interest and commitment;
- and take initiative to manage, disclose, or resolve conflicts of interest or commitment as appropriate.

The principles and guidelines contained in this Policy shall apply to all the TTUHSC's Employees, regardless of rank or position. For more information, please visit our website at https://www.ttuhsc.edu/compliance/COIC/

If you have a concern or issue, who you gonna call?

Nope, not the Ghostbusters. The Texas Tech University System has the **EthicsPoint**

Compliance Hotline for reporting concerns. Please see steps below for accessing on the TTUHSC webpage.



Go to the TTUHSC Webpage and look for the "Compliance Hotline" link in the bottom (highlight added).

Click on this link. This will take you to the Texas Tech University System (TTUS) Compliance Hotline webpage.

Compliance Hotline

TEXAS TECH UNIVERSITY SYSTEM

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Online Institutional Resumes





For more information on Title IX and appropriate procedures to report a grievance, contact:

Dr. Gena Jones Title IX Coordinator Email: TitleIXCoordinator@ttuhsc.edu

Margret Duran Title IX Deputy Coordinator for Students Email: TitleIXCoordinator@ttuhsc.edu

Charlotte Bingham Title IX Deputy Coordinator for Faculty and Staff Email: TitleIXCoordinator@ttuhsc.ed

Research Integrity Office Beth Taraban, Managing Director Email: <u>beth.taraban@ttuhsc.edu</u> Phone: 806.743.4566

Research Misconduct While it is recommended to use existing reporting proce-Please click on the policy link below for the dures to attempt the resolution of concerns, the EthicsPoint TTUHSC OP 73.07 - Honesty in Re TTUHSC OP 73.07 - Attachment A Compliance Hotline is available as an additional means of Concerns may also be directed to the TTU making your concerns known to TTUHSC.

an investigation to have the reporter's

contact information for questions.

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER.

Office of Institutional Compliance

Office of Institutional Compliance 806.743.3949

> **TTUS Compliance Hotline** 1.866.294.9352

EthicsPoint is NOT a 911 or Emergency Service

Do not use this site to report events presenting an immediate threat to life or property. Reports submitted through this service may not receive an immediate response. If you require emergency assistance, please contact your local authorities