Memo

|  |  |
| --- | --- |
| To: | Board of Curators – Health Affairs Committee  University of Missouri System |
| From: | Jennifer May  MU Health Chief Compliance Officer |
| Date: | January 28, 2021 |
| Re: | Quarterly Compliance Update |

1. Corporate Integrity Agreement Update
   1. Reporting Period 4
      1. Annual Report submitted September 30, 2020 (receipt verified)
      2. Covered dates July 1, 2019 – June 30, 2020
      3. MU Health repaid all identified overpayments from the Claims Review
      4. As of the date of this report, no comments received from the OIG Monitor
   2. Reporting Period 5
      1. Timeline runs from July 1, 2020 through June 30, 2021
      2. Final year of the five-year agreement, term ends June 30, 2021
      3. Final annual report will be submitted no later than October 1, 2021
      4. Training modules are live and staff are in process to compete by April 30, 2021
      5. Claims review selection process will begin in February 2021
      6. Barring any requests from the OIG for additional materials, Clauses VII: OIG Inspection, Audit and Review Rights; X: Breach and Default; and XI: Effective and Binding Agreement, are set to expire on or about January 29, 2022 (based on submission date of final report)
      7. OIG has one year to initiate any Validation Review of the final Claims Review, which option shall expire on or about October 1, 2022 (based on submission date of final report)
2. Data Security Task Force
   1. In response to the recent breach incidents, MU Health established a Data Security Task Force to review the information security posture and recommend tools to ensure an efficient and secure environment for protected health information (PHI) within MU Health (clinical practice, research, and education). The Data Security Task Force was created under the leadership of EVC Dr. Barohn, and was led by Jonathan Curtright, MU Health Care CEO, and Dr. Steven Zweig, Dean of the MU School of Medicine.
   2. The Task Force was divided into five work teams. These groups completed and submitted recommendations to President Choi and EVC Barohn in December 2020. Summaries of the recommendation from each work team are as follows:
      1. Organizational Structure: create an Information Security Council to provide oversight and reporting to the Executive Compliance Committee; leverage the relationship with the Tiger Institute to enhance knowledge and insights for data security
      2. Technology: implementation of two-factor authentication and warning banners on external emails; complete initial implementation of Microsoft 365 by January 30, 2021; expand web-content filtering to block malicious websites
      3. Workflows: eliminate internal email-dependent workflows where possible; ongoing re-assessment of workflows should continue as new software solutions are deployed
      4. Policy: distribute a mandatory web-based training module on data security in email; establish corrective actions and implications for policy violations; issue a new policy setting minimum access, use and storage limits
      5. Communications: deploy a multi-channel plan to ensure appropriate messaging of data security needs to all MU Health faculty and staff; ensure ongoing communications as updated software solutions and other innovations become available
3. Compliance Program Update Summary
   1. The MU Health Compliance Program remains focused on the following goals for FY21:
      1. Implementation, Education and Review of Data Security and Integrity Enhancements
      2. Continued Development of Reporting and Monitoring Tools for all areas of the Program
      3. Ensure alignment of Program Priorities in support of the MU Health Strategic Plan
   2. Risk review and oversight activities continue to increase in all areas
      1. Reviews, audits, and inquiries are trending up year over year.
      2. The increased activity in the audit space is directly related to the increased communication the OCC team receives from our staff. Items reviewed range from simple validation of compliance with a particular rule or policy to investigative inquires on complex topics. The increase year over year in inputs, particularly direct queries, suggests that MU Health staff are comfortable communicating with the OCC for questions, concerns and opportunities for collaboration on strategic needs. This in turn allows for heightened visibility into potential risk areas and presents opportunities to appropriately educate and mitigate risk enhancing the likelihood of strategic goal success.