UW Medicine Annual Compliance Report

INFORMATION

This item is being presented for information only.

BACKGROUND

UW Medicine’s Annual Compliance Report is one of three annual reports that UW Medicine provides to the Board of Regents. It was last presented in February 2018: https://s3-us-west-2.amazonaws.com/uw-s3-cdn/wp-content/uploads/sites/12/2018/07/23171724/2018-02-B-1.pdf.

Attachment
UW Medicine Annual Compliance Report to the Board of Regents
# TABLE OF CONTENTS

**EXECUTIVE SUMMARY** ......................................................................................................................... 3

I. **INTRODUCTION** ........................................................................................................................................ 6  
   Purpose of the Annual Report ...................................................................................................................... 6

II. **UW MEDICINE COMPLIANCE PROGRAM** .......................................................................................... 6

III. **KEY COMPLIANCE AREAS** .................................................................................................................... 8
   A. Compliance Program Integrity .................................................................................................................. 8
   B. Professional Fee Billing Integrity ........................................................................................................... 9
   C. Facility Integrity ........................................................................................................................................ 13
   D. Patient Information Privacy & Security and Identity Theft Prevention .............................................. 15
   E. Miscellaneous .......................................................................................................................................... 17

IV. **LOOKING FORWARD: 2020** .................................................................................................................. 18

**APPENDIX (UW MEDICINE COMPLIANCE PROGRAM)** ............................................................................ 20
EXECUTIVE SUMMARY

This UW Medicine Compliance Report to the University of Washington (UW) Board of Regents summarizes the primary compliance activities that occurred in Calendar Years 2018 and 2019 and identifies major priorities for Calendar Year 2020. The culture of compliance at UW Medicine is reflected in a documented Compliance Program designed to promote and support compliance and to detect noncompliance. The scope, structure, core functions and activities of the Program are presented as the Appendix to this report. UW Medicine Compliance is responsible for the following:

- Compliance Operations/Program integrity
- Clinical billing and documentation (facility and professional fee billing for all clinical services including clinical research);
- Information security, privacy and identity theft prevention;
- Stark law and Anti-Kickback Statute (AKS);
- Conflicts of interest (COI);
- Ethics; and
- EMTALA

Compliance programs for other content areas (for example, research, health and safety, pre- and post-award research grants and contracts, employment), other entity partners (for example, SCCA, FHCRC, Children’s), or UW healthcare components (for example, Dentistry, Public Health, Nursing) are within other jurisdictions.

For FY 2018, UW Medicine Compliance had a budget of $6,037,074 and 39 full time equivalents (FTE). For FY 2019, Compliance had a budget of $6,566,027 and 39 FTEs. In January of 2019, UWP Compliance was rolled up into UW Medicine Compliance and its compliance budget and FTE count was included in the UW Medicine Compliance budget. The UW Medicine Compliance budget for FY 2020, which includes UWP, is $8,806,013 and 55 FTEs.

UW Medicine Compliance underwent significant leadership changes between the fall of 2017 and April of 2019 including the retirement and/or resignation of two Chief Compliance Officers and five Compliance Officers. Additionally, a number of staff left between 2018 and early 2019 during the tenure of the previous Chief Compliance Officer. UW Medicine contracted with a compliance consultant, Beth DeLair, RN, JD, CHC, to be the Interim Chief Compliance Officer (CCO) and Interim Associate Vice President for Medical Affairs (AVPMA) effective April 11, 2019. The Interim CCO was initially tasked with evaluating, stabilizing and rebuilding the UW Medicine Compliance team while also managing day to day compliance activities. Since April, the department has been restructured to be more consistent with earlier leadership and consists of four “teams”, each lead by a Director. As of December 30, 2019, eleven vacant positions have been filled, some through the promotion of internal candidates. Planned and active recruitment continues for an additional three or four staff, which includes back filling for positions
vacated by those promoted into other positions. The team has stabilized and staff morale has improved greatly. However, the staffing changes during this reporting period impacted UW Medicine Compliance and are described in more detail in the body of this report. With the additional staff, UW Medicine Compliance has been able to start adding back more proactive activities into its compliance program.

Below is a summary of compliance activities from January 1, 2018 and September 30, 2019:

**Compliance Operations/Program Integrity:**
- General compliance training was delayed with deployment in September 2019 to allow creation of new content.
- The annual compliance risk assessment process had been eliminated in 2018 and 2019. A compliance risk assessment will be performed in early 2020.
- The team completed the review and approval of eight existing policies and drafted and implemented one new policy.
- The team worked with senior leaders within UW Medicine to consolidate to one enterprise wide UW Medicine Code of Conduct. The Code of Conduct was finalized and approved in January of 2020, with full implementation planned for the first quarter of CY 2020.

**Professional Billing Integrity:**
- Professional fee billing integrity includes robust training and awareness raising activities, focused reviews and timely investigation and follow through of reported concerns.
- On January 1, 2019 the UWP compliance team transitioned their employment from UWP to UW as the final step of its multi-year journey to integrate the previously separate UWP and UW Medicine compliance programs into one UW Medicine Compliance Program. The teams have worked hard to align program policies as well as the billing compliance training materials across UW Medicine for both UWP and non-UWP billing providers.
- Professional fee audits for this time period generally showed favorable results. For both 2018 and 2019 to date, 92% of providers audited met accuracy standards. The rate for errors under the Medicare Teaching Physician program was under 1% in 2018 and is under 2% for 2019 to date.
- UW Medicine Compliance saw a marked increase in external reviews by CMS beginning in 2018. For both CY2018 and CY2019 to date, UW Medicine Compliance had a high percentage of successful appeals (89% and 71% respectively).
- With the integration of UW Medical Center and Northwest Hospital (NWH) as of January 1, 2020, the NWH-employed physicians will transition their employment to UW and become members of UWP. As a result, UW Medicine Compliance has been working to fold the audit and education activities of these providers into processes currently implemented for UWP billing providers.
Facility Compliance/Integrity:
- UW Medicine received and processed a high volume of external government reviews for this time period.
  - Approximately 78% of these reviews resulted in no findings, which meant UW Medicine was reimbursed for the services provided.
  - UW Medicine Compliance initiates an appeal process for when a payor makes a finding that our team disagrees with. Historically, we have been 68% successful on appeal.

- UW Medicine Compliance worked with senior leadership at various managed Medicare and Medicaid payors to reduce the volume of audits and to contest inappropriate denials.
- Medicare payment contractors continued pre-payment audits of claims. Results have been overall favorable.
- There was one EMTALA violation for this reporting period related to an inappropriate transfer and lack of sufficient signage in treatment areas. These deficiencies were corrected, and UW Medicine passed when CMS conducted a follow-up survey.
- Research billing compliance audits were performed during this time period with no significant findings. In 2020, UW Medicine Compliance will engage an external consultant to review our processes related to research billing audits to ensure our scope and methodology for such reviews captures and reflects the potential risk given the types and numbers of clinical research trials conducted at UW Medicine.

Information Security, Privacy and Identity Theft Prevention:
- In December 2018, UW Medicine became aware of a configuration error on a website server that made protected internal files containing patient information available and visible by search on the public internet earlier that month.
  - Immediate steps were taken to (1) remove public access to the protected internal files, (2) ensure that no other public facing websites had similar issues, and (3) review internal controls to prevent this from happening again.
  - In February 2019, UW Medicine notified approximately 974,000 UW Medicine patients affected by the incident, media outlets, the Secretary of the U.S. Department of Health and Human Services, several state attorneys general, the Washington Department of Health, and credit reporting agencies.
  - In March 2019, the Office for Civil Rights (OCR) initiated an investigation into the breach incident to determine whether UW Medicine is in compliance with the HIPAA Privacy, Security, and Breach Notification Rules. UW Medicine is currently cooperating with OCR’s investigation and has responded to OCR’s initial data request in March 2019 and a subsequent data request in August 2019.
  - A class action lawsuit was brought against UW Medicine as a result of this data breach. UW Medicine engaged outside counsel to help vigorously defend the matter. We are currently in the discovery stage for this lawsuit.
- Inappropriate but accidental disclosures of protected health information (PHI) still comprise the majority of privacy incidents, and these tend to be quickly discovered and addressed.
Stark Law and Anti-Kickback Statute:
• The Stark law prohibits physician self-referral unless certain exceptions are met. Standard operating procedures are in place to review compensation arrangements and agreements with physicians, and to conduct fair market value analysis as necessary. There were no violations detected or reported in 2018 or 2019.
• The Anti-Kickback Statute prohibits inducements for referrals for medical services or items. There were no violations detected or reported in 2018 or 2019.

Conflicts of Interest (COI):
There are numerous COI policies, some of which apply to a specific type of employee or a specific entity. These policies are based on ethical principles as well as Washington State law.
• UW Medicine Compliance has an active COI Ethics Team comprised of staff level individuals from each department team who have developed subject matter expertise in relevant COI policies and law. The COI Ethics Team provides consultation to help employees understand their responsibilities to avoid, or disclose and address, perceived or real COI.
• For 2018 and the first half of 2019, UW Medicine Compliance and the Business Unit of the School of Medicine worked together to review and approve outside work requests and development of conflict management plans for potential conflicts of interest. Starting in FY 2020, these will be managed by the Business Unit of the School of Medicine.

I. INTRODUCTION

Purpose of the Annual Report:
Section E(3)(iv) of the Board of Regents Governance Standing Orders requires the CEO of UW Medicine and the Chief Compliance Officer to appear before the Board of Regents to report on UW Medicine compliance programs.

An annual report of the UW Medicine Compliance Program was not provided to the UW Board of Regents in 2019 covering 2018 compliance activities because of significant leadership changes within the department. This report covers compliance program activities for calendar year 2018 and from January 1, 2019 through September 30, 2019.

II. UW MEDICINE COMPLIANCE PROGRAM

UW Medicine consists of seven owned or managed organizations that operate in a highly regulated environment with a variety of compliance requirements and potential risks. The culture of compliance at UW Medicine is characterized by the following:
• A formal structure with executive leadership engagement and support and advisory board oversight;
• System-wide education and outreach;
• Formal channels of communication including a system-wide reporting hotline; and
• A set of clearly defined responsibilities and documented formal program activities designed to promote and support compliance and detect noncompliance.

The purpose of the UW Medicine Compliance Program (“Program”) (see Appendix) is to assist UW Medicine in achieving its financial, operational and strategic goals while maintaining compliance with applicable healthcare laws, policies, rules and regulations. The scope, structure, core functions and activities of the Program are updated as necessary to reflect organizational and policy changes, refinements to programs and best practices for addressing compliance risk.

UW Medicine Compliance underwent significant leadership changes between the fall of 2017 and April of 2019. Two senior Compliance Officers and the former Chief Compliance Officer and Associate Vice President for Medical Affairs retired in that time period. Jim Mathis was hired as Chief Compliance Officer and Associate Vice President for Medical Affairs at the end of February 2018 but resigned in April 2019. On April 11, Beth DeLair, RN, JD, CHC, a compliance consultant, was named Interim Chief Compliance Officer and Interim Associate Vice President for Medical Affairs. Many staff, including those in leadership positions, left UW Medicine Compliance during Jim’s tenure as Chief Compliance Officer. The Interim Chief Compliance Officer (CCO) was initially tasked with evaluating, stabilizing and rebuilding the UW Medicine Compliance team while also managing day to day compliance activities.

The department has been restructured to be more consistent with the organization under prior leadership and is comprised of four “teams”, each lead by a Director. One of the changes that was made was to move the previous position of Research Compliance Officer back to the School of Medicine’s Business Unit. This change was made in consultation with UW Medicine leadership and was done because the position better fit the needs and provided services more aligned with the School. As of December 30, 2019, eleven vacant positions have been filled, some through the promotion of internal candidates. Planned and active recruitment continues for an additional three or four staff, which includes back-filling for positions vacated by those promoted into other positions.

For FY 2018 UW Medicine Compliance had a budget of $6,037,074, which included 39 full time equivalents (FTE). For FY 2019, UW Medicine Compliance had a budget of $6,566,027, which included 39 FTEs. In January of 2019, UWP Compliance was rolled up into UW Medicine Compliance. UWP’s compliance budget and FTE count was folded into the UW Medicine Compliance budget. As a result, for FY 2020, the UW Medicine Compliance budget and FTE count, including UWP, is $8,806,013 and 55 FTEs.
III. KEY COMPLIANCE AREAS

The compliance areas under the purview and oversight of UW Medicine Compliance are like those of all academic health centers and include the following:

- Compliance operations/Program integrity
- Clinical billing and documentation (facility and professional fee billing for all clinical services including clinical research);
- Information security, privacy and identity theft prevention;
- Stark law and Anti-Kickback Statute (AKS);
- Conflicts of interest (COI);
- Ethics; and
- EMTALA

UW Medicine Compliance staff leadership participates in numerous standing and ad hoc meetings and interactive sessions to ensure compliance risks in these areas are appropriately identified, mitigated and managed. Official committee records include all meeting minutes, handouts and presentations.

The UW Medicine Compliance Committee provides a high level of advice and oversight for the compliance function at UW Medicine. This Committee held four meetings in 2018 and four meetings in 2019. These interactive meetings include engaged community members who are tasked with understanding the health care regulatory environment, including emerging issues and understanding primary risks and mitigation strategies.

The following sections describe major activities and developments that occurred in 2018 and through September 30th of 2019 and are aligned with the four teams that currently comprise UW Medicine Compliance.

A. Compliance Program Integrity

The Program Integrity Team is responsible for developing and maintaining the Compliance Program infrastructure and overall compliance operations. The scope and composition of this team changed significantly in 2018 and is summarized below:

- In early 2018, the team Director was reassigned to other responsibilities.
- The formal compliance risk assessment process was halted in February 2018 for review and possible revision.
- Annual compliance training that had historically been deployed at the same time other mandatory training was deployed every January was halted in order to create new content; this resulted in a separate deployment of annual compliance training in September of 2019.
- Certain staff and activities (department hotline/intake; information management resources and reporting) were moved to a new team; and
- Several members of the team left the department between October 2018 and March 2019.
The Interim CCO re-established the team as Program Integrity with its previous scope of responsibilities, including a formal risk assessment process. However, due to key departures, this has required a significant rebuilding effort that is still ongoing. A new Director began leading this team in November 2019. During this reporting period, the Program Integrity Team accomplished the following:

- Implemented two onboarding training modules for new providers and staff in 2018 to replace content previously delivered through a vendor training program;
- Implemented a compliance website portal to deliver training and track completion for staff who are unable to complete training in the UW Medicine Learning Management System;
- Refreshed all content for new provider billing compliance training (50+ modules);
- Deployed three annual compliance training projects in 2018;
- Launched three annual training initiatives in September 2019;
- Completed a review and approval of eight existing policies and implemented one new policy; and
- The team worked with senior leaders within UW Medicine to consolidate to one enterprise wide UW Medicine Code of Conduct. The Code of Conduct was finalized and approved in January of 2020, with full implementation planned for the first quarter of CY 2020.

**B. Professional Fee Billing Integrity**

UW Medicine Compliance, including the former UWP Compliance team, and CUMG manage the professional fee billing compliance of UW Medicine physicians. UW Medicine and CUMG operate separate yet coordinated education and audit programs covering UWP and CUMG members, and UW Medicine provides the compliance program for professional fee billing activities of Northwest Hospital & Medical Center (NWH) and Valley Medical Center (VMC) employed community physicians.

**UWP Compliance**

On January 1, 2019 the UWP compliance team transitioned their employment from UWP to UW as the final step of its multi-year journey to integrate the previously separate UWP and UW Medicine compliance programs into one UW Medicine Compliance Program. The teams have worked hard to align policies as well as billing compliance training materials across UW Medicine for both UWP and non-UWP billing providers. This final step will allow us to provide consistent, high-quality support for all of our UW Medicine clinicians while allowing us to better align our activities and data-support systems.

**CY2018**

**Scheduled/Routine Audits**
- 917 providers with 92% meeting standards of 90% or above
- 329 providers with perfect score
- 67 providers required education and re-audit
- Repayments: $35,100

**Risk Audits/Compliance Inquiries**
- 46 audits
o Repayments: $6,895

Reported Concerns
o 31 audits

Policies
o 3 reviewed and revised

Education
o Face-to-face sessions: 255
  ▪ 128 topic-focused sessions, 100 post audit sessions, 23 new provider sessions, 4 Resident/Fellow sessions.

o 100% Completion of Mandatory Training Modules via Learning Management System

Government Reviews
o **Noridian Targeted Probe and Education Reviews** – Noridian (the Medicare payment contractor for UWP, UWMC and HMC) identified four UWP providers that had exceptional billing patterns (one in Orthopedics and Sports Medicine and three in Radiology) and requested prepayment reviews for 113 services.
  ▪ 110 services were paid (97 were paid immediately, 13 after the first level of appeal)
  ▪ 3 services for abdominal and pelvic services were not paid because the ordering provider did not include sufficient documentation of intent to order the service.

o **Medicare Recovery Audit Issues** – There was a low volume of claims identified by HMS (the region’s Recovery Audit Contractor) as improperly paid in 2018. Notable issues include:
  ▪ Emergency department and critical care services billed by providers in the same specialty on the same day of service.
  ▪ Evaluation and management services billed on the same day as a minor procedure or within 10 day global period.

**January 1, 2019 – Sep 30, 2019**

Scheduled/Routine Audits
o 490 providers with 92% meeting standards of 90% or above
o 193 providers with perfect score
o 31 providers required education and re-audit
o 16 Radiology/Pathology/Radiation Oncology coders with all meeting standards
o Repayments: $15,546

Risk Audits/Compliance Inquiries
o 61 audits
o Repayments: $5,196

Reported Concerns
o 16 audits
o Repayments: $195,113

Policies
o 5 reviewed and revised

Education
o Face-to-face sessions: 151; 39 on Final Rule
- Mandatory compliance education was rolled out September 2, 2019. As of December 30, nearly 100% of UWP providers had completed the mandatory training.

Government Reviews
- *Medicare Recovery Audit Issues* – There was an increase in Recovery Audit Contractor activity for 2019. Notable issues included:
  - Services for patients enrolled in hospice care billed to Medicare Part B instead of the hospice.
  - Excessive number of hospital inpatient services billed by physicians in the same specialty.
  - Emergency department and critical care services billed by providers in the same specialty on the same day of service.
  - Place of service billing errors where Medicare Part B was billed for outpatient services while the patient was registered as an inpatient.
  - Unbundling less extensive MRI services from more extensive MRI services.

**UW Medicine Compliance**

For 2018 and 2019, professional fee compliance activities for non-UWP providers covered billing providers for Northwest Hospital and Valley Medical Center. The following summarizes those activities:

**CY2018**

**Scheduled/Routine Audits**
- 133 completed
- 69 providers with a perfect score
- 66 additional follow-up or expanded audits
- 24 providers required education and re-audit

**Reported Concerns/Compliance Inquires**
- 5 reported concerns/investigations
- Repayments: $17,737

**Education**
- 98% of providers completed mandatory billing compliance modules for CY2018
- 80 face-to-face onboarding sessions were provided

**January 1, 2019 – September 30, 2019**

**Scheduled Audits**
- 124 completed
- 55 providers with a perfect score
- 41 additional follow-up or expanded audits
- 12 providers required education and re-audit
Education
- 44% of providers completed mandatory billing compliance modules (as of 9/30/19)
- 57 face-to-face onboarding sessions were provided

Reported Concerns/Compliance Inquires
- 3 reported concerns/investigations
- Repayments: $64,471

CUMG Compliance:
CUMG professional compliance is contracted to Seattle Children’s Hospital. The Children’s Professional Compliance Officer is responsible for the administration of the compliance program for CUMG providers. The transition of the program to Children’s creates a collaborative environment across the enterprise and allows for consistent messaging to all providers practicing at Children’s.

The CUMG professional program is based on the calendar year and during this reporting period completed all scheduled reviews and training for CY18. In addition, the program is on track to complete all scheduled reviews and training for CY19. The data below summarizes the activities from January 1, 2018 through September 30, 2019.

Scheduled/Routine Audits
- 765 completed
- 546 providers with a perfect score
- 27 providers required education and re-audit

Reported Concerns/Compliance Inquires
- 13 reported concerns/investigations; all issues closed with no further review required.
- 5 different reviews were initiated based on industry trends and high risk areas determined by compliance program analysis. Reviews demonstrated an acceptable financial error rate. Findings were provided to the clinical areas and education was provided when appropriate.

Policies
- All policies due for cyclical review were updated.
- A mass revision of all policies was done to ensure consistent definition usage across policies and to ensure all policies were aligned with UWP compliance policies.

Education
- 166 new providers on boarded, trained and reviewed
- All providers completed mandatory CMS compliance modules for CY2018.
- 662 providers attended live training spread across 79 different specialty sessions.

Repayments
- Total repayments: $57,091
January 1, 2018 – December 31, 2018 = $20,525
January 1, 2019 – September 30, 2019 = $36,566

C. **Facility Integrity**

The Facility Billing Integrity Team oversees and manages the following:
- Government payer audit requests;
- Facility internal compliance audits;
- EMTALA compliance; and
- Research billing compliance

The Facility Billing Integrity Team was impacted by the loss of staff in 2018 and early 2019, while also seeing a marked increase in external government payer audit requests. The former Director of Facility Billing was promoted to a higher level Director Position and is responsible for overseeing and managing the whole team. A Manager of Facility Billing Integrity, tasked with managing both external government payer audits and internal facility audits, was hired in August 2019. The team also filled a facility audit analyst vacancy and may fill an additional position in early 2020.

**Facility Billing Integrity**

External government audit requests are on track to exceed both the CY2017 (3,591) and the CY2018 (4,240) total number of audited claims. At our current rate (388 per month), we are on track to receive 4,651 audited claims for CY2019.

Historically, 78% of UW Medicine’s audited claims were found to be accurate at the time of audit (i.e. no findings). We are on track with that percentage for CY2019. When a payor makes a finding on audit that we disagree with, we initiate the appeal process and have been successful 68% of the time.

CMS Medicare Recovery Audit program activity continues to audit both inpatient and outpatient claims. The primary focus on the outpatient side remains right heart catheterization with endomyocardial biopsy. The primary focus for inpatient claims is procedures that are unrelated to why the patient has been admitted.

Inpatient claims from multiple managed Medicare and Medicaid insurance payers continued to be the primary focus of post-payment external audits. The team spent a significant effort in 2018 and 2019 to work with executive leadership at various managed Medicare and Medicaid plans to reduce the volume of audits and to contest inappropriate denials.

Medicare payment contractors continued pre-payment audits of claims. Results have been favorable overall.

UW Medicine Compliance investigated four facility-related compliance matters between January 1, 2018 and September 30, 2019. The total amount of repayment related to those claims was $229,343.
**Emergency Medical Treatment & Labor Act (EMTALA)**

The Emergency Medical Treatment & Labor Act (EMTALA) applies to all Medicare-participating hospitals with Dedicated Emergency Departments (DED). All four UW Medicine hospitals have a DED. EMTALA prohibits hospitals with a DED from refusing to provide necessary healthcare services to an individual experiencing a potential emergency medical condition based on that person’s insurance status and/or ability to pay. EMTALA requires these hospitals to provide such persons with an appropriate medical screening examination to determine if an emergency medical condition (including active labor) exists and, if so, to provide stabilizing treatment or an appropriate transfer. UW Medicine Compliance has a multi-faceted approach to promote EMTALA compliance throughout the enterprise:

- Administration and enforcement of the UW Medicine EMTALA policy;
- Comprehensive annual online EMTALA training for UW Medicine workforce members who are most likely to encounter emergency patients, including all Emergency Department and Labor & Delivery (L&D) / Birthing Center staff and providers, as well as Security staff members;
- In-person EMTALA training during New Employee Orientation (NEO) for other UW Medicine workforce members;
- Routine audits of all four UW Medicine hospitals’ Emergency Departments; and
- Consultations and guidance for any workforce member with EMTALA-related questions or concerns, including specific ED and L&D / Birthing Center patient care situations

In June 2019, NWH was cited by CMS for violations relating to: (1) the inappropriate transfer of a psychiatric patient from the NWH ED; and (2) an inadequate number of EMTALA signs posted in the NWH ED and Labor and Delivery Areas. In July 2019, CMS reviewed and approved NWH’s Plan of Correction. CMS then conducted a follow-up survey in August 2019 and determined NWH met EMTALA requirements.

**Clinical Research Billing**

CMS has promulgated regulations that define and limit what clinical services provided under a research trial may be billed to Medicare. UW Medicine Compliance currently has two full-time equivalents who perform these audits, though a second FTE was not filled until February 2019. Their responsibility is to conduct research billing audits that (1) identify billing errors that need to be repaid, charged to a different account or otherwise corrected; and (2) outline any necessary remediation help to improve compliance with billing going forward.

In 2018, four routine audits were completed in the School of Medicine Department of Medicine Division of Pulmonary, Critical Care and Sleep Medicine, two of which found 100 percent billing accuracy. The overall billing error rate for the four audits was 7.61 percent, and no significant patterns of billing errors were found.

Between January 1, 2019 and September 30, 2019, twelve research billing audits were completed in multiple departments of the School of Medicine. The overall billing error rate for the audits was 27.8 percent. However, most of the billing errors were related to
charges not captured for medically necessary services that were performed.

UW Medicine will engage an outside consultant in early 2020 to review our current processes related to research billing compliance audits to ensure our scope and methodology appropriately assesses potential billing compliance risk given the size of our organization and amount of clinical research conducted at UW Medicine.

D. Patient Information Privacy & Security, and Identity Theft Prevention

The Patient Information Privacy & Security and Identity Theft Prevention (PIP) team is responsible for ensuring compliance with applicable Washington state regulations, including but not limited to RCW 70.02, federal Privacy and Information Security regulations, 45 Code of Federal Regulations (CFR) Parts 160 and 164 (HIPAA), as well as Title16, CFR Part 681 “Identity Theft Rules.” These regulations set forth provisions that healthcare organizations such as UW Medicine must follow in order to (1) safeguard patient’s medical and related information; (2) provide patients with rights related to how their medical and related information is used, disclosed and accessed; and (3) safeguard and verify the identity of patients receiving clinical services at UW Medicine.

The PIP team provides oversight and is responsible for the following:

- Developing and maintaining privacy and identify theft prevention related policies and procedures;
- Providing privacy and identity theft related subject matter expertise;
- Conducting proactive auditing & monitoring of patient medical records;
- Investigating and responding to potential violations of state and federal privacy laws;
- Reviewing Business Associate Agreements;
- Providing training/outreach/education resources;
- Helping to facilitate patient privacy rights, as applicable;
- Identifying and responding to identity theft red flags involving patient accounts;
- Identifying significant risks, mitigating controls, and developing associated remediation plan; and
- Identifying and recommending sanctions for non-compliance.

Team Transitions

Five out of seven full-time equivalents from the PIP team left in 2018 and early 2019. As a result of staff shortages, several strategic work plan items and the team’s routine auditing and monitoring were put on hold to focus on investigations, consultations, and patient complaints that required immediate attention.

Since April 2019, the Director was promoted to a higher-level Director Position with oversight of the whole team and two vacant positions were filled. The team will recruit for another position once the Director determines how an additional FTE best fits the tactical and strategic needs of the team and the UW Medicine enterprise. With additional staff, the PIP team resumed routine auditing and monitoring activities and has had the bandwidth to assist the organization with special projects.
Investigations and Consultations
The PIP team provides consultation for matters related to patient privacy and identity theft. Consultations include inquiries by UW Medicine workforce members, patients, and individuals external to UW Medicine involving applicability of UW Medicine Patient Information Privacy policies and/or related privacy laws; how behavior or processes can align with these policies; and review of data-related agreements, such as Business Associate Agreements.

Consultations – The PIP team provided the following:
- 520 consultations (approximately 43 per month) in CY2018
- 482 consultations from January 1, 2019 through September 30, 2019 (53 per month).
  Consultations increased in 2019 because of questions related to Destination: One, the electronic health record integration project.

The PIP team also investigates incidents and patient privacy complaints involving potential violations of state and federal laws and UW policies pertaining to patient privacy and identity theft. Examples of incidents and complaints for which the PIP would investigate include but are not limited to faxing a document containing protected information to an unintended recipient, improper disposal of patient information, and inappropriate access to, use of and/or disclosure of patient information.

Investigations – The PIP team conducted the following:
- 687 investigations (average of 57 investigations per month) in CY2018.
  o Fifteen investigations constituted “breaches” under the federal HIPAA regulations requiring notification to affected individuals and the Secretary of the U.S. Department of Health and Human Services.
  o Two investigations resulted in termination of employment due to inappropriate access to the electronic medical record.
- 494 investigations (average of 55 investigations per month) between January 1, 2019 and September 30, 2019.
  o Fourteen investigations constituted “breaches” under the federal HIPAA regulations requiring notification to affected individuals and the Secretary of the U.S. Department of Health and Human Services.
  o One investigation resulted in termination of employment due to inappropriate sharing of patient information with law enforcement authorities.

Major Breach Incident and Office for Civil Rights Investigation
In December 2018, UW Medicine became aware of a configuration error on a website server that made protected internal files containing patient information available and visible by search on the public internet earlier that month. Immediate steps were taken to (1) remove public access to the protected internal files, (2) ensure that no other public facing websites had similar issues, and (3) review internal controls to prevent this from happening again.
In February 2019, UW Medicine notified approximately 974,000 UW Medicine patients affected by the incident, media outlets, the Secretary of the U.S. Department of Health and Human Services, several state attorneys general, the Washington Department of Health, and credit reporting agencies.

In March 2019, the Office for Civil Rights (OCR) initiated an investigation into the breach incident to determine whether UW Medicine is in compliance with the HIPAA Privacy, Security, and Breach Notification Rules. UW Medicine is currently cooperating with OCR’s investigation and has responded to OCR’s initial data request in March 2019 and a subsequent data request in August 2019.

A class action lawsuit was brought against UW Medicine as a result of this data breach. UW Medicine engaged outside counsel to help vigorously defend the matter. We are currently in the discovery stage of this lawsuit.

E. Miscellaneous

Conflicts of Interest

A team of four staff within UW Medicine Compliance provides subject matter expertise and consultation to UW Medicine for questions and matters relating to Washington State Ethics law and potential conflicts of interest (COI). The most common types of COI in academic health centers arise from faculty research activities, outside professional work and relationships with medical vendors or manufacturers.

Financial COI in research is governed by rules established by the National Institutes of Health as well as UW policies. The UW Office of Research has primary responsibility for reviewing financial COI disclosures, approving outside work requests and establishing conflict management plans for School of Medicine (SoM) faculty and staff.

Additionally, various combinations of professional ethics codes, Washington State laws, UW policies, and UW Medicine entity policies require UW Medicine workforce members, including SoM faculty, to avoid, or disclose and address, perceived or real COI between their UW/UW Medicine responsibilities and their outside activities. Key policy provisions require advance approval to engage in outside work and disclosure of any related compensation and prohibit activities such as presentations or product endorsements at events designed solely or predominantly for company promotional, sales or marketing purposes. Questions and concerns about COI issues are handled by UW Medicine staff who regularly partner with the SoM and the UW Medicine Advancement Office to review potential arrangements for compliance concerns.

Frequently asked questions about charitable fundraising, gifts, patient inducement, political campaigning and use of institutional resources are published on the UW Medicine Compliance website (http://depts.washington.edu/comply/resources/frequently-asked-questions-faqs/).
Since 2014, “Open Payments,” which are payments or transfers of value made to physicians and teaching hospitals by certain drug, device and equipment manufacturers, have been published on the CMS Open Payments website, per federal law. UW Medicine Compliance resources are available to help patients, the public and media understand the data. In 2018 and 2019, UW Medicine Compliance and the SoM collaborated to review, monitor, address and consult on matters and questions related to Open Payments.

*Stark Law and Anti-kickback Statute (AKS)*

The Stark law prohibits physicians from referring Medicare and Medicaid patients for designated health services to an entity with which the physician (or immediate family member) has a financial relationship, unless certain exceptions are met. Standard operating procedures are in place to review compensation arrangements and agreements with physicians, and to conduct fair market value analysis as necessary. There were no violations detected or reported in 2018 or 2019.

The AKS prohibits any person from soliciting, giving or receiving remuneration to induce or reward another party for referrals for medical services or items, or for purchasing an item or service covered by a federal healthcare program. Compliance with the AKS and the Stark law is managed by UW Medicine Compliance staff and involves providing consultations to workforce members on matters such as vendor offers, including gifts, food and beverage and sponsored travel, and discounted equipment and other items of value. UW Medicine Compliance staff also collaborates with UWP legal counsel and the Attorney General’s Office when legal advice is needed. Finally, UW Medicine Compliance staff provides outreach and education on AKS in the contest of new employee orientation as well as more specialized trainings as requested for workforce members who interact more frequently with vendors. There were no violations of AKS detected or reported in 2018 or 2019.

**IV. LOOKING FORWARD: 2020**

Given the leadership change and loss of staff, the priority for UW Medicine Compliance in 2019 was stabilizing the workforce and hiring for the numerous vacant positions. Although the department was short-staffed for a period of time in late 2018 and into 2019, the remaining team members did an outstanding job of conducting planned audits, identifying and addressing on-going risk areas, deploying annual compliance training, providing numerous in-person training sessions, reviewing and revising compliance policies, and responding to reported concerns. The goal for 2020 will be to start adding more proactive activities back into the Program.

Conducting a formal compliance risk assessment in early 2020 will be a top priority for the department. Although potential and actual risk is assessed routinely within the department, a formal risk assessment has not been conducted since 2017. The risk assessment will be conducted by looking at recent changes in the regulatory environment (including new and
changing rules, agency audit plans and settlements) as well as our own audit findings and the issues and incidents that have been reported to the department. The findings from the risk assessment process will drive compliance activities for FY 2021 and will inform or help provide a basis for any additional audits that may be conducted by UW Internal Audit.

For 2020, UW Medicine Compliance will also work on improving processes where gaps have been identified in 2019. For example, we need to tighten up and better coordinate our sanctions checking processes. Additionally, we will spend more time working with applicable stakeholders to more accurately define and assign members of the UW Medicine workforce to required compliance training. Finally, we will work towards defining and implementing a singular process for addressing requests from our payors to attest to aspects of our compliance program. Payors who provide Medicare Part C and/or Part D services are required to hold their “first-tier, down-stream and related entities” to having certain elements of a compliance program implemented. Currently, each payor has a different process for meeting this requirement, and some ask us to attest to more than what is required by federal regulations. For 2020, UW Medicine Compliance would like to implement a process that helps streamline this requirement.

As we get closer to full staffing, UW Medicine Compliance will also start making efforts to reach out more proactively to each of the entities under the UW Medicine umbrella. This includes identifying opportunities to provide more face-to-face privacy related education and follow-up and establishing quarterly local compliance committees.

In addition to the above, UW Medicine Compliance has the following goals for 2020:
1. Continue reorganization and realignment of the Program to accommodate the changes in leadership and staffing.
2. Complete the integration of the Northwest Hospital-employed providers into UWP and into UW Medicine compliance functions.
3. Finish implementing a new software system for conducting professional and facility fee audits.
4. Complete planned audits, evaluate findings and, as applicable, adjust program activities.
APPENDIX

UW MEDICINE

COMPLIANCE PROGRAM

February 2020
# TABLE OF CONTENTS

I. INTRODUCTION ....................................................................................................................... 22  
II. UW MEDICINE .......................................................................................................................... 22  
III. OVERVIEW .............................................................................................................................. 23  
   A. Purpose .................................................................................................................................. 23  
   B. Scope ..................................................................................................................................... 23  
   C. Program Elements .................................................................................................................. 24  
IV. PROGRAM STRUCTURE ........................................................................................................... 25  
   A. Compliance Oversight ............................................................................................................ 25  
      1. Executive Leadership ........................................................................................................... 25  
      2. Enterprise and UW Medicine Affiliated Covered Entity (UW Medicine ACE)  
         Compliance Leadership ......................................................................................................... 25  
   B. Compliance Committees ........................................................................................................ 26  
      1. Enterprise-Level/UW Medicine ACE Committees ............................................................. 26  
         a) UW Medicine Board Compliance Committee ................................................................. 26  
         b) UW Medicine Compliance Governance Group ............................................................... 26  
         c) UW Medicine Compliance Oversight and Implementation Steering Committee ....... 26  
      2. Practice Plan Compliance Committees .............................................................................. 26  
      3. Compliance Communication Venues .................................................................................. 27  
         a) Compliance Officers Group ............................................................................................. 27  
         b) Strategic Leadership Council .......................................................................................... 27  
   C. Compliance Program Management and Operations ............................................................... 27  
   D. Compliance Roles and Responsibilities ................................................................................. 27  
   E. Enterprise Compliance Reporting Line .................................................................................. 28  
   F. Policies, Standards, Guidelines and Procedures ..................................................................... 28  
   G. Code of Conduct ..................................................................................................................... 29  
V. ATTACHMENTS  
   A. University of Washington HIPAA Designation ...................................................................... 30  
   B. UW Medicine/UW Medicine Compliance Governance ....................................................... 31  
   C. Chief Compliance Officer/Associate Vice President for Medical Affairs  
      ................................................................................................................................................ 32  
   D. UW Medicine Compliance Committees ................................................................................ 35  
   E. Core Compliance Officer Position Descriptions .................................................................... 38  
   F. Compliance Roles and Responsibilities ................................................................................ 56  
   G. Draft UW Medicine Compliance Code of Conduct .............................................................. 57
I. INTRODUCTION
UW Medicine is a complex organization consisting of seven owned or managed entities that operate in a highly regulated environment with a variety of compliance requirements and potential risks. The culture of compliance at UW Medicine is characterized by four major elements:

- A formal structure with executive leadership engagement and support and advisory board oversight;
- System-wide education and outreach;
- Formal channels of communication including a system-wide reporting hotline; and
- A set of clearly defined responsibilities and documented formal program activities designed to promote and support compliance and detect noncompliance.

I am pleased with the culture of compliance we have developed and instilled at UW Medicine over the past 15 years. Guided by the advice and oversight of the UW Medicine Compliance Committee, the UW Medicine management team provides substantial leadership support for the compliance function. I am confident in the quality and subject matter expertise of UW Medicine Compliance in proactively identifying potential areas of compliance risk and developing policies and corrective action plans that mitigate those risks. The active engagement of our administrative teams with the UW Medicine Compliance Committee is essential for the maintenance and ongoing improvement of an effective compliance program. It is a privilege for me to work with the team of individuals who are committed to excellence in our compliance program.

Paul G. Ramsey, M.D. CEO, UW Medicine
Executive Vice President for Medical Affairs and Dean of
the School of Medicine,
University of Washington

II. UW MEDICINE
The UW Medicine enterprise includes the following owned or managed entities:

- Harborview Medical Center (HMC)
- Valley Medical Center (VMC)
- UW Medical Center (UWMC)
- UW Neighborhood Clinics (UWNC)
- UW Physicians (UWP)
- UW School of Medicine (SoM)
- Airlift Northwest (ALNW)

UW Medicine is an “affiliated covered entity” under the federal Health Insurance Portability and Accountability Act (HIPAA). For the purposes of HIPAA compliance, the UW Medicine Compliance Program has jurisdiction over the healthcare components of the University of Washington (UW) in UW Medicine, as well as additional entities that are collectively referred
to as the UW Medicine Affiliated Covered Entity (UW Medicine ACE). These entities are listed in the UW HIPAA Designation (see Attachment A); the HIPAA compliance program governance structure for the UW Medicine ACE is represented in Attachment B.

UW Medicine shares in the ownership and governance of Children’s University Medical Group (CUMG), a pediatric practice plan founded with Seattle Children’s Hospital (Children’s); and the Seattle Cancer Care Alliance (SCCA), founded with Children’s and the Fred Hutchinson Cancer Research Center (FHCRC).

UW Medicine’s mission is to improve the health of the public by advancing medical knowledge, providing outstanding primary and specialty care to the people of the region, and preparing tomorrow’s physicians, scientists and other health professionals.

III. OVERVIEW

A. Purpose

The purpose of the UW Medicine Compliance Program (Program) is to assist UW Medicine in achieving its financial, operational and strategic goals while maintaining compliance with all applicable healthcare laws and regulations. The scope, structure, core functions and activities of the Program are updated as necessary to reflect organizational and policy changes, programmatic refinements and best practices for addressing compliance risk.

B. Scope

The following content areas are within the scope of the Program:

- Compliance Operations/Program Integrity
- Clinical billing and documentation (facility and professional fee billing for all clinical services including clinical research);
- Information security, privacy and identity theft prevention;
- Stark law and Anti-Kickback Statute (AKS);
- Conflicts of interest (COI);
- Ethics; and
- EMTALA

Compliance programs for other content areas (for example, research, health and safety, pre- and post-award research grants and contracts, employment), other entity partners (for example, SCCA, FHCRC, Children’s), or UW healthcare components (for example, Dentistry, Public Health, Nursing) are within other jurisdictions.

However, UW Medicine Compliance collaborates with its external entity partners and other parts of the UW system for any number of reasons, including but not limited to:

- Addressing compliance issues crossing institutional or jurisdictional lines;
- Enforcing compliance;
- Harmonizing policies, procedures and guidance;
- Engaging in mutually beneficial initiatives, process improvements and risk
assessments;
- Sharing best practices;
- Monitoring regulatory developments, analyzing industry trends; and
- Identifying and implementing risk mitigation strategies.

C. Program Elements
The Program is founded on both risk-based and proactive core components designed to promote and support compliance and detect noncompliance. Activities and program elements are documented in writing, readily available for review and regularly reported.

Specific program elements are aligned with standards established by the federal Department of Health and Human Services Office of Inspector General (OIG), the Office for Civil Rights (OCR) for HIPAA Privacy and Security Rules, and the United States Federal Sentencing Guidelines, and include:

- Senior leadership commitment and operational, executive-level and advisory compliance oversight committees;
- Designation of a chief compliance officer who:
  - Reports directly to the chief executive officer;
  - Has responsibility for overseeing UW Medicine compliance systems and initiatives; and
  - Serves as chief privacy official for the UW Medicine ACE with responsibility for developing and implementing policies and procedures required under HIPAA.
- Standards, including a Code of Conduct and policies and procedures to prevent and detect violations of law, and to protect and safeguard protected health information (PHI);
- Internal controls to identify and mitigate compliance risk;
- Education and outreach activities to ensure that policies are effectively disseminated and understood by enterprise and UW Medicine ACE members;
- Documented development and implementation of risk mitigation strategies and work plans, and timely reporting to executive and board-level compliance committees;
- Internal monitoring and auditing;
- Reasonable due diligence to confirm that UW Medicine does not delegate substantial discretionary authority to individuals who the organization knows or should know, are likely to engage in illegal conduct;
- Maintaining lines of communication, including an anonymous reporting mechanism for employees to report possible compliance issues without fear of retaliation;
- Prompt investigation of reported concerns, including noncompliance with enterprise policies, suspected overpayments, privacy complaints and security incidents involving PHI;
- Effective management of noncompliance, overpayments, complaints and
incidents to meet the timelines and requirements established by regulators for repayments, disclosure and breach notifications;

- Appropriate corrective action to reduce the impact and minimize the risk of similar future offenses and incidents;
- Enforcement of standards and policies through well-publicized disciplinary guidelines; and
- Periodic evaluation of the effectiveness of the Program.

IV. PROGRAM STRUCTURE

A. Compliance Oversight

1. Executive Leadership
   The chief executive officer, UW Medicine, executive vice president for medical affairs, and dean of the School of Medicine, University of Washington (CEO/EVPMA/Dean), provides compliance leadership and support. The CEO/EVPMA/Dean delegates specific responsibilities to key senior leadership positions.

2. Enterprise and UW Medicine ACE Compliance Leadership
   The chief compliance officer, UW Medicine, and associate vice president for medical affairs, University of Washington (CCO/AVPMA), is accountable to the CEO/EVPMA/Dean for leadership of UW Medicine’s compliance systems and initiatives and is the designated policy owner for all enterprise and UW Medicine ACE-level compliance policies. The CCO/AVPMA has a direct relationship with the UW Medicine Compliance Committee, serving as the chief staff person for the Committee, and with the Office of the President of the University. The CCO/AVPMA is a member of UW Medicine’s senior leadership team (see Attachment C for job description).
B. Compliance Committees

1. Enterprise-Level/UW Medicine ACE Committees

The scope, purpose and composition of the compliance committees are summarized in Attachment D.

a) UW Medicine Compliance Committee (UWMCC)

The UWMCC is responsible for reviewing and evaluating the Program and preparing the Chair to advise the UW Board of Regents, the UW president and the CEO/EVPMA/Dean regarding the implementation and effectiveness of the Program. Section E(3)(iv) of the Board of Regents Governance Standing Orders requires CEO of UW Medicine and the Chief Compliance Officer to appear before the Board of Regents to report on UW Medicine compliance programs. An annual report includes but is not limited to, the following topics:

- Key compliance policies and issues;
- Status of the compliance program infrastructure and reporting relationships;
- Scope of authority of key positions;
- Current assessment of compliance risks; and
- Level of resources dedicated to the compliance programs.

b) UW Medicine Compliance Governance Group (CGG)

Chaired by the CEO/EVPMA/Dean or designee, the steering committee of this group meets regularly for the purpose of strategic planning and problem solving, risk assessment decision-making and policy approval. Members include UW Medicine vice presidents, the CCO/AVPMA, the Vice Dean for Administration and Finance, UW Medicine Strategic Business Officer, the Senior Director for Clinical Affairs and issue-specific participants as needed.

c) UW Medicine Compliance Oversight and Implementation Steering Committee (COISC)

The COISC is chaired by the CCO/AVPMA and is primarily responsible for overseeing implementation of compliance program activities and internal controls throughout the organization. Members include entity executive directors, SoM vice deans, the chief information officer, compliance directors and major organizational stakeholders.

2. Practice Plan Compliance Committees

The boards of UWP and CUMG have established physician-led compliance committees. The UWP Compliance Committee and the CUMG Physician Education, Billing and Compliance Committee work closely with practice plan compliance officials in developing and implementing compliance policies, establishing effective training strategies, and advising their respective boards. Each committee has a formal charter and generally meets monthly. All official committee records are maintained by compliance officials.
3. **Compliance Communication Venues**

The size and complexity of the UW Medicine structure and its many interfaces call for multiple communication channels to convey compliance messages and initiatives. The following groups provide additional venues for discussion and raising awareness about compliance issues.

a) **Compliance Officers Group (COG)**

Convened by the CCO/AVPMA, this group includes UW Medicine compliance directors, non-UW Medicine compliance officials, internal audit, risk management and operational partners. COG shares best practices and resources, discusses issues of mutual interest/concern, and enhances the likelihood of cross-functional collaboration for important compliance issues.

b) **Strategic Leadership Council**

Chaired by the CEO/EVPMA/Dean, this group consists of UW Medicine senior leaders who meet at least monthly to address key operational, finance, compliance, and strategic issues.

C. **Compliance Program Management and Operations**

Four department directors oversee and implement program operations for specific content areas within UW Medicine’s defined scope and jurisdiction. Program operations include activities designed to detect and prevent noncompliance, and to mitigate risks associated with non-compliance. Each director has associated responsibilities for reporting, committee management and stakeholder involvement. Directors develop jurisdiction-specific policies and procedures as needed, maintain program records, and participate in enterprise compliance initiatives. See Attachment E for current position descriptions.

Several departments and entities have established compliance positions responsible for a specific scope of program activities. Although the individuals holding these positions have different titles, they function as compliance liaisons and interface with UW Medicine Compliance on issues of mutual concern, are members of COG, and participate in work groups as deemed appropriate for their scope and specialty. Positions generally report to the department or entity head; position descriptions are established and maintained by the individual units. These positions include the following:

1. Laboratory Medicine Compliance Liaison;
2. Pharmacy Compliance Liaison;
3. UWNC Director of Network Operations; and
4. ALNW Compliance Liaison.

D. **Compliance Roles and Responsibilities**

UW Medicine expects all faculty, physicians, staff, students, trainees and volunteers to meet the professional, ethical and regulatory standards associated with their individual roles, and to adhere to a Code of Conduct.
Additional responsibilities are assigned to persons in supervisory, management and leadership positions. These expectations, summarized in Attachment F, are conveyed in new employee orientations, mandatory and voluntary training, and regular communications from compliance officers and senior leaders.

UW Medicine Compliance will fully implement plans its enterprise wide Code of Conduct reviewed and implemented in in early 2020. A version of the documented is included as Attachment G.

E. Enterprise Compliance Reporting Line
UW Medicine/UW Medicine ACE workforce members have safe communication and reporting channels. The enterprise compliance hotline is maintained by the CCO/AVPMA. It provides for anonymous reporting of compliance concerns, although requests for consultation and complaints may also be conveyed directly to compliance officials with the appropriate scope and jurisdiction.

F. Policies, Standards, Guidelines and Procedures

The Program is based on a framework of policies that articulate UW Medicine’s commitment to meet regulatory requirements, establish the culture of compliance, and inform members of the enterprise about allowable and prohibited practices and activities. UW Medicine also relies on standards, guidelines and procedures to meet its compliance requirements.

The Program includes core policies that govern the program itself, a code of conduct governing workforce members, and a suite of compliance policies governing specific healthcare functions and activities. These policies are intended to establish a definitive, centralized leadership position on specific compliance requirements that apply universally to all UW Medicine and UW Medicine ACE workforce members, entities and compliance departments. They are designed to ensure system-wide consistency and form the foundation of the Program. Complete policies are located at http://depts.washington.edu/comply/policies. Compliance policies and reviewed and endorsed by COISC and then reviewed and approved by CGG.
Additional compliance policies may be developed by compliance officials who have the authorized scope and jurisdiction to address regulatory or organizational requirements affecting a subset of the system, such as specific entities, constituents or issues. These policies have more limited application, but still are intended to establish a definitive leadership position on certain compliance requirements. The baseline requirements for compliance policy development apply regardless of the policy level.

**Standards** are specific mandatory controls that govern an operation, a configuration, or a process. Standards are developed and maintained by the operational area delegated with responsibility for establishing internal controls. For example, standards governing information security are established by IT departments in the UW Medicine ACE (including UW Medicine IT Services, School of Medicine IT and VMC IT). Standards undergo a formal review and approval process, and those required by HIPAA are reviewed and endorsed by the CCO/AVPMA.

**Guidelines** are frequently developed to recommend best practices that do not have the force of policy. Guidelines are generally created by organizational leaders with appropriate scope and jurisdiction, in collaboration with key stakeholders in operational areas.

**Procedures** are step-by-step instructions that, if followed, should achieve compliance with a given policy. Procedures are typically maintained by the operational departments charged with specific implementation responsibilities for a given policy or set of policies. Procedures are developed in consultation with compliance officials, with appropriate scope and jurisdiction, but are established through separate and less formal approval and implementation processes.

**G. Code of Conduct**

The UW Medicine Compliance Code of Conduct includes 7 core principles, which require all workforce members and entities to:

1. Abide by all laws, regulations, policies, procedures and standards;  
2. Prevent fraud and abuse;  
3. Promote ethical academic, clinical, research and business conduct;  
4. Protect patient privacy and ensure the security of protected health information;  
5. Practice responsible data stewardship;  
6. Comply with professional and ethical standards; *and*  
7. Comply with emergency medicine treatment rules.

These principles are fully explained in the Compliance Code of Conduct provided in Attachment G. It is the responsibility of every UW Medicine workforce member to be knowledgeable about and to act in a manner consistent with these standards. Where circumstances arise that are not covered by these standards or UW Medicine policies, an overall philosophy of honesty and integrity applies.
### University of Washington Healthcare Components

**University of Washington Non-UW Medicine Healthcare Components**  
(part of UW legal entity)
- Autism Center at Center on Human Development and Disability (CHDD)
- Psychology Clinics in the College of Arts and Sciences
- Rubenstein Pharmacy in the School of Pharmacy (A.K.A. Hall Health Pharmacy)
- School of Dentistry Clinics and Faculty Practice Plan (Practice Plan also known as UW Dentists)

**UW Medicine Healthcare Components**  
(part of UW legal entity)
- The UW Medical Center and Clinics
- Hall Health Center
- Airlift Northwest
- Department of Pediatrics Molecular Development Lab

### UW Medicine – Affiliated Covered Entity

**Other Healthcare Components**  
(non-UW legal entities)
- Harborview Medical Center and Clinics
- Northwest Hospital & Medical Center and Clinics
- King County Public Hospital District No. 1 d/b/a Valley Medical Center and Clinics
- UW Physicians Network d/b/a UW Neighborhood Clinics
- The Association of University Physicians d/b/a UW Physicians
- Summit Cardiology
B. UW Medicine/UW Medicine Compliance Governance

The UW Medical Center and Clinics
- Hall Health Center
- Airlift Northwest
- Department of Pediatrics Molecular Development Lab
- Harborview Medical Center and Clinics
- Northwest Hospital & Medical Center and Clinics
- King County Public Hospital District No. 1 d/b/a Valley Medical Center and Clinics
- UW Physicians Network d/b/a UW Neighborhood Clinics
- The Association of University Physicians d/b/a UW Physicians
- Summit Cardiology
C. Chief Compliance Officer/Associate Vice President for Medical Affairs

UW MEDICINE
POSITION DESCRIPTION
CHIEF COMPLIANCE OFFICER, UW MEDICINE AND ASSOCIATE VICE PRESIDENT FOR MEDICAL AFFAIRS, UNIVERSITY OF WASHINGTON

SUMMARY POSITION DESCRIPTION

The Chief Compliance Officer, UW Medicine/Associate Vice President for Medical Affairs, University of Washington (CCO/AVPMA) reports directly to the CEO, UW Medicine, Executive Vice President for Medical Affairs and Dean of the School of Medicine (CEO/EVPMA/Dean) and is responsible for the following:

• Maintaining and evolving an effective compliance program covering fraud, waste and abuse prevention (e.g., clinical billing, Stark Law and Antikickback Statute), faculty effort reporting, Health Insurance Portability and Accountability Act (HIPAA) privacy and security, Emergency Medical Treatment and Active Labor Act (EMTALA), ethics, professionalism, conflicts of interest and identity theft prevention;
• Assuring coordination and collaboration with affiliated organizations and other UW compliance programs (e.g., research, environmental health and safety, scientific integrity) and assurance offices (e.g., internal audit, risk management, information technology);
• Leading UW Medicine’s compliance systems and initiatives, working closely with the UW Vice Presidents for Medical Affairs (UW Medicine Chief Health System Officer, Chief Business Officer, Chief Medical Officer, Chief Advancement Officer, and Chief Financial Officer);
• Ensuring effective communication and collaboration between compliance program officers, entity executives and operational stakeholders;
• Maintaining a direct relationship with the UW Medicine Board Compliance Committee and with the Office of the President of the University;
• Serving as a member of UW Medicine’s senior leadership team.

The CCO/AVPMA has an important role in the development of strategies and initiatives to advance the UW Medicine mission of improving the health of the public. Important work required to advance the UW Medicine mission includes, in part, the delivery of advanced medical diagnosis and treatment services, clinical support for the education of medical students and graduate and post-graduate trainees, and maintenance of one of the largest and most advanced university-based basic and clinical research programs in the United States. In support of these activities, the CCO/AVPMA must maintain strong working relations with the US Department of Health and Human Services, US Department of Justice, Washington Department of Social & Health Services, the Medicare intermediary for Washington state, and other similar agencies. The CCO/AVPMA also represents UW Medicine for compliance issues in national professional associations, including but not limited to the Association of Academic Medical Centers (AAMC) and Association of Academic Health Centers (AAHC).
A brief summary of the significant characteristics of the distinct responsibilities and duties of this position are outlined below.

JOB CHARACTERISTICS

DIRECT MANAGEMENT RESPONSIBILITIES

- Maintaining and evolving a comprehensive UW Medicine Compliance Program that satisfies federal and state requirements and is subjected to periodic evaluations of program effectiveness
- Advise the CEO/EVPMA/Dean and VPMAs on the status of material compliance issues at UW Medicine
- As the chief staff support to the UW Medicine Board Compliance Committee, work with the Committee chair to develop annual schedules, manage meeting agendas and establish standard formats for reports to the Committee; prepare the annual compliance report to the UW Board of Regents; report at least annually to entity-specific boards
- Convene the UW Medicine Compliance Operational Implementation Steering Committee, the Compliance Officers Group and the Compliance Program Group; appoint chairs of working groups; ensure effective management and administrative support of official compliance committees
- Provide executive leadership in matters related to the staffing, strategy, philosophy and organizational structure of the UW Medicine compliance program; determine overall staffing needs in consultation with compliance officers; recruit, hire, mentor and supervise compliance officers and other direct reports
- Oversee the strategic planning and management of resources to support the program and establish fiscally responsible budgets
- Ensure development and maintenance of an effective records management program for official compliance documents, including compliance policies
- Serve as signatory authority for UW Medicine compliance policies as delegated by the CEO/EVPMA/Dean
- Serve as Chief Privacy Officer for UW Medicine

SHARED MANAGEMENT RESPONSIBILITIES

- Coordinate the resolution and management of shared concerns and initiatives with entity-level executives and compliance officers, including those from Children's University Medical Group, the Seattle Cancer Care Alliance and other affiliated entities
- Serve as chief staff support to the UW Medicine Compliance Governance Group, working closely with the chair to develop meeting agendas and execute responsibilities identified in the group charter
- Collaborate with the UW Privacy Official, the UW Medicine Chief Information Security Officer, and the UW Chief information Security Officer to address privacy and information security issues
COORDINATION & LIAISON RESPONSIBILITIES

• Serve as the CEO/EVPMA/Dean's chief liaison with offices of the UW administration and the UW Division of the Office of the Attorney General on matters of compliance.
• Serve on executive-level committees of UW Medicine, including the Strategic Leadership Council, and participate in UW Medicine strategic planning processes
• Coordinate related administrative matters with UW VPMAs; School of Medicine Vice Deans, Chairs and Directors; UW Medicine Executive Directors, and presidents of the clinical practice plans
• Represent UW Medicine Compliance in national, state and regional associations.

EDUCATION REQUIREMENTS
A Bachelor's degree in business, public administration, policy administration, health administration or closely related field is required; an advanced degree is preferred.

WORK EXPERIENCE REQUIREMENTS
• Ten years of progressively responsible experience in developing, implementing and administering comprehensive compliance programs is required, at least three years of which must be at or above the level of director/officer in a public university setting
• At least five years of increasingly responsible compliance experience in an academic medical center is desired.
• Extensive knowledge of compliance principles and regulatory requirements that impact academic medical centers is required.
### D. UW Medicine Compliance Committees

<table>
<thead>
<tr>
<th>Group/Scope</th>
<th>Purpose</th>
<th>Composition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>UW Medicine Compliance Committee (UWMCC)</strong></td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>Meets quarterly; the first Monday, in the second month of each quarter (in February, May, August and November).</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td><strong>Scope:</strong> Enterprise and for HIPAA, the UW Medicine Affiliated Covered Entities</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td><strong>Duties</strong> include but are not limited to advising on the following:</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Key compliance policies</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Compliance program infrastructure and reporting relationships</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Scope of authority of key positions</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Ongoing assessment of compliance risks and the effectiveness of mitigation activities</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Level of resources dedicated to the compliance programs</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Monitor the progress of new initiatives, process improvement projects, and programs</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Receive reports of relevant noncompliance and misconduct</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Provide advice on compliance activities</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Make recommendations to improve the effectiveness of UW Medicine compliance programs</td>
<td> </td>
<td> </td>
</tr>
<tr>
<td>- Annual review and evaluation of the performance of the committee.</td>
<td> </td>
<td> </td>
</tr>
</tbody>
</table>
| &nbsp; | &nbsp; | *All scheduled meetings*
| &nbsp; | &nbsp; | o UWMCC member designees
| &nbsp; | &nbsp; | o Appointed community members
| The following non-voting individuals are also invited to attend the committee meetings on a regular basis: | &nbsp; | &nbsp; |
| &nbsp; | &nbsp; | - CEO/EVPMA/Dean
| &nbsp; | &nbsp; | - Chief health system officer, UW Medicine/vice president for medical affairs, University of Washington
| &nbsp; | &nbsp; | - Chief business officer, UW Medicine/vice president for medical affairs, University of Washington
| &nbsp; | &nbsp; | - Chief financial officer, UW Medicine, vice president for medical affairs, University of Washington (CFO/VPMA)
| &nbsp; | &nbsp; | - Chief advancement officer, UW Medicine/vice president for medical affairs, University of Washington
| &nbsp; | &nbsp; | - Chief medical officer, UW Medicine/vice president for medical affairs, University of Washington
| &nbsp; | &nbsp; | - Chief compliance officer/associate vice president for medical affairs
| &nbsp; | &nbsp; | - UW Medicine strategic clinical business officer/associate vice president for medical affairs, University of Washington
| &nbsp; | &nbsp; | - President, UW Physicians
| &nbsp; | &nbsp; | - Vice dean for administration and finance, School of Medicine; and
| &nbsp; | &nbsp; | - Other non-voting individuals invited by the committee chair
Compliance Governance Group (CGG)
Meets monthly; on the third Friday of each month with special meetings as required.
Scope: UW Medicine, and for purposes of HIPAA, the UW Medicine Affiliated Covered Entities

Deliverables:
- Executive-level compliance program mandates and structure
- Leadership updates to the UW Medicine Compliance Committee
- Reports to UW Medicine Strategic Leadership Council
- Strategic compliance planning and problem solving
- Support enterprise compliance program (including policies, program elements, work plan, roles and responsibilities, committee structure)
- Approve enforcement mandates and related messaging
- Establish risk tolerance philosophy, approve mitigation plans and allocate resources

Members are appointed by the CEO, UW Medicine/Executive Vice President for Medical Affairs/Dean, UW School of Medicine
- Vice Presidents:
  - Chief Business Officer (Chair) **
  - Chief Health System Officer **
  - Chief Financial Officer
  - Chief Medical Officer
  - Chief Advancement Officer
- Chief Compliance Officer/AVPMA **
- Director of Business & Legal Affairs/AVPMA **
- Vice Dean, Administration & Finance, School of Medicine **
- UWP Practice Plan President **
- Issue-specific advisors:
  - Vice Deans: Academic, Rural and Regional Affairs; Graduate Medical Education; and Research and Graduate Education
  - Legal counsel
  - Content experts (Chief Information Officer, Information Security Operations Officer, Compliance Officers/Directors, Human Resources)

** Member of Steering Committee
<table>
<thead>
<tr>
<th>Compliance Oversight and Implementation Group (COISC)</th>
<th></th>
<th>Members are appointed by UW Medicine’s Chief Business Officer in consultation with the CGG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meets quarterly; the second Tuesday, in the second month of each quarter (in February, May, August and November).</td>
<td></td>
<td>• Chief Compliance Officer/AVPMA (COISC chair)</td>
</tr>
<tr>
<td>Scope: UW Medicine: Clinical billing, clinical research billing, EMTALA, Stark-Antikickback, Ethics, Conflict of Interest, the UW Medicine Affiliated Covered Entities (ACE): Patient Privacy and Information Security Compliance</td>
<td></td>
<td>• Chair, UWP Compliance Committee</td>
</tr>
<tr>
<td>Deliverables:</td>
<td></td>
<td>• CIO, CISO - UW Medicine ITS</td>
</tr>
<tr>
<td>• Consistent implementation of compliance policies</td>
<td></td>
<td>• Compliance Officer, CUMG</td>
</tr>
<tr>
<td>• Risk assessments and policy recommendations for CGG</td>
<td></td>
<td>• Director, Clinical Billing Integrity, UW Medicine Compliance</td>
</tr>
<tr>
<td>• Effective enforcement mechanisms</td>
<td></td>
<td>• Director of Patient Privacy &amp; Program Integrity, UW Medicine Compliance</td>
</tr>
<tr>
<td>• Reports to CGG</td>
<td></td>
<td>• Director of Research &amp; Academic Affairs, UW Medicine Compliance</td>
</tr>
<tr>
<td>• Oversee consistent implementation of compliance program activities throughout UW Medicine entities</td>
<td></td>
<td>• Corporate Integrity Officer, Seattle Cancer Care Alliance</td>
</tr>
<tr>
<td>• Review proposed compliance policies and recommend approval to CGG</td>
<td></td>
<td>• Director, Health Information Management</td>
</tr>
<tr>
<td>• Identify and resolve implementation challenges/barriers</td>
<td></td>
<td>• Director, Health Sciences &amp; UW Medicine Risk Management</td>
</tr>
<tr>
<td>• Communicate enforcement mandates</td>
<td></td>
<td>• Executive Directors of HMC, UWMC, NWH, UWNC and ALNW</td>
</tr>
<tr>
<td>• Participate in enterprise risk assessment process, recommend approval of mitigation plans, identify resource needs</td>
<td></td>
<td>• Legal Counsel, VMC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Privacy Officer, Seattle Cancer Care Alliance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Senior Director of Business &amp; Regulatory Affairs, School of Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Senior Vice President, Strategic Services, VMC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• SoM Assistant Dean for Operations and Administration, Graduate Medical Education</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• SoM Vice Dean for Research and Graduate Education</td>
</tr>
</tbody>
</table>
Background

The UW Medicine (UWM) Compliance Program includes activities and functions conducted at the enterprise level by the Chief Compliance Officer/Associate VP for Medical Affairs (CCO/AVPMA). The CCO/AVPMA is accountable to the CEO/EVPMA/Dean for leadership of UW Medicine’s enterprise-wide compliance systems and initiatives, and works closely with the operational compliance officers, as well as the UW’s central offices, to coordinate cross-entity and institution-wide compliance issues.

Each UW Medicine Director is responsible for developing and implementing components of the UW Medicine compliance program for specific content or risk areas and/or for specific constituents. Compliance program activities include development of policies and standards, auditing, monitoring, education/outreach, investigations, risk assessment and mitigation, regulatory monitoring and program modification, and on-going evaluation and reporting of program effectiveness.

Position Purpose

The Director, Facility Billing Integrity is a senior leadership position reporting directly to the CCO/AVPMA with responsibilities for overseeing and coordinating systems and initiatives required to establish an effective facility billing compliance program for UW Medicine.

At the direction of the CCO/AVPMA, the Director, Facility Billing Integrity develops and implements UW Medicine compliance program strategic goals, oversees applicable required elements of an effective compliance program as outlined by the Federal Sentencing Guidelines, directs resources to accomplish the goals and mission of the unit, and ensures efficient and effective team operations.

The Director, Facility Billing Integrity also works cooperatively with other UW Medicine Compliance directors, the CCO/AVPMA, UW Health Sciences risk managers, entity leaders, and the UW Medicine and UW information security officers to identify and resolve shared issues and concerns.

External Relations. Each element in the UW Medicine compliance program requires strategic, planning, and operational interfaces with other UW offices (including compliance officers and directors, risk management, UW attorney general, HR, IT, facilities, purchasing, contracting, accounting, financial management). The Director, Facility Billing Integrity serves as the Facility Billing Integrity team’s main point of contact for those interfaces.
The Director, Facility Billing Integrity provides strategic advice, recommends policy, collaborates on risk management activities, recommends and reports on compliance initiatives and program activities, coordinates resolution of issues across all four entities, and collaborates with entities related to issue management, inquires/investigations, and operational advice to help mitigate organizational risk.

The Director, Facility Billing Integrity serves as primary point of contact for all external government reviews related to Facility Billing Integrity or delegate authority as appropriate; coordinate assessments and ensure timely responses; communicate openly and promptly with payers, the OIG and other external parties as deemed appropriate and maintain good relationships with all of these parties.

**Internal Operations.** Internally, the Director, Facility Billing Integrity works closely with the CCO/AVPMA to develop unit-wide expectations for employees, maintain and monitor staffing levels, identify and document critical knowledge-skills and attributes for employees, and establish strategic plans for recruiting and retaining quality staff. The Director, Facility Billing Integrity ensures that the performance evaluation achieves unit goals for excellence and employee motivation.

This position requires leadership and responsibility overseeing the operational requirements of the facility billing integrity for the UW Medicine entities that bill for facility services.

The Director, Facility Billing Integrity is a full partner with the CCO/AVPMA in developing the short-term and long-range strategic goals for both unit-based and system-wide compliance operations, initiatives, and projects, and serves as project director for major initiatives.

As a confidential assistant to the CCO/AVPMA, the Director, Facility Billing Integrity uses discretion to advance issues on behalf of the CCO/AVPMA and operates independently using judgment and discretion to handle sensitive operational, implementation, and organizational concerns.

**Position Complexities:**

This position has substantial authority and responsibility for directing/controlling UW Medicine Compliance operations and resources of the program specifically related to Facility Billing Integrity unit of the division; and is accountable for results/resolutions. Ability to independently formulate and recommend finalized operational elements, documents substantiating the need, and outlining the requirements for, institutional practices and procedures, infrastructure, and outreach. Ability to determine compliance with internal and external regulations and policies; and act on behalf of leadership towards the operational and program goals of the unit and the compliance-related efforts throughout the health system.

**Position Dimensions and Impact to the University:**

This position provides leadership and has responsibility overseeing the operational requirements of the UW Medicine Compliance Facility Billing Integrity program as it affects the UW Medicine entities that bill for facility services.
Duties and Responsibilities

60%: Leadership/Direction - individual leadership duties listed below:

- Oversee daily activities associated with the risk areas and program functions under the auspices of the CCO/AVPMA, advise the CCO/AVPMA about program operations and risk assessment/mitigation strategies, monitor regulatory developments and recommend program modifications.

- Effectively supervise and allocate resources and talent in order to meet program objective(s).

- Serve as in-house expert on matters of regulatory compliance and maintain awareness of laws, regulations and status of current enforcement initiatives.

- Manage the development and implementation of policies and procedures for UW Medicine Compliance, working closely with the CCO/AVPMA, enterprise-wide content experts, legal counsel, and administrative staff.

- Develop proactive and reactive education and training content sufficient to address and mitigate organizational compliance-related risk.

- Participate and or lead enterprise-wide risk analysis as needed and report findings as well as mitigation plans to the CCO/AVPMA.

- Effectively engage in the development and implementation of the annual Compliance work plan; coordinating with the CCO/AVPMA, other directors and enterprise-wide compliance officials and content experts.

- In conjunction with the CCO/AVPMA, unit directors, managers and other staff, develop and implement effective policies and procedures that address regulatory requirements, including hotline, triage/case management, investigations and resolutions, inquiries, complaints, and consultation requests.

- Participate in or convene institutional committees and/or workgroups as assigned by the CCO/AVPMA.

- Oversee creation and maintenance of written documentation for the Compliance Program (e.g., charters, process improvement projects, corrective action plans) as required by applicable regulations; retain records in accordance with the UW Records Retention Schedule.

- Draft documents on behalf of the CCO/AVPMA for submission in management/board reports and present regularly to the executive leadership of UW Medicine, collaborate with the CCO/AVPMA on development of the annual UW Medicine compliance report to the UW Board of Regents.

- With delegated authority from the CCO/AVPMA, represent UWM to external regulators as needed.
o Work closely with other university officials when there are mutual concerns, system-wide policy needs, and urgent or emergent issues.

o Maintain and report regularly on program activities, work plans, project plans, and investigatory mitigation plans.

o Demonstrate team leadership by effectively managing, both directly and through influence, and guiding teams and group efforts; provide an appropriate level of feedback concerning progress in order to execute unit goals.

o Oversee daily activities associated with the assigned risk areas and program functions, advise the CCO/AVPMA about program operations and risk assessment/mitigation strategies, monitor regulatory developments and recommend program modifications.

o Ensure effective monitoring, auditing and risk assessment activities; conduct risk assessments as needed and report results to the CCO/AVPMA.

o The position operates independently using judgment and discretion to handle sensitive compliance program and political issues.

20% Strategic Planning - Activities listed below

o Provide strategic and logistical direction, guidance, and advice regarding program workflow and operations. Identify and determine objectives, goals and outcomes, including performance metrics, for implementation projects. Continually utilize and demonstrate strategic thinking by formulating objectives and priorities to develop and implement plans that support the long-term interests of the overall UW Medicine Compliance Program.

o Develop short and long-term plans in support of the goals of the unit.

o Research health system-wide needs to identify potential challenges and develop strategies for implementation.

o Develop and lead the implementation of strategy by fostering innovation, and identifying potential opportunities, challenges, and business requirements for new operations.

o Facilitate collaboration with key stakeholders in strategic planning and policy development.

o Build strong partnerships with peer organizations to garner input for setting the direction of the department from both an operational and programmatic perspective.

20% Operations - Activities listed below

o In partnership with the CCO/AVPMA and other directors, charter the creation, strategic and logistical direction, guidance, and provisioning of workflow and operations, systems and technology, facilities, data/decision support systems, education, training and outreach, human resources, institutional and unit-based policies, health system-wide intake/triage and hotline methodology, and
space and resource management. Identify and determine objectives, goals and outcomes, including performance metrics, for improvement projects.

- Establish decision support mechanisms and systems that facilitate the management of data, audit results, information and project tracking, data analysis and trending; and, strategize with CCO/AVPMA and other directors to identify opportunities, deficiencies, and risks in order to execute appropriate education, training and/or outreach.

- Develop an education, training and outreach identity that has system-wide visibility, such that it builds awareness and assists in mitigating risk. Build key partnerships, and work with subject matter experts throughout the health system, industry, and community to execute the program.

- Develop unit and entity-based policies, and collaborate with various system-wide stakeholders on the development of health system-based compliance policies. Facilitate process to ensure solid policy outreach throughout all applicable UW Medicine entities.

- Design and implement change management efforts.

- Oversee operations and administrative activities across the unit.

- Supervise key personnel within the division in order to advance the strategic goals of the unit.

- Collaborate with the CCO/AVPMA to ensure that health system goals, timelines, methods, project plans, and effective communications and outreach are achieved for compliance-related integrations.

- Partner with the CCO/AVPMA as required in order to staff UW Medicine senior leadership requirements and directives.

**Minimum Requirements:**

Bachelor’s degree and 6+ years of healthcare administrative/management/compliance leadership experience in a complex organization.

3+ years of people management experience.

Medical records and / or coding certification (any of the following credentials are acceptable: CPC, COC, CIC, CCS, CCS-P, RHIA, RHIT).

- Knowledge and understanding of healthcare regulatory requirements, including one or more program content areas (fraud, waste and abuse prevention, clinical documentation/coding/billing, HIPAA, privacy and information security, EMTALA, hospital-related research compliance (including clinical research billing), workplace ethics, industry relations, conflicts of interest and external reviews).

- Strong financial management, strategic planning, project management, business and operations management experience.
• Excellent cross-group collaboration skills demonstrated executive maturity and ability to impact and influence people at all levels in the organization.
• Must demonstrate strategic thinking, business insight and creativity in resolving problems.
• Ability to lead, inspire and develop a team of high performing individuals.
• Strong written and verbal skills.
• Advanced Microsoft Office applications experience.

Equivalent education/experience may not be substituted for minimum qualifications.

Preferred Requirements:

Advanced degree, preferably in business or healthcare administration

Experience in an academic medical center

Working knowledge of University financial and human resources-based operating systems

Statistical analysis and data benchmarking proficiency
UW Medicine Compliance
Job Description

Working Title: Director
Payroll Title: Director - 1111
Salary Grade: 11
Department: UW Medicine Compliance
Unit: Compliance – Patient Privacy
Job Classification: Professional/Exempt
Reports to: Chief Compliance Officer

Background

UW Medicine Compliance oversees the development and coordination of compliance programs across a wide range of risk areas, including clinical documentation/coding/billing, privacy and information security, EMTALA, hospital-related research compliance (including clinical research billing), workplace ethics, industry relations, and conflicts of interest. The program covers all UW Medicine entities, including UW Medical Center, Harborview Medical Center, UW Neighborhood Clinics, Airlift Northwest, Valley Medical Center, UW Physicians, the HIPAA Covered Entity and the UW School of Medicine. Interfaces include other university compliance offices on issues involving UW Medicine constituents and entities.

Program functions including but not limited to daily operations of the program, development, implementation, and maintenance of policies and procedures, monitoring program compliance, risk assessment and mitigation, investigation and tracking of incidents and breaches and insuring patients' rights in compliance with federal and state laws, education/outreach, regulatory monitoring and program modification, and on-going evaluation and reporting of program effectiveness.

UW Medicine Compliance operates under the strategic guidance of the Chief Compliance Officer, UW Medicine/Associate Vice President for Medical Affairs, UW (CCO/AVPMA). Compliance Officers with specific subject matter expertise direct program activities, report directly to the CCO/AVPMA and have dotted-line relationships with entity executives.

Position Purpose

The Director of Patient Privacy is the team lead and serves as a primary contact point and content expert for compliance with state and federal laws pertaining to patient privacy.

Position Complexities

The Director of Patient Privacy is responsible for overseeing the daily activities required for the operation of the privacy team and has overall responsibility for the privacy team’s activities, including responding to inquiries, investigating complaints, managing projects, developing and delivering education and outreach, developing and implementing audit/monitoring plans, reporting on program activities, maintaining program records, monitoring regulatory developments, creating, reviewing, and updating policies, performing risk assessments, developing risk mitigation strategies, and evaluating
program effectiveness. The Director of Patient Privacy regularly interfaces with UW Medicine senior leadership, and other institutional officials including IT Services staff, UW Health Sciences risk managers, Health Information Management staff, entity patient relations managers, and the UW Medicine and UW Information Security colleagues to identify and resolve shared issues and concerns.

**Position Dimensions and Impact to University**

This position provides overarching leadership and responsibility for the patient privacy program for all seven entities that comprise UW Medicine Compliance

**Duties and Responsibilities**

**Lead Collaborative Efforts:**
- Build and manage key relationships with internal and external stakeholders, colleagues, and clients by providing collaborative partnership in areas of shared interests, concerns, and risk.
- Collaborate with the information security officer to ensure alignment between security and privacy compliance programs including policies, practices, investigations, and acts as a liaison to the information systems department.
- Collaborate with the UW Privacy Officer to work on mutual matters and to ensure alignment between privacy programs as necessary.
- Serve as a subject matter expert in key areas involving the privacy of patient information, including information security and technology issues related to enterprise clinical systems, electronic access issues, and security risk assessment.

**Program Oversight:**
- Manage the development, implementation, and maintenance of privacy policies and procedures in accordance with applicable federal and state laws and regulations; work closely with UW Medicine leaders, IT teams, stakeholders and governance committees in the development, approval, and implementation process for privacy policies, procedures, and internal controls to ensure outcomes are appropriate and operating as intended.
- Convene and effectively participate in UW and UW Medicine privacy-related committees and workgroups where data security/privacy are addressed to coordinate Program development and implementation.
- Work closely with IT security staff, HIM teams, and other information technology personnel to ensure that the organization’s privacy protections keep pace with technological advances.
- Coordinate with senior management, operational managers, IT security staff, and business support services to provide for a business continuity plan and disaster recovery service.
- Oversee efforts to assess the effectiveness of privacy and security internal controls across UW Medicine and to develop proactive responses to emerging risks and regulatory developments.
- Conduct on-going privacy risk assessments, including development, tracking and reporting of issue mitigation strategies. Document activities to meet current regulatory requirements (e.g., HIPAA, CMS, HITECH, and NIST).
- Address privacy-related inquiries, requests for consultation, and complaints; work closely with operational leadership in developing responses and mitigation strategies to address findings.
• Develop and implement an annual HIPAA privacy and security auditing program that incorporates feedback and education into the process and assures timely communication of audit results to the (Interim) CCO and appropriate entity leadership; recommend corrective actions as necessary.
• In conjunction with the (Interim) CCO, develop HIPAA and related privacy and security education and outreach for workforce members throughout the UW Medicine system.
• Monitor developments in related rules, regulations and judicial interpretations; make recommendations to the Interim CCO as needed to maintain compliance and mitigate risk.

Project Management:
• Develop/oversee development of privacy-related projects, tasks, and schedules; monitoring and report on status to help ensure successful completion of projects within the resources and timelines allotted.

Supervision:
• Foster a team of highly seasoned privacy professionals.
• Provide leadership in matters related to unit staffing, strategy, philosophy, and structure necessary to support the goals and objectives for the UW Medicine Compliance Privacy Program; determine unit staffing needs in consultation with (Interim) CCO; recruit, hire, and supervise direct reports and unit staff.
• Accomplish staff results by communicating job expectations and mentoring, planning, monitoring, and appraising job results; coaching, counseling, and disciplining employees; and developing, coordinating, and enforcing systems, policies, procedures, and productivity standards

Qualifications

Required

• Bachelor’s degree and at least five years of increasing responsibility or experience in a compliance-related field, of which three years of experience and expertise is in healthcare privacy and security compliance **
• Technology and security related expertise, knowledge of enterprise clinical systems.
• At least three years of supervisory experience, with proven leadership, communication, organizational, team-building and critical thinking skills.
• Demonstrated record of effective skills in facilitation, creative problem solving and a team-based approach to achieving success in a highly technical environment.
• Excellent analytical, time management, organizational, and supervisory skills; and an understanding of a risk-based approach to securing institutional resources.
• Strong ability to communicate effectively, both verbally and in writing with employees, medical staff, board members, and external parties, including active listening and presentation skills.
• Demonstrated ability to independently prioritize and organize work, basic computer knowledge, ability to lead interdisciplinary teams.
• Proven leadership, supervision, communication, team-building and problem-solving skills; demonstrated ability to work independently and effectively prioritize work.
• Demonstrated success in leading projects/initiatives, designing work processes, and implementing programs within a multifaceted, highly matrixed organization.
**or an equivalent combination of education and work experience.

Preferred:
- Advanced degree, preferably in law, business or healthcare administration.
- Five years-experience managing a healthcare compliance content area.
- Five years’ experience in an academic medical center.
- Two years’ experience developing and managing administrative, technical, and physical controls as required by the HIPAA security rule and the HITECH act.
- Professional privacy and/or security certification such as Certified in Healthcare Privacy and Security (CHPS) and/or other healthcare industry related security credentials.

CONDITION OF EMPLOYMENT

UW Medicine Compliance manages a significant volume of audits, inquiries and consultations. Work priorities shift in response to fluctuating demands. Full time schedules are assumed to be at least 40 hours, however, incumbents are expected to remain flexible to accommodate the unit's goals and mission, and to work beyond their normal schedule when necessary.
UW Medicine Compliance  
Job Description  
Effective: July 19, 2019

Working Title: Director, Program Integrity  
Payroll Title/Code: 1111 Director  
Salary Grade: 11  
Department: UW Medicine Compliance  
Unit: Program Integrity  
Job Classification: Professional/Exempt  
Reports to: Chief Compliance Officer/Associate VP for Medical Affairs

Background

UW Medicine Compliance oversees the development and coordination of compliance programs across a wide range of risk areas, including clinical documentation/coding/billing, privacy and information security, EMTALA, hospital-related research compliance (including clinical research billing), workplace ethics, industry relations, and conflicts of interest. The program covers all UW Medicine entities, including UW Medical Center, Harborview Medical Center, Northwest Hospital and Medical Center, UW Neighborhood Clinics, Airlift Northwest, Valley Medical Center, UW Physicians, the HIPAA Covered Entity and the UW School of Medicine. Interfaces include other university compliance offices on issues involving UW Medicine constituents and entities.

Program functions include development of policies and standards, auditing, monitoring, education/outreach, investigations, risk assessment and mitigation, regulatory monitoring and program modification, and on-going evaluation and reporting of program effectiveness.

UW Medicine Compliance operates under the strategic guidance of the Chief Compliance Officer, UW Medicine/ Associate Vice President for Medical Affairs, UW (CCO/AVPMA). Compliance Officers and Directors with specific subject matter expertise direct program activities, report directly to the CCO/AVPMA and have dotted-line relationships with entity executives.

Position Purpose

The Director of Program Integrity is a senior leadership position reporting directly to the UW Medicine Chief Compliance Officer/UW Associate Vice President for Medical Affairs (CCO/AVPMA) that serves two primary roles:

1. Directs all activities necessary to ensure the integrity and effectiveness of the UW Medicine Compliance program, including: provides strategic leadership, implementing solutions to ensure all elements of the compliance program are addressed and effective, identifying opportunities for improvement, and collaborating with internal and external stakeholders as needed.

2. Directs the implementation and ongoing maintenance of all activities associated with an effective Conflicts of Interest/ Ethics compliance program across all UW Medicine entities (under the umbrella of the UW Medicine Compliance program) in order to promote compliance with applicable state and federal conflicts of interest laws and regulations.

This position directs all infrastructure activities and systems required to support the development and implementation of UW Medicine compliance program strategic goals, oversees applicable elements of
an effective compliance program as outlined by the U.S. Federal Sentencing Guidelines, directs the activities required to accomplish the goals and mission of the Program Integrity team, and ensures efficient and effective team operations.

The Director of Program Integrity is a full partner with the CCO/AVPMA and other unit directors in developing short-term and long-range strategic goals for both unit-based and system-wide compliance operations, initiatives and projects, and serves as project director for major initiatives. The Director of Program Integrity also works collaboratively with the CCO/AVPMA, other UW Medicine Compliance directors and other UW Medicine/UW department and entity leaders to accomplish program goals as well as to identify and resolve shared issues and concerns. As a confidential assistant to the CCO/AVPMA, the Director of Program Integrity uses discretion to advance issues on behalf of the CCO/AVPMA and operates independently using good judgment and discretion to handle sensitive operational, implementation and organizational concerns.

**Positions Complexities:**

Each element of the UW Medicine compliance program requires strategic, planning and operational interfaces with the other UW Medicine Compliance department units as well as other UW Medicine and UW offices/departments (compliance officers, directors, risk management, UW attorney general, human resources, IT, facilities, purchasing and contracting, learning management system, accounting, financial management, web development, marketing and community relations). The Director of Program Integrity works collaboratively with the CCO/AVPMA, other UW Medicine Compliance directors and other UW Medicine/UW department and entity leaders to accomplish program goals as well as to identify and resolve shared issues and concerns.

The Director of Program Integrity must monitor regulatory developments, enforcement activities and evolving industry practices, assess compliance with internal and external laws, regulations, policies and related requirements, and develop and implement operational and/or programmatic solutions, whether unit-based or system-wide initiatives, to address gaps and maintain the effectiveness of the UW Medicine compliance program.

**Position Dimensions and impact to the University:**

Directs the implementation of best-practices for ensuring program integrity and mitigating organizational risk across UW Medicine, including but not limited to committee structures, policies and procedures, communication channels, education and training, monitoring/auditing, investigation, enforcement, leadership reporting, and risk assessment. Serves as principle architect and director of the functions necessary for an effective Conflicts of Interest/Ethics compliance program that serves all UW Medicine entities

**Specific Duties and Responsibilities**

**Program Direction:**

1. Direct a team of in-house experts on matters of compliance content areas including ethics, Stark/AKS, conflicts of interest, vendor relations, etc.
2. Maintain awareness of laws/regulations, status of current enforcement initiatives, and best practices to ensure program integrity, assess compliance with internal and external laws, regulations, policies and related requirements, and develop and implement operational and/or
programmatic solutions, to address gaps and maintain the effectiveness of the UW Medicine compliance program.

3. Serve as the principle architect of the program functions necessary for an effective healthcare compliance program, working closely with the CCO/AVPMA and collaborating with other compliance directors, content experts, entity leaders and legal counsel on matters of shared concern. Direct the development and implementation of program elements and practices to ensure:
   a. execution of an approved risk assessment process and incorporation of results into written work plans that identify deliverables, timelines and responsible parties;
   b. effective monitoring and auditing that includes analysis, reporting and use of results to modify program strategy as needed;
   c. accurate, current and clear program policies;
   d. education/training/outreach activities and mechanisms, including a website, that provides effective guidance, facilitates compliance and mitigates risk; and
   e. Development and revision of compliance related policies.
   f. timely and thorough intake, triage and resolution of inquiries and complaints.

4. Direct the implementation of decision support mechanisms and systems that facilitate the management of compliance information and production of reports needed to support compliance program activities.

5. Provide regular reports on program activities and issues to the CCO/AVPMA, UW Medicine Vice Presidents, UW Medicine entity executive directors and other UW Medicine leaders and compliance committees, and an annual written report to the UW Board of Regents.

6. Serve as the primary point of contact for payor attestations related to program integrity or delegate responsibility as appropriate; direct the assessments and ensure timely responses; communicate openly and promptly with external parties as deemed appropriate; maintain good relationships with these parties.

**Strategic Planning:**

7. Serve as a member of the CCO/AVPMA’s executive team, working closely with other content experts to achieve efficiencies and effectiveness throughout the compliance department, and participate in departmental strategic planning, internal policy/procedure development, budget and resource planning, and business decisions.

8. Serve as contact with legal counsel and the Attorney General’s Office regarding related compliance strategies and responses to legal issues.

**Consultation and Collaboration:**

9. Provide consultative leadership and support to the CCO/AVPMA and entity executives to ensure that adequate steps are taken to correct problems identified through compliance program activities and to prevent their reoccurrence, including employee sanctions and operational changes.

10. Establish cooperative and collaborative relationships with operational leaders throughout UW Medicine on matters of shared concern in order to ensure effective and timely management of issues, initiatives and projects.

11. Provide strategic partnership to entity executives when they are jointly responsible with UW Medicine Compliance for the success of compliance programs in their respective areas.

12. Convene and direct constituent and entity-based committees and work groups as needed.

**Project Management:**
13. Direct institution-wide initiatives, process improvement projects, training program implementation and policy implementation processes as necessary; serve on committees and taskforces as assigned.

Supervision:

14. Provide strategic direction to staff responsible for daily activities of the Program Integrity unit; provide leadership, mentoring, staff development, and performance management; take disciplinary actions as needed in consultation with human resource department. Anticipate staffing and resource needs.

Supervisory Responsibilities:

The Director of Program Integrity develops unit-wide expectations for employees on the Program Integrity team, maintains and monitors staffing levels (recruiting and hiring as needed), identifies and documents job responsibilities as well as critical knowledge-skills and attributes for employees, evaluates the performance of Program Integrity staff and takes corrective actions as needed, and establishes strategic plans for recruiting and retaining quality staff. The Director of Program Integrity also ensures that the performance evaluation and reward system achieves unit goals for excellence and employee motivation. This position will direct a team of five to six individuals.

QUALIFICATIONS

Required

• Bachelor’s Degree**
• 7+ years of healthcare administrative/management/compliance leadership experience in a complex organization
• 3+ years of people management experience
• Knowledge and understanding of healthcare regulatory requirements and best practices for ensuring the integrity and effectiveness of compliance programs
• Strong financial management, strategic planning, project management, business and operations management experience
• Excellent cross-group collaboration skills, demonstrated executive maturity and ability to impact and influence people at all levels in the organization
• Demonstrated success in leading projects/initiatives and designing work processes and implementing programs within a multifaceted, highly matrixed organization
• Proven leadership, supervision, team-building and problem-solving skills
• Strong written and verbal communication skills
• Advanced Microsoft Office applications experience.

**or an equivalent combination of education and work experience

Preferred

• Advanced degree in education or healthcare
• Knowledge of project management principles
• Experience working in an academic medical center

CONDITION OF EMPLOYMENT

UW Medicine Compliance manages a significant volume of audits, inquiries and consultations. Work priorities shift in response to fluctuating demands. Full time schedules are assumed to be at least 40 hours, however, employees are expected to remain flexible to accommodate the unit's goals and mission, and to work beyond their normal schedule when necessary.
UW Medicine Compliance
Job Description

Working Title: Director, Professional Billing Integrity, UWP Compliance Officer  
Payroll Title: Director - 1111  
Salary Grade: 11  
Department: UW Medicine Compliance  
Unit: Compliance – UWP  
Job Classification: Professional/Exempt  
Reports to: Compliance Officer

Background

UW Medicine Compliance oversees the development and coordination of compliance programs across a wide range of risk areas, including clinical documentation/coding/billing, privacy and information security, EMTALA, hospital-related research compliance (including clinical research billing), workplace ethics, industry relations, and conflicts of interest. The program covers all UW Medicine entities, including UW Medical Center, Harborview Medical Center, Northwest Hospital and Medical Center, UW Neighborhood Clinics, Airlift Northwest, Valley Medical Center, UW Physicians, the HIPAA Covered Entity and the UW School of Medicine. Interfaces include other university compliance offices on issues involving UW Medicine constituents and entities.

Program functions including but not limited to daily operations of the program, development, implementation, and maintenance of policies and procedures, monitoring program compliance, risk assessment and mitigation, investigation and tracking of incidents and breaches and insuring patients' rights in compliance with federal and state laws, education/outreach, regulatory monitoring and program modification, and on-going evaluation and reporting of program effectiveness.

UW Medicine Compliance operates under the strategic guidance of the Chief Compliance Officer, UW Medicine/ Associate Vice President for Medical Affairs, UW (CCO/AVPMA). Compliance Officers with specific subject matter expertise direct program activities, report directly to the CCO/AVPMA and have dotted-line relationships with entity executives.

Position Purpose

UW Medicine’s mission is to improve the health of the public by advancing medical knowledge, providing outstanding primary and specialty care to the people of the region, and preparing tomorrow’s physicians, scientists and other health professionals. UW Medicine owns or operates UW Medical Center, Harborview Medical Center, Northwest Hospital & Medical Center, Valley Medical Center, UW Physicians (UWP,) UW Neighborhood Clinics (UWNC), UW School of Medicine, Airlift Northwest (Airlift), and other owned, operated or affiliated entities, interests and networks, including the healthcare components of the University of Washington. In addition, UW Medicine shares in the ownership and governance of Children’s University Medical Group and Seattle Cancer Care Alliance -a partnership among UW Medicine, Fred Hutchinson Cancer Research, and Seattle Children’s (all, the Entities). This position serves two primary roles: 1) oversee professional billing integrity for all entities comprising UW Medicine; and (2) provide strategic and operational oversight and maintenances of the compliance
program at UWP. This includes developing and reporting on compliance related activities and metrics to
the UWP Executive Committee, UWP Compliance Committee and UWP Board.

**Position Complexities**

UW Medicine Compliance oversees the maintenance, coordination, and development of a central
compliance program and Entity compliance programs across the wide range of regulatory compliance
risk areas faced by UW Medicine, including clinical billing integrity, fraud, waste and abuse prevention
(facility and professional fee clinical documentation/coding/billing, clinical research billing,) conflicts of
interest, Stark/AntiKickback/False Claims Act, privacy and information security, EMTALA, ethics and
professionalism, and industry relations. Program functions include development of governance and
policies standards, education and training, auditing and monitoring, reporting mechanisms,
investigations, enforcement, risk assessment and mitigation, regulatory monitoring and program
modification, and on-going evaluation and reporting of program effectiveness.

**Position Dimensions and Impact to University**

UW Medicine Compliance also interfaces with other University of Washington compliance functions on
issues involving UW Medicine constituents and Entities (e.g., human and animal subject protection
programs, research integrity, environmental health and safety, grants and contracts, student
information, non-HIPAA privacy). Reporting to the CCO/AVPMA, the Director, Professional Billing
Integrity and UWP Compliance Officer has a strong dotted line relationship with the President and
Executive Director of UWP and their respective leadership teams who are accountable for the
operational success of compliance programs in their Entities

**Duties and Responsibilities**

**Professional Billing Integrity Director and UWP Compliance Officer:**

1. Responsible for the planning and strategic standard development, oversees implementation and
ensures continuous performance and improvement of the Professional Billing Integrity team at UW
Medicine Compliance, which includes UWP.
2. Provide direct support and assistance of professional billing matters to all UW Medicine entities.
3. Establish cooperative and collaborative relationships within UW Medicine Compliance department
and other relevant regulatory UW Medicine functions on matters of shared concern.
5. Serve as in-house professional billing expert to all of UW Medicine. Maintains awareness of
laws/regulations, status of current enforcement initiatives, and best practices to ensure program
integrity.

**Compliance Program Leadership:**

6. Serve as a member of the Compliance department leadership team, working closely with other
leaders to develop and make strategic decision to achieve efficiencies and effectiveness throughout UW
Medicine and the overall UW Medicine Compliance department and program, by managing, designing,
and continuously improving people, process, and technology approaches, and by strategically managing
unit budgets and resource planning.
7. Provide strategic oversight of staff responsible for daily program activities, directly supervises staff
as needed; provide leadership, mentoring, staff development and performance management; take
disciplinary action as needed in consultation with the human resource department.
8. Conceptualize, design, develop, and create and present on program activities, risk assessments and incidents to the CCO/AVPMA, UW Medicine Vice Presidents, UW Medicine entity and senior leaders and UWP leaders.

9. Convene constituent and entity-based compliance committees and work groups as needed.

10. Participate in institution-wide initiatives, process improvement projects, and policy implementation processes as necessary; serve on committees and taskforces as assigned.

11. Serve as contact with legal counsel and the Attorney General's Office regarding related compliance strategies and responses to legal issues.

12. Represent the CCO/AVPMA as necessary and performs other duties as assigned.

**Required Qualifications**

- Master’s degree and three years of progressively responsible experience in developing, implementing and administering compliance program in a complex healthcare, academic and/or governmental environment. Additional experience may substitute for educational requirements.
- 10 years cumulative experience in a complex healthcare, academic and/or governmental environment
- Professional healthcare compliance, coding and/or auditing certification
- Demonstrated excellence in problem solving and critical thinking, conducting effective investigations, and leading interdisciplinary teams
- Demonstrated success in managing a team of people, leading projects/initiatives, designing work processes, and implementing programs within a multifaceted, highly matrixed organization
- Demonstrated ability in implementing projects collaboratively, without direct supervision or authority over work group members
- Demonstrated ability to independently prioritize and organize work, work collaboratively in a diverse environment and to facilitate consensus on shared goals, in difficult situations with challenging personnel
- Demonstrated ability to communicate effectively, both verbally and in writing, with employees, medical staff, board members and external parties; strong presentation skills
- Advanced knowledge of federal and state healthcare regulations governing fraud, waste & abuse, patient privacy and information security, and other regulatory and contractual requirements in healthcare
- Advanced knowledge of best practices for ensuring the integrity and effectiveness of compliance programs
- Basic knowledge of business and management principles of healthcare and competence in basic computer skills.

**Preferred Qualifications:**

- Advanced degree in healthcare or business administration, public health or policy, or law.

**CONDITION OF EMPLOYMENT**

UW Medicine Compliance manages a significant volume of audits, inquiries and consultations. Work priorities shift in response to fluctuating demands. Full time schedules are assumed to be at least 40 hours, however, incumbents are expected to remain flexible to accommodate the unit's goals and mission, and to work beyond their normal schedule when necessary.
### Compliance Roles and Responsibilities

<table>
<thead>
<tr>
<th>INDIVIDUAL</th>
<th>CHAIRS, DIRECTORS</th>
<th>SENIOR LEADERS</th>
<th>COMPLIANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Practice personal, professional, ethical and legal accountability</td>
<td>- Convey accountability expectations to direct reports</td>
<td>- Provide active leadership; establish accountability expectations and professional standards; allocate resources for compliance program activities</td>
<td>- Maintain effective compliance programs to prevent, detect and resolve noncompliance with federal and state laws and UW policies</td>
</tr>
<tr>
<td>- Understand role-specific responsibilities and applicable policies and procedures; complete all required training</td>
<td>- Monitor compliance with UW policies and procedures</td>
<td>- Approve UW Medicine policies; support education and outreach activities; convey implementation expectations to operational areas</td>
<td>- Establish UW Medicine compliance policies, education and outreach strategies, internal controls, audit plans and implementation tools</td>
</tr>
<tr>
<td>- Comply with University of Washington (UW) policies and procedures</td>
<td>- Ensure direct reports understand their roles, responsibilities and applicable policies and procedures; enforce onboarding and annual refresher training requirements</td>
<td>- Enforce compliance; evaluate audit findings and convey expectations for improved results</td>
<td>- Audit compliance with UW Medicine policies and internal controls; report findings; analyze trends</td>
</tr>
<tr>
<td>- Protect patient privacy, safeguard confidential information and utilize appropriate technical controls; observe access rights and restrictions</td>
<td>- Oversee operational implementation of compliance policies and procedures; improve audit results</td>
<td>- Participate in risk assessment process; evaluate results; determine systemwide risk tolerance; make risk management decisions</td>
<td>- Assess compliance risks using internal and external data, trends and regulatory developments; recommend program modifications</td>
</tr>
<tr>
<td>- Report compliance concerns and potential compromises of confidential information to administration or compliance; cooperate fully with investigations</td>
<td>- Actively manage data access rights; monitor use of appropriate safeguards and controls; comply with risk management decisions</td>
<td>- Receive investigative reports; evaluate findings and determine appropriate corrective actions and sanctions</td>
<td>- Investigate suspected noncompliance with UW Medicine policies; notify affected unit heads and senior leaders; report findings; analyze trends</td>
</tr>
</tbody>
</table>
UW Medicine Compliance Code of Conduct

PREAMBLE

UW Medicine\(^1\) is committed to the highest standards of excellence and integrity in advancement of its mission to improve the health of the public. Each individual and every entity within UW Medicine strives to embody excellence and integrity, and seeks to contribute to a culture of quality, compliance, safety and ethical business practices. Members of UW Medicine are committed to treating everyone with respect, courtesy, dignity and professionalism without discrimination and without regard to race, color, creed, age, sex, gender identity or expression, genetic information, national origin, cultural affiliation, citizenship, pregnancy, marital status, sexual orientation, disability, veteran status or religion.

The UW Medicine Compliance Program encompasses a set of policies and guidance that define the scope of the program and establish related requirements and expectations for UW Medicine workforce members. These materials are posted online at http://depts.washington.edu/comply/policies. This Compliance Code of Conduct (Code) is intended to ensure consistent standards of conduct throughout UW Medicine. While the Code does not address every issue that may arise, it outlines the basic principles of the Compliance Program and provides contact information for making inquiries or reporting concerns.

Each UW Medicine workforce member is responsible for reviewing, understanding, and personally upholding this Code. Actions or behaviors that do not align with the principles outlined in this Code may subject an individual to appropriate disciplinary or corrective action in accordance with the policies applicable to the workforce member’s specific position and work site.

The Code is built on the shared values and principles embodied in the UW Medicine Policy on Professional Conduct (Professionalism Policy) https://www.uwmedicine.org/about/policy-on-professional-conduct, which outlines behavioral expectations that extend beyond the scope of the Compliance Program. The Code closely relates to, but is not intended to replace, the Professionalism Policy.

THE COMPLIANCE CODE OF CONDUCT

1. **Abide by all Laws, Regulations, Policies, Procedures and Standards**
   UW Medicine is committed to following applicable state and federal laws and regulations and maintaining the highest ethical standards for the conduct of its academic, clinical, research and business affairs. UW Medicine is the academic medical center of the University of Washington. UW Medicine is comprised of the following:
   - Airlift Northwest
   - Harborview Medical Center
   - UW Medical Center
   - UW Neighborhood Clinics
   - UW Physicians
   - UW School of Medicine
   - Valley Medical Center
   - UW Medicine Shared Services

\(^1\) UW Medicine is the academic medical center of the University of Washington. UW Medicine is comprised of the following:
Medicine workforce members exhibit conduct that is legal, ethical and in compliance with applicable institutional policies that are designed to implement federal and state laws and regulations. UW Medicine strives to produce clear guidance, but individuals are responsible for understanding and adhering to rules that apply to their specific roles. Workforce members should seek clarification from their supervisors and/or UW Medicine Compliance when they have questions about their obligations.

2. Prevent Fraud and Abuse
UW Medicine complies with coding and billing requirements and does not engage in practices that may violate federal and state laws and rules, including, but not limited to, the federal and state False Claims Acts and Medicare/Medicaid rules. UW Medicine is committed to charging, billing and submitting claims for reimbursement only for services actually rendered, documented timely and completely in the medical record, and coded in the manner required by applicable laws and regulations.

The False Claims Act governs documentation, coding, billing and accounting for patient care services. Individuals involved in these activities are expected to provide true, complete and accurate information to support every claim for reimbursement and to report suspected noncompliance.

3. Provide the Highest Quality of Care
UW Medicine is committed to providing the highest quality, safest, medically necessary, and most effective, efficient care to patients. Patients and their families are treated with utmost compassion and respect. Care is provided in accordance with Emergency Medical Treatment and Active Labor Act (EMTALA) policies and clinical standards established for each healthcare entity within UW Medicine.

4. Promote Ethical Academic, Clinical, Research and Business Conduct
UW Medicine maintains the highest ethical standards for the conduct of its academic, clinical, research and business affairs. All individuals in the enterprise shall:
   a. Exercise personal accountability and integrity in their work and in their relationships with students, patients, research participants, vendors and the public.
   b. Conduct ethical and responsible research with regard for the well-being and rights of study participants.
   c. Make decisions based on the best interests of patients.

5. Protect Patient Privacy
UW Medicine has specific responsibilities to protect patient confidentiality and ensure the privacy and security of protected health information (PHI). In accordance with UW Medicine Compliance Patient Information Privacy policies, UW Medicine workforce members share the following accountabilities:
   a. Access, use and disclose only the minimum PHI necessary to perform authorized job duties.
   b. Understand and comply with institutional policies governing PHI, including those that provide patients with specific rights.
   c. Report concerns to UW Medicine Compliance about the access, use or disclosure of PHI.

6. Practice Data Stewardship
UW Medicine is committed to protecting the confidentiality of sensitive information, including patient, restricted, proprietary, research and student information. Workforce members who are given access to sensitive information are responsible for practicing data stewardship. This includes taking the measures necessary to ensure the physical and electronic security of information used or acquired in the performance of assigned duties, regardless of its form, location or method of transmission; understanding the policies that apply to specific types of information; and seeking clarification when questions about requirements arise.
7. **Appropriate Use of UW Medicine Resources and Assets**
   UW Medicine assets, including finances, equipment, human resources, facilities, and technologies are entrusted to individuals during the course of their work and must be used responsibly and appropriately. UW Medicine is a complex organization – some individuals are governed by Washington State ethics law, and others are governed by entity-specific policies regarding the use of resources and assets. All individuals should understand the restrictions and responsibilities relevant to their specific role and site of service, and seek clarification if they have questions.

8. **Avoid Potential and Actual Conflicts of Interest**
   Individuals in UW Medicine may be exposed to situations that present potential or actual conflicts of interest. A conflict of interest may occur if outside activities or personal interests influence or appear to influence the ability to make objective decisions in the course of a UW Medicine workforce member’s job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract from the performance of a workforce member’s job or cause the individual to use UW Medicine resources for other than UW Medicine purposes. While the specific requirements for disclosing and managing conflicts of interest are provided in policies, guidance documents, and established procedures for each constituent group, individuals should adhere to the following basic principles:
   a. Avoid situations that may constitute a conflict of interest, including but not limited to:
      - conducting UW Medicine business with entities in which an individual or their family member has a direct or indirect interest;
      - soliciting or accepting gifts from patients or vendors;
      - paying or accepting payments that may be viewed as a bribe, kickback or inducement.
   b. Acquire the appropriate approvals for any outside work performed.

9. **Maintain Accurate and Timely Records**
   UW Medicine is committed to the maintenance of accurate and timely records, recognizing the importance of documentation in the provision of healthcare, the performance of academic and research activities, and the administration of financial and business affairs. Medical staff bylaws, organizational policies and other institutional procedures establish documentation requirements for patient health records, including timely documentation standards as well as procedures for amending records. The chief financial officer establishes UW Medicine requirements for financial transactions. Finally, the University of Washington (UW) and UW Medicine Records Retention Policies or other applicable entity-specific policies establish records management, retention and destruction requirements.

10. **Cooperate with Government Investigations**
    UW Medicine appropriately responds to government investigations as required by law. UW Medicine workforce members follow applicable entity procedures including those related to responding to a subpoena, search warrant or other similar document related to an investigation of UW Medicine business, research or clinical practices, or discussing the matter with an investigator.

---

**POLICIES AND GUIDANCE**

All UW Medicine Compliance Program policies, guidance and related materials can be found at the UW Medicine Compliance web site: [http://depts.washington.edu/comply/](http://depts.washington.edu/comply/). The site is searchable and includes links to other resources, content-specific policies, entity-based policies, and additional standards of conduct that apply to certain constituents.

CUMG Compliance Program policies, guidance and related materials can be found on CHILD, the Seattle Children’s Intranet site (SCH login required).
Anyone who becomes aware of an actual or potential violation of the law or of UW Medicine compliance policies has a duty to report it. UW Medicine prohibits retaliation against workforce members or other individuals for filing a complaint, expressing a concern or asking for advice. Seek assistance and report any concerns to:

UW Medicine Compliance

Compliance Anonymous Hotline: 206.616.5248 (local) or 866.964.7744 (toll free)
Main telephone line: 206.543.3098 (local) or 855.211.6193 (toll free)
Fax: 206.221.5172
Email: comply@uw.edu
Address: 850 Republican Street, Building C, Box 358049, Seattle, WA 98195-8049
Website:  http://depts.washington.edu/comply/
ATTESTATION

By my signature below, I attest that I have read the UW Medicine Compliance Code of Conduct and understand that I am personally responsible for upholding it.

Name (please print) ________________________________________________________________

Signature _____________________________________________________________

Date_______________    Department/Service area_____________________________________

After signing this form, please give it to your supervisor. Signed forms are kept in your personnel file.