



What's New in the UConn Health Privacy Office?

Protecting the confidentiality of patient information remains a top priority at UConn Health. The Privacy Office has updated its services and has begun some new initiatives designed to better meet the institution's HIPAA Privacy needs.

Clinical area "walk-throughs" have started as an additional measure to assure compliance with HIPAA regulations and institutional policies. The Privacy Office staff plans to visit clinical areas on a rotating basis to educate workforce members, reinforce policies and improve processes as needed. Walk-throughs are a great way to gauge how well we are actually doing to protect the privacy and security of protected health information (PHI).

Random and "for cause" electronic access monitoring, including evaluating access to the records of "high-interest" and VIP patients, comparing access by employees in the same locations and roles, and reviewing access to patient records by new employees is ongoing. We will also soon begin monitoring email that has been flagged by the electronic filter which signals messages that are not properly secured to assure email users are complying with the policy for securing email communication.

The Privacy Office also recently launched a new electronic mailbox: PrivacyOffice@uchc.edu dedicated exclusively to privacy questions and for reporting HIPAA Privacy breaches. Our goal is to ensure prompt responses to your questions and follow-up regarding reported privacy breaches.

Lastly, annual and topic-specific education will be a primary focus in the upcoming months to assure that employees are up to date with changes in the HIPAA regulations and to highlight areas which may require specific training. The Privacy Office staff is available to provide department or unit-specific education or to attend staff meetings for informal discussions and Q & A.

Watch for Broadcast Messages for regular HIPAA Privacy tips and updates. For more information, please contact Iris Mauriello, HIPAA Privacy Officer at (860) 679-3501 or mauriello@uchc.edu

REPORTLINE
1-888-685-2637





Regulatory Spotlight Patient Protection and Affordable Care Act Section 6402

Section 6402 of the Patient Protection and Affordable Care Act requires providers who participate in Medicare or Medicaid to report and refund known overpayments within 60 days. Overpayments are funds that a health care provider receives in excess of the amount that they are entitled to under law.

Overpayments can develop from many areas such as; duplicate payments, medically unnecessary services, missing or insufficient documentation, services provided by an unlicensed provider, Stark Law violations or incorrectly coded services, to name a few.

Failure to return known overpayments within 60 days may result in liability under the False Claims Act for which the current financial penalty is up to \$11,000.00 per false claim. Providers can also be assessed Civil Monetary Penalties and/or excluded from participation in Medicare or Medicaid.

To address the overpayment requirements of Section 6402 of the Affordable Care Act, UConn Health has established an Overpayment Review Committee. The Committee meets bi-monthly and is tasked with evaluating potential overpayments. Members of the committee come from JDH and UMG Patient Financial Services, Reimbursement, Compliance and Internal Audit.

Once the committee validates that an overpayment has occurred, members of the committee work to quantify the amount of the overpayment, assure that the required refunds are made and implement education and/or on-going monitoring to prevent a future overpayment.

UConn Health's policy regarding overpayments can be accessed at:
http://www.policies.uhc.edu/policies/policy_2007_12.pdf

For questions or to request additional information, please contact Kim Bailot at 860-679-4746 or at Kbailot@uchc.edu.

Non-Discriminatory Practices to Ensure Equal Care

In the news this week, there is a voluntary resolution agreement between the U.S. Department of Health and Human Services' Office for Civil Rights (OCR) and The Brooklyn Hospital Center (TBHC), who jointly announced that they have entered into a voluntary resolution agreement to ensure that transgender TBHC patients receive appropriate and equitable care and treatment. The voluntary resolution agreement resolves a complaint filed by a transgender individual alleging discrimination on the basis of sex in the assignment of patient rooms. OCR investigated the complaint under Section 1557 of the Affordable Care Act, which prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in any health program or activity, any part of which is receiving Federal financial assistance.

Although OCR made no formal finding of discrimination, TBHC agreed to take proactive steps to ensure that transgender patients are treated equitably and fairly and receive the full benefit of its services. A copy of The Brooklyn Hospital Center's written commitments and OCR's closure letter, along with more information about OCR's enforcement of Title VI and other federal civil rights laws, can be found at www.hhs.gov/ocr.

The UConn Health community shares the commitment to treat all individuals in a fair and impartial manner, and will not tolerate discriminatory practices. To learn more, please see Policy #2002-44, [Affirmative Action, Non-Discrimination, and Equal Opportunity](#)

For questions related to this policy, please contact Margaret DeMeo, Associate Compliance Office, at (860) 679-1226 or demeo@uchc.edu