

Reported to the Board of Trustees
November 18, 2010

Board of Trustees Meeting
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University of Illinois Medical Center
Compliance Report to the University of Illinois Board of Trustees
For Fiscal Year 2010

The compliance program at the Medical Center functions under a formal plan that has been approved previously by the Board of Trustees. It is organized under a Governance Committee that has slowly expanded to include representatives from the Hospital and Clinics, the Colleges of Medicine, Nursing, Dentistry and Pharmacy, Mile Square, Human Resources, Hospital Finance, University Audits, and Legal Affairs. The College of Medicine at Rockford also has two representatives that participate remotely. It has developed as a decentralized model with much of the work done within respective units. The central staff consists of one Director and one coder/auditor. The audit function is being expanded with the recruitment of a certified auditor intent on developing automated processes to assess compliance of physician billing as well as more robust systems within the current financial structure of Mile Square and the Hospital.

There are three primary areas of focus for the Medical Center's compliance programs: Financial processes, clinical programs, and information security.

Financial Processes: Last year we reported the development of a tool to enhance our ability to assure proper documentation in support of the physicians' clinical bills that are remitted for services. Given continuing changes in federal and state regulations, this is an ongoing task. This tool has helped us identify areas within units that needed to change processes to assure full compliance. A full time compliance officer was hired by the College of Medicine to better coordinate their program. She has worked diligently with liaisons in the Clinical Departments to greatly enhance the education and practices of practitioners in the College. Dentistry, in particular, should be singled out for a very aggressive and effective program.

Clinical Programs: An outage in the steam plant for the campus resulted in accreditation visits from the State and the Joint Commission that resulted in loss of deemed status for the Medical Center in December, 2010. This increases the level of scrutiny to which the facility is exposed. The aging facility continues to present compliance challenges as newer safety regulations contain physical requirements that the Medical Center is straining to meet without curtailing its capacities for care to our largely minority, underserved and at risk patients. We responded quickly to the deficiencies and maintain our full accreditation from the Joint Commission, anticipating returning to deemed status shortly.

We continue to cooperate with routine federal and state audits of financial practices within the organization and respond to any deficiencies for which we may be cited.

Additionally, several unscheduled visits from the Illinois Department of Public Health for patient complaints have not found any substantive problems.

Routine accreditation visits were absorbed for our Stroke Program and the Pathology Laboratories, both of which were fully accredited.

Our triennial survey from The Joint Commission is anticipated anytime after January, 2011, and the organization continues in a state of readiness, conducting regular and systematic evaluations of its care systems and processes. This visit will involve several surveyors over a five day period diving into our care and documentation practices at all locations where care is delivered under the banner of UIMC.

Information Security: Information security in the electronic systems continues to be somewhat problematic for the campus. A robust program within the Medical Center has advanced the necessary programs to assure security of information within its domain, but the Health Science Colleges continue to struggle to meet the growing body of regulations. This issue has been recognized by campus leadership, and Provost Tanner charged campus IT leadership to outline an architecture and identify the steps necessary to assure that any high risk data (including patient, research, and educational material) is properly maintained. That report is anticipated shortly.

In summary, compliance with external regulatory bodies and internal policies increasingly requires the support of units at all levels in the University. The Medical Center continues to improve its compliance programs through development of working relationships that cross traditional academic and administrative silos and bring to the table disparate parts of the University community.