

Annual Report FY 23-24



San Francisco Department of Public Health
Office of Compliance and Privacy Affairs
November 19, 2024

Areas of Responsibility

- OCPA is responsible for mitigating potential financial and reputational harm for the San Francisco Department of Public Health. OCPA does this through its four main areas of focus:
 - Protecting patient privacy,
 - Compliance with governmental payer regulations
 - Ensuring legal sharing of DPH data with its partners, and
 - Whistleblower investigations.



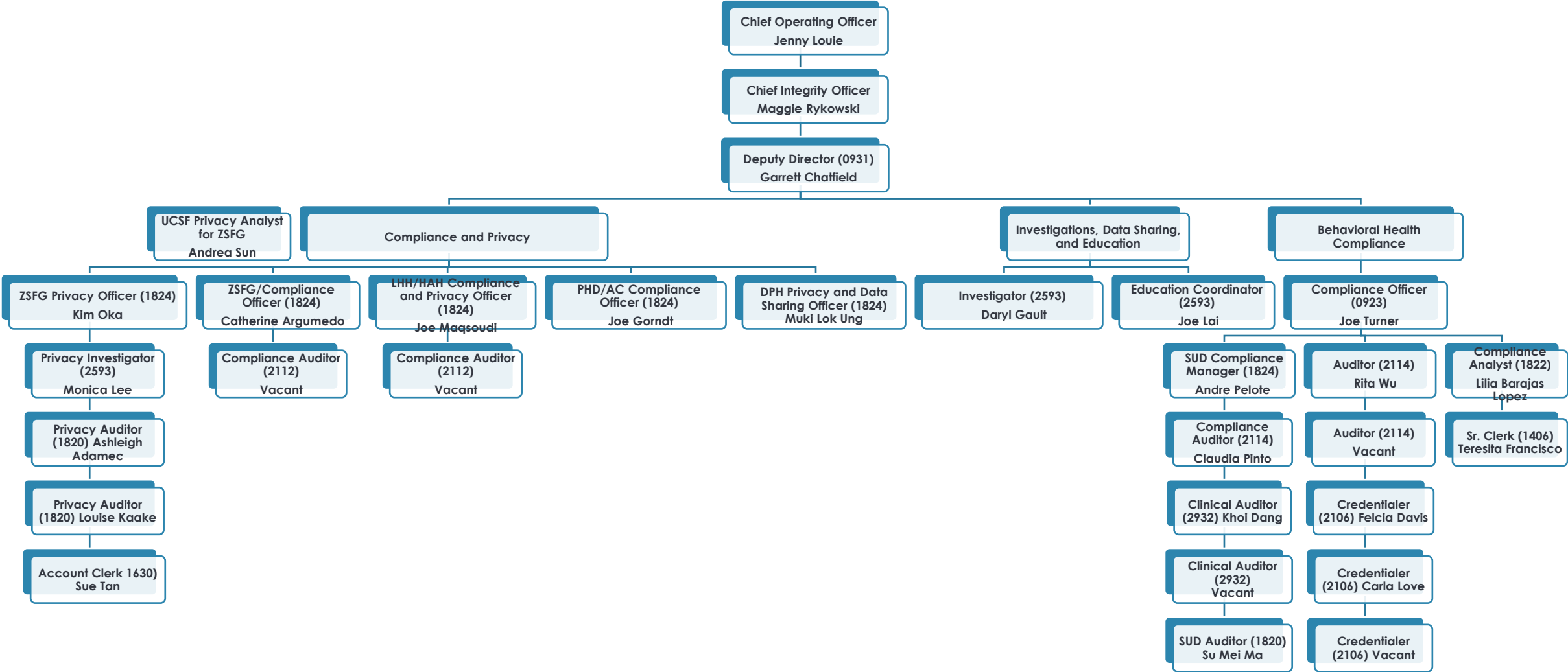
FY 23-24 – Executive Summary

- OCPA continued to focus significant efforts on the Annual Compliance and Privacy training during FY 23-24. Efforts were made to ensure that we matched or exceeded the completion rate that we achieved during FY 22-23.
- OCPA developed new standard work addressing privacy incidents to ensure a unified response across all DPH divisions, and made improvements to its internal case management tools to improve reporting metrics on privacy and compliance matters.
- OCPA's BHS Compliance Program revised its audit protocol to align with CalAIM changes and worked to implement measures to improve the overall error rates of contracted providers.

DPH Organizational Chart

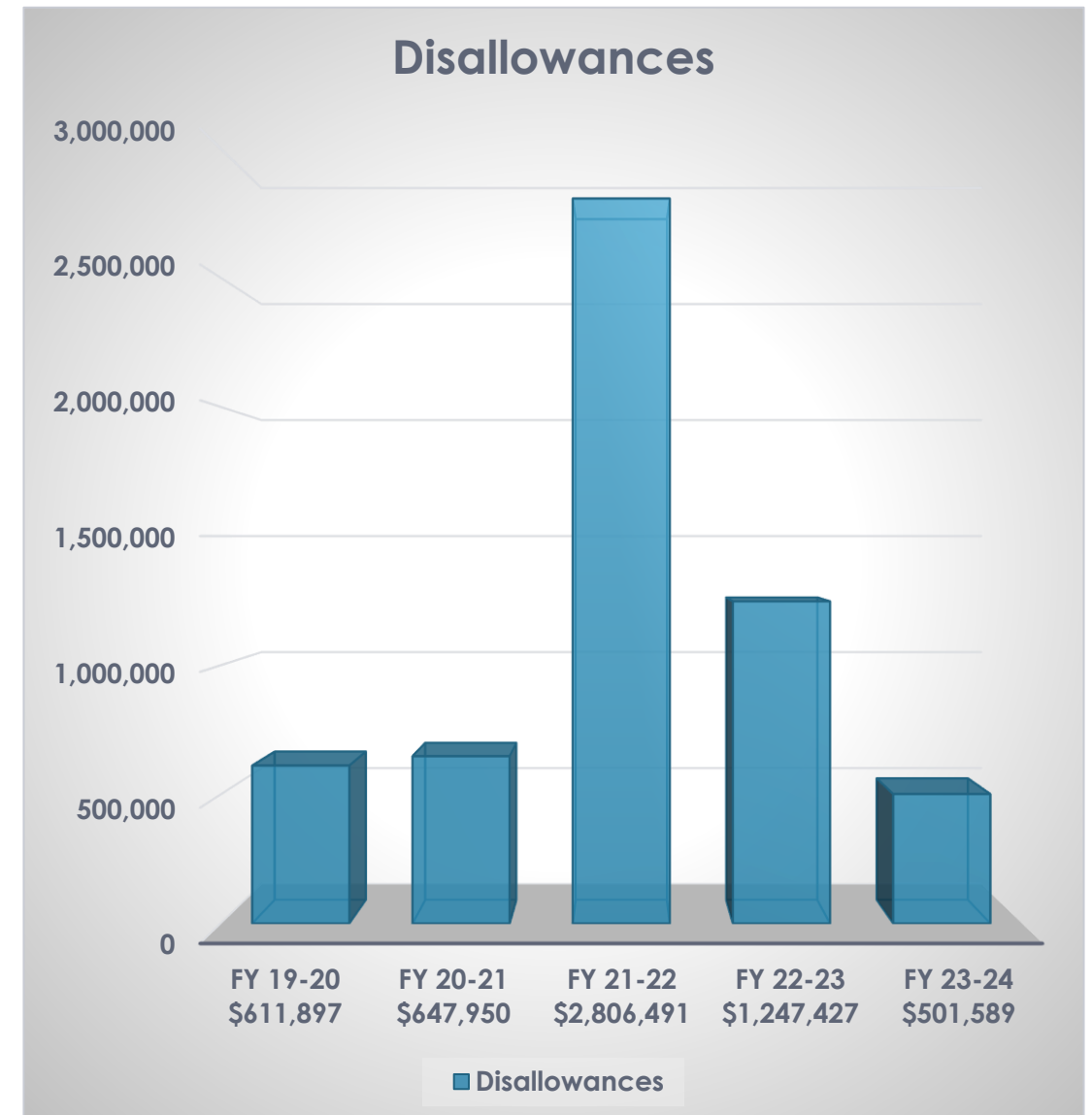


OCPA Organizational Chart



Year-to-Year Comparison

- In FY 21-22 we saw a sharp increase in disallowances that was the result of the resumption of DHCS public hospital audits of ZSFG services after a pause during the COVID-19 public health emergency. Since then, we have seen a decrease in disallowances, including in FY 23-24.
- The Compliance Program works with operational areas to address disallowance findings and to reduce identified errors from reoccurring.



Compliance – Behavioral Health Services

- The Behavioral Health Services (BHS) compliance program is tasked with dual roles.
- It is the Managed Care Plan's auditor that ensures Mental Health Plan/ODS documentation integrity for services provided by our contracted providers.
- It is also the internal compliance program for the system of care.

BHS – Summary of FY 23-24

- Conducted 31 Agency Audits:
 - All Agencies - 13% error rate now (improved from 17% last year)
 - MH Agencies: 9% error rate now (improved from 15%).
 - SUD Agencies: 43% error rate (needs improvement - was 22%).
 - Agencies with MH+SUD: 8% (new this year).
- Improvement Measure Implemented:
 - Increasing Contacts Between BHS Compliance & Providers:
 - New Monthly Program Integrity Meeting (direct line of sight and communication)
 - Maximizing the sf.gov platform (our website contains information and resources)

Method and Metrics for BHS Audit Outcomes

Process of Claim Selection:

- Claims are randomly selected and audited

Outcome Metrics

- Assessing error rates for each agency from the audits (number disallowed claims vs. total claims)
- Assessing the spread of error rates across agencies

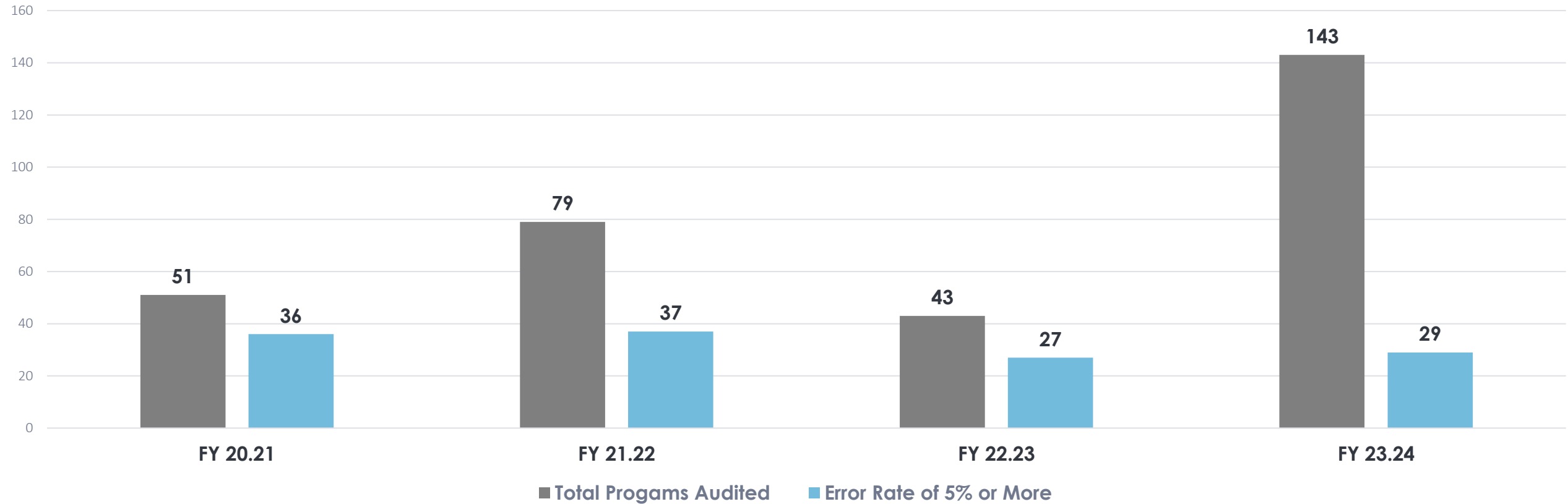
Reporting Levels

- New to FY 23-24:
 - Reported metrics at the agency-level (i.e., the legal entity level)
 - However, continued to report metrics at the program level (i.e., programs within the agency)



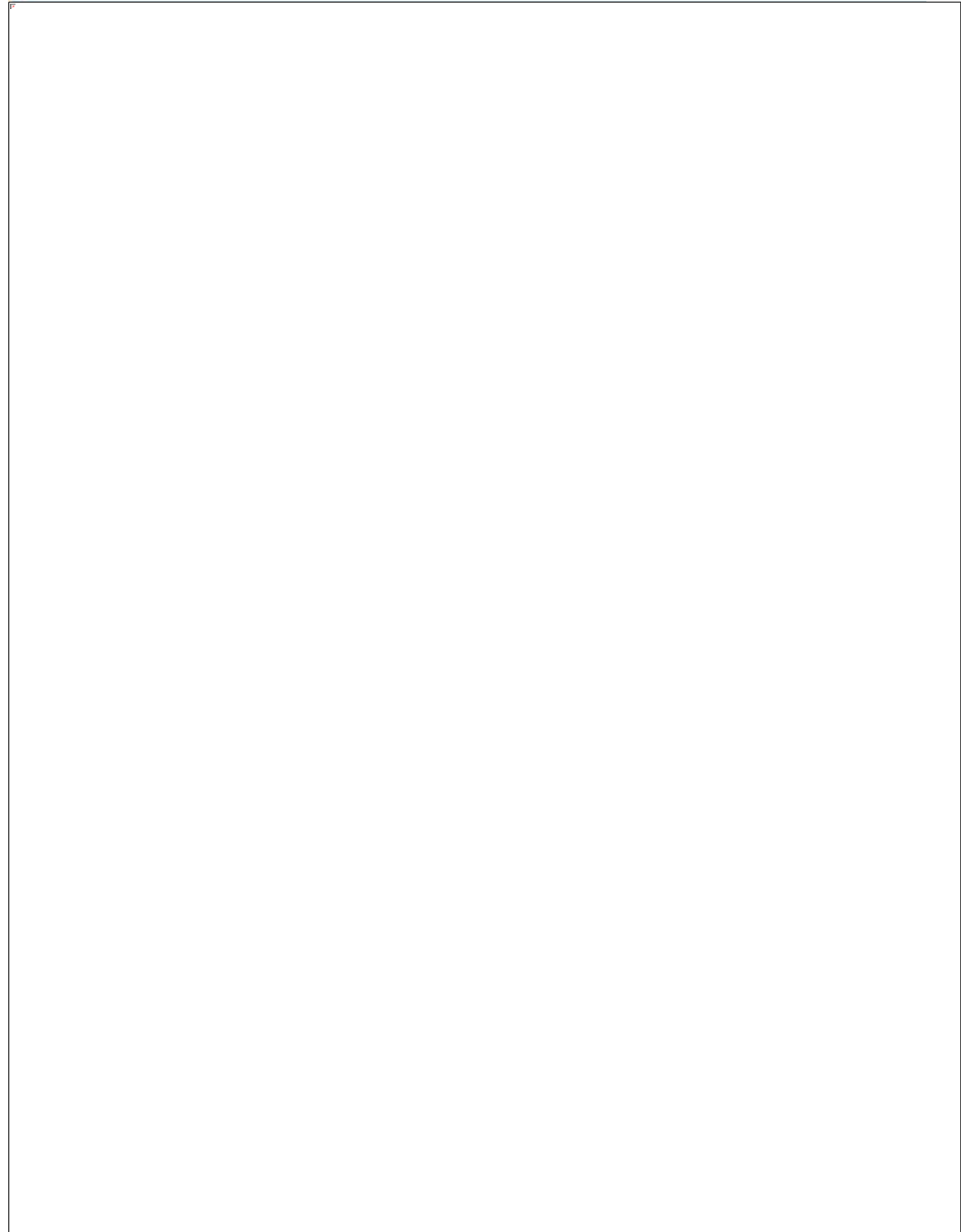
BHS - Year-to-Year Comparison - Programs

Total Audits Performed with Error Rates



Compliance Mitigation Efforts

- OCPA issues the Compliance and Privacy Matters every month where we focus on compliance and privacy topics that impact DPH.
- The Compliance and Privacy Matters presents one Compliance or Privacy topic per publication.



Privacy Program

Overview and Fines

- The Privacy Program's purpose is to ensure the confidentiality, integrity, and availability of all Protected Health Information (PHI) that DPH creates, receives, maintains or transmits.



Penalties/Fines FY 23-24

- During fiscal year 23-24, DPH was assessed penalties by the California Department of Public Health for three breaches that occurred in 2020.

Privacy Incidents FY 23-24

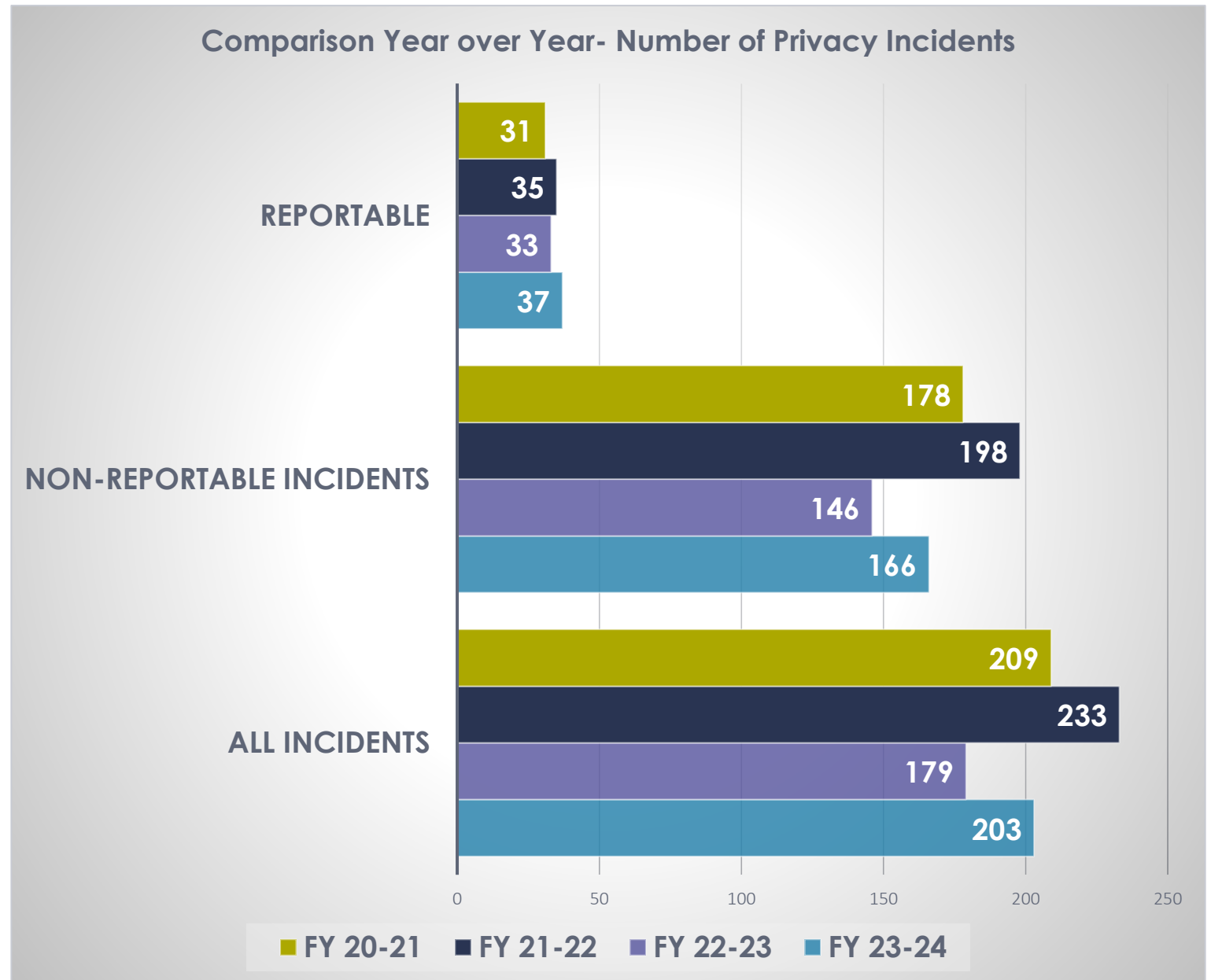
This chart shows the number of privacy incidents by location.

Number of Privacy Incidents FY 23-24

Location	Reportable Breaches	Non-Reportable Incidents	Total Incidents	% of Reportable Breaches Out of Total Incidents
ZSFG	23	110	133	17%
LHH	1	19	20	.5%
BHS/CBO	10	26	36	28%
DPH – All Other	3	11	14	21%
Total	37	166	203	18%

Over the last four fiscal years reportable breaches have remained about the same.

Year-over-Year Comparison



Privacy Mitigation Efforts


- OCPA issues the Privacy Pulse every two months to address topical privacy concerns, and to emphasize DPH's commitment to patient privacy.
- OCPA also conducts targeted training in response to privacy incidents and recommends corrective actions to mitigate future reoccurrence.

San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

PRIVACY PULSE

February 2021 Issue

Access to Own Record Using *MyChart*




What you need to know about accessing your own record in EPIC:

- DPH and LHH employees are **restricted** from accessing their own records and records of family members.
- Looking up any person's results through Epic is **not allowed**, unless they are a patient under your direct care.
- Staff and providers **are not granted rights to view, alter, or add** to any documentation into their own record in EPIC (including viewing own test results or medical information, updating own contact information, schedule an appointment for yourself, etc.).

What you need to do...


- Please access your record via the *MyChart* patient portal and **not** through your provider Epic account.
- Staff and providers who want to know their test results (such as COVID-19) must access the information through the EPIC patient portal via *MyChart*.
- If you are having difficulty accessing your *MyChart* patient portal, please contact the Medical Records Release of Information Unit at (628) 206-8622.



Things you need to know...
If you access records for non-business purposes, corrective and disciplinary actions may include loss of privileges, impact to your professional license and can lead to **termination!**

Failure to comply with HIPAA requirements can result in civil and criminal penalties. These penalties can apply to both covered entities and individuals.

Report a Privacy Breach:



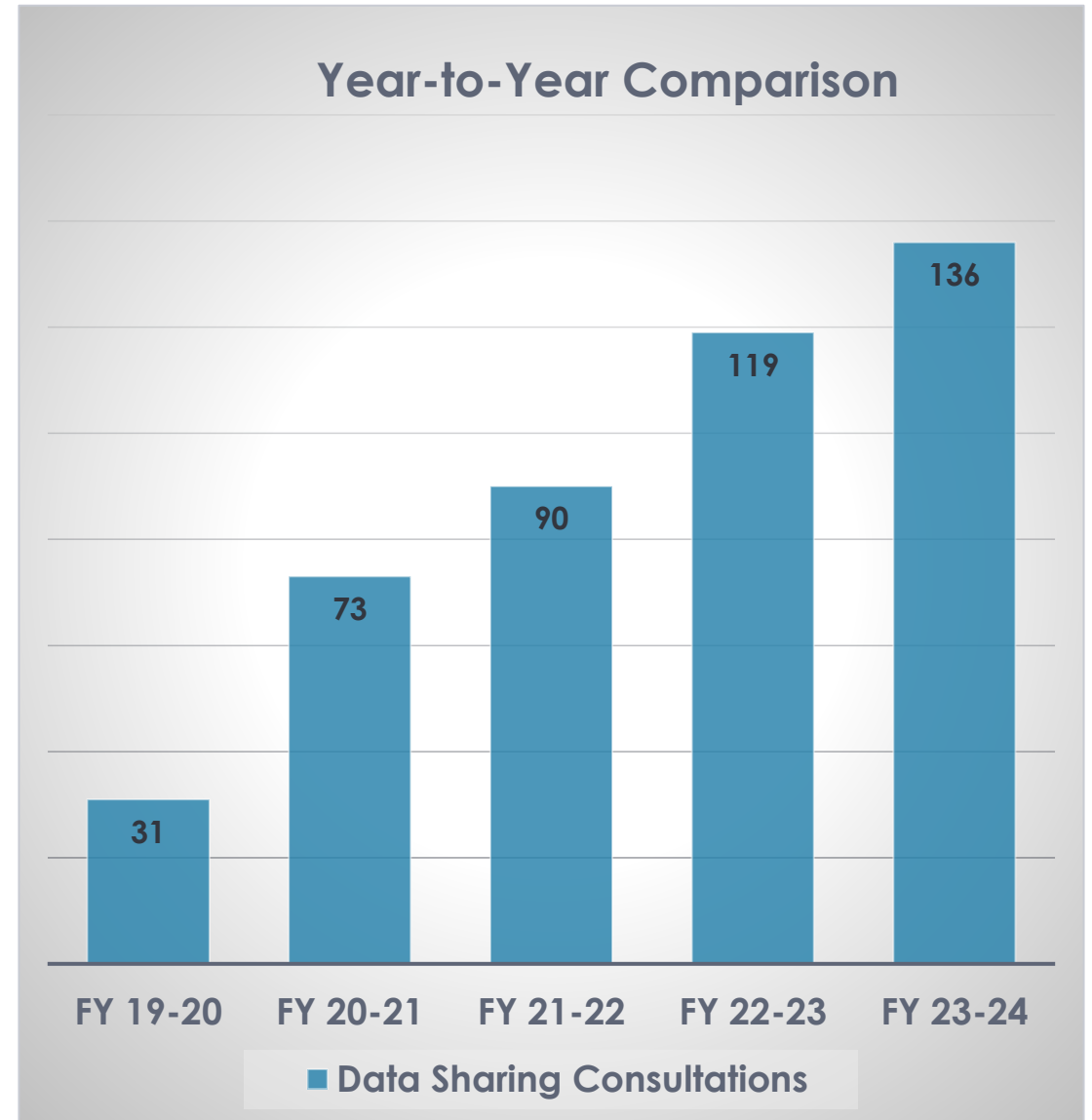
Report every potential breach of Protected Health Information (PHI):

- LHH Privacy Officer: (415) 205-3993
- Privacy Hotline: (855) 729-6040
- Email: compliance.privacy@sfdph.org
- Refer to [Breach Notification Policy \[21-18\]](#)

The Privacy Office also provides consultation on all privacy related questions. Please feel free to contact us.

Data Sharing

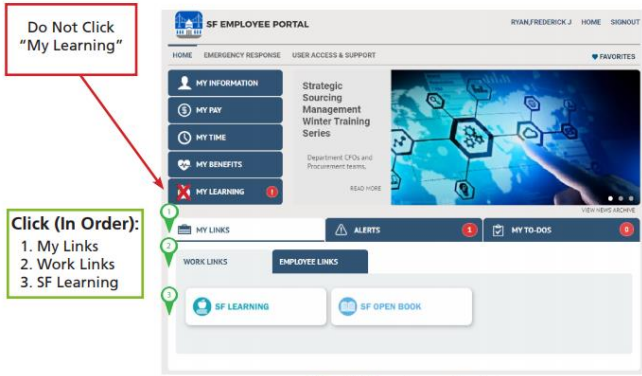
- OCPA manages and oversees the data sharing program for DPH as part of its privacy program. Business Associate Agreements and Data sharing Agreements allow for DPH to legally share PHI with vendors and partners, as well as other relevant City agencies to coordinate care and services.
- OCPA works closely with Contracts, IT Security, and the City Attorney's Office to protect DPH's interests, and to define the scope and use of our PHI.
- Our data sharing work includes:
 - Working with Contracts to establish and approve data access agreements and business associate agreements.
 - Assure adequate checks are completed before sharing PHI related to data security, privacy, and business need.



Compliance and Privacy Training

- The annual DPH Compliance and Privacy Training is assigned to all DPH employees, UCSF staff working at DPH, and all other vendors and partners working on behalf of DPH.
- The training is accessed from the SF Employee Portal by clicking on the “My Links” tab and entering SF Learning.
- OCPA revised the training to address regulatory changes and streamline the user experience.

Once you're in the Employee Portal, follow the below directions to get to your "My Learning" tab. Please follow the below order. Note: there may be some delay in the "My Task" tab loading.



Do Not Click "My Learning"

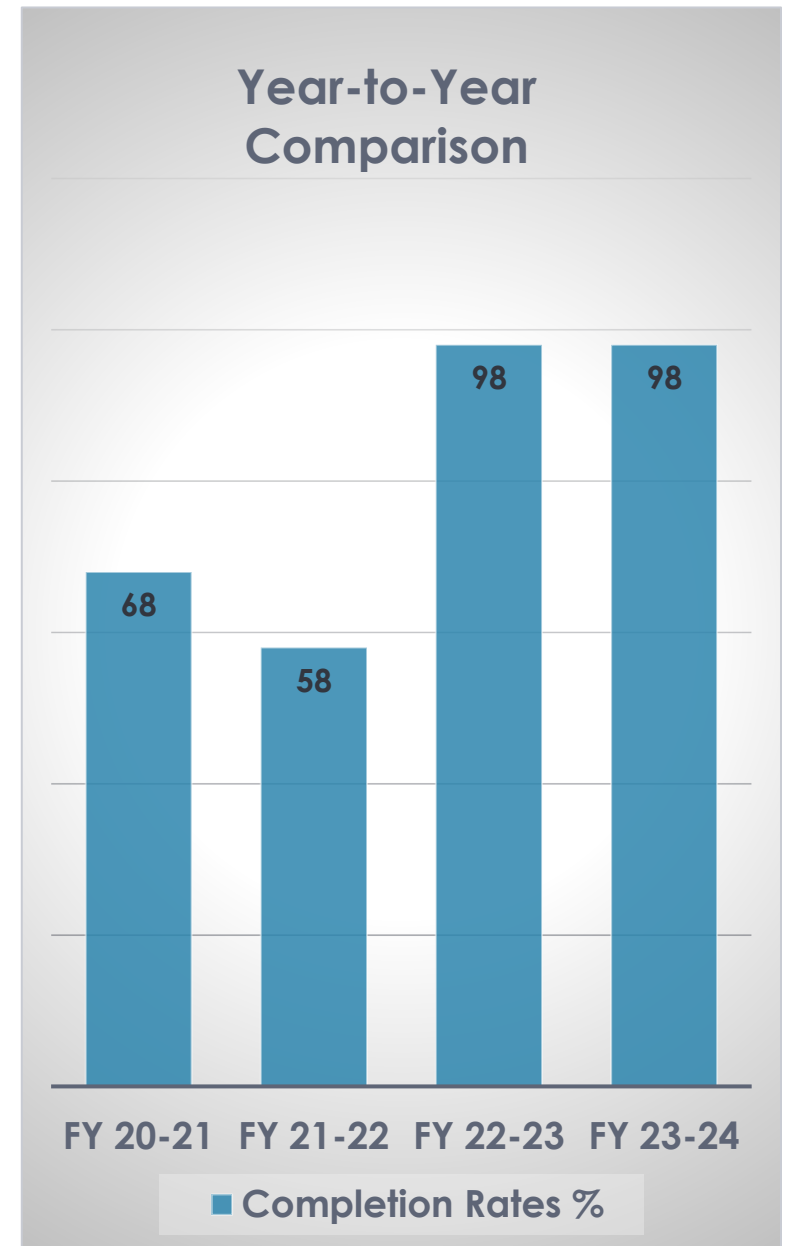
Click (In Order):
1. My Links
2. Work Links
3. SF Learning

The SF Employee Portal

Step Two: My Learning

Annual Compliance and Privacy Training

- OCPA worked to maintain the high completion rate for the annual Compliance and Privacy training.
- During the training period, OCPA continued outreach efforts to managers and staff to encourage completion.





Whistleblower Program

- The Office of the Controller Whistleblower Program receives complaints regarding deficiencies in governmental services, wasteful governmental practices, misuse of City funds, and improper activities by City employees and officials.
- The Office of the Controller Whistleblower Program refers complaints involving DPH to OCPA for investigation.
- The Controller's Office received 147 complaints regarding matters at DPH during FY 23-24.*
- DPH receives the highest number of Whistleblower complaints among all City departments.

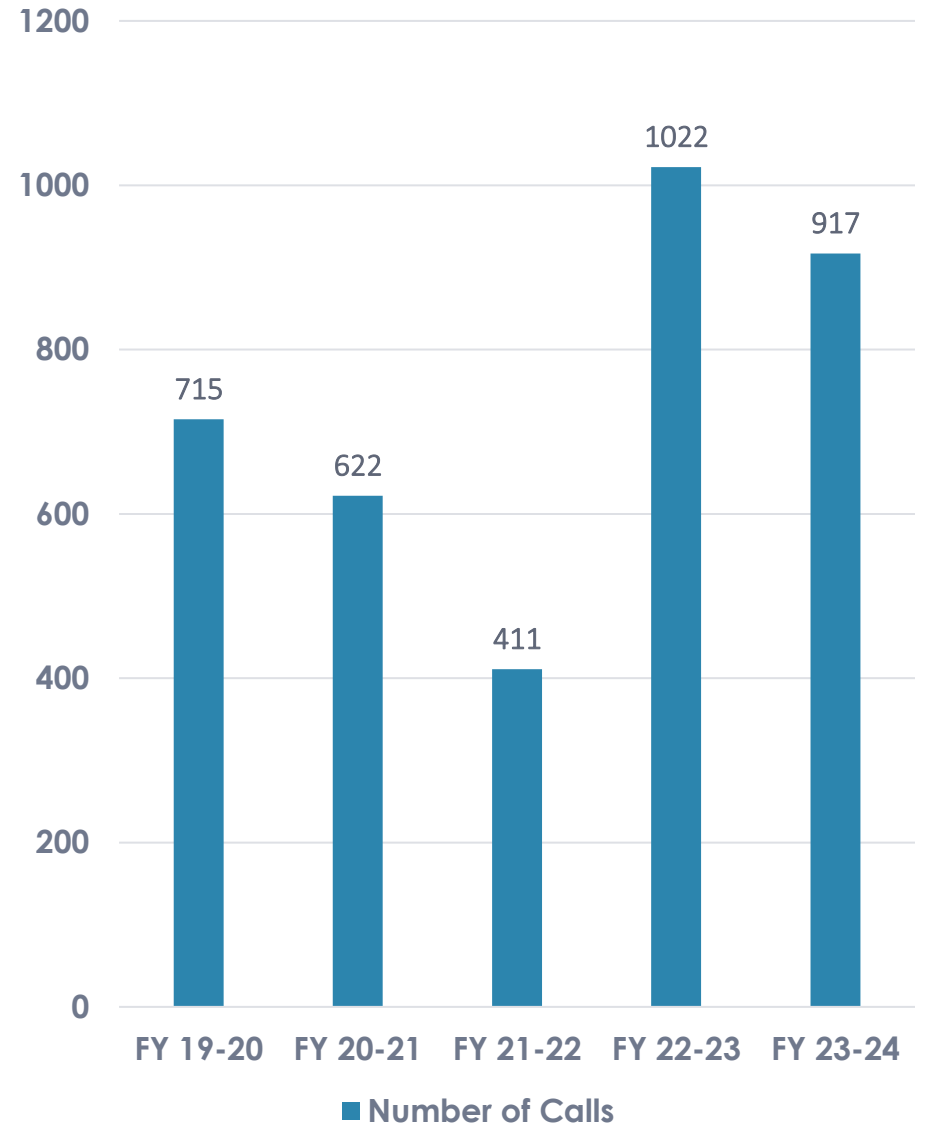
*Information obtained from the Controller's Office Whistleblower Program Quarterly Reports for FY23-24.



OCPA also maintains a Hotline where individuals can directly file complaints or concerns regarding privacy incidents, compliance matters, employee conduct, questions about the annual training, and any other matter of concern. During FY 23-24 the Hotline received 917 inquiries on various matters.



Number of Calls





Thank you!

- For any questions you have about Compliance, Privacy, Conflicts of Interest, Gifts, and other Ethics rules, please contact OCPA. We are here to provide guidance and advice.
- Hotline: **855-729-6040**
- Email: compliance.privacy@sfdph.org