



# Considerations When Auditing Campus Clinics

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Presenters:

Mike Miller, CIA, CGAP, Texas State University System, Texas State University

Ramona Stricklan, CIA, CFE, Texas State University System, Lamar Components

# Session Overview

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Campus clinics offering various healthcare services.

Examples of clinics: student health, audiology, speech, psychology, and counseling.

Multiple risks exist within these clinic:

- HIPAA - privacy standards and security standards compliance
- Proper oversight and monitoring especially in training clinics
- Security of medical records (access to hard copy or electronic medical records)
- Safety of personnel or students working in these clinics
- Security of and access to patient portals
- Security of pharmaceutical drugs
- Billing and collections
- Licensing of personnel and insurance coverage

This session will explore audit procedures and considerations when performing audits of these operations.

## Session Objectives

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- Identify and understand risks associated with campus clinics
- Identify significant processes and activities
- Offer suggestions for testing procedures in specific areas
- Provide resources and information links

## So What Went Wrong?

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- What risks were present?
- What concerns would you have about the operations?
- Do you think this could happen on your campus?

# Identifying and Understanding Risks Associated with Campus Clinics

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Identify types of clinic operations on campus:

- Student Health Clinic
- Women's Clinic
- Physical Therapy
- Psychology and/or Counseling Clinic
- Audiology Clinic
- Speech Language Pathology Clinic

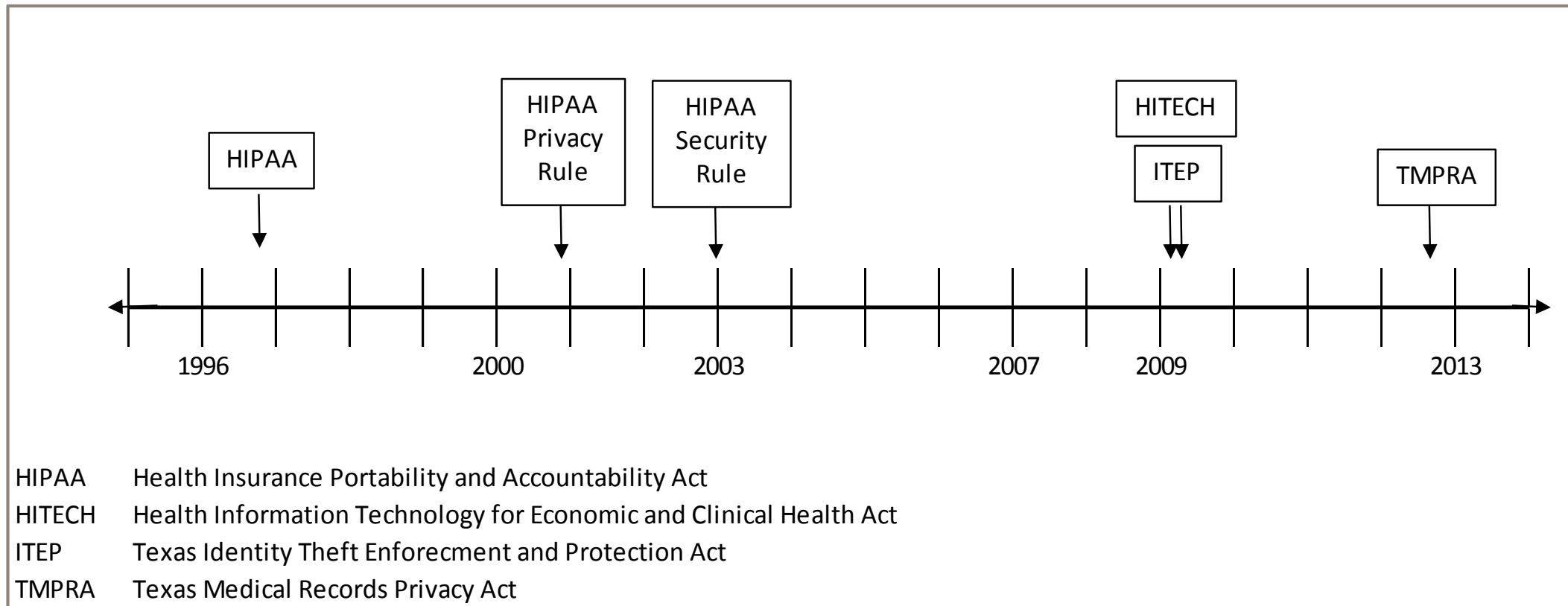
# Identifying and Understanding Risks Associated with Campus Clinics

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Review policies, procedures, rules, regulations, and statutes.

- University or System policies
- Clinic policies and procedures
- State statutes, codes, and laws
  - Texas Occupation Code
  - Texas Health and Safety Code
    - Texas Medical Records Privacy Act
    - Mental Health Records
- Federal laws and regulations
  - HIPAA (Privacy and Security)
  - FERPA
- PCI-DSS (Payment Card Industry Data Security Standard)

# Identifying and Understanding Risks Associated with Campus Clinics



Source Cited: <http://obt.com/wp-content/uploads/2014/07/McKinney-TADC-medical-records-HIPAA.pdf>

# Identifying and Understanding Risks Associated with Campus Clinics

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## Federal:

- Health Insurance Portability and Accountability Act (HIPAA) – privacy of “protected health information” (PHI)
  - Privacy Rule
  - Security Rule
- Health Information Technology for Economic and Clinical Health Act (HITECH) – extended privacy rule and security rule to “business associates”
- Family Educational Rights and Privacy Act (FERPA) – privacy of educational records



# Identifying and Understanding Risks Associated with Campus Clinics

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## State:

- Texas Medical Records Privacy Act (Chapter 181 of the Health and Safety Code) – expanded definition of “covered entity”
- Texas Identity Theft Enforcement and Protection Act (Chapter 521 of the Business and Commerce Code) – protected “sensitive personal information” (SPI)
- Texas Health and Human Services Commission Regulations (Chapter 390 of the Health and Safety Code)

# Identifying and Understanding Risks Associated with Campus Clinics

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## Interview management, faculty, and staff

- Identify who has primary oversight responsibilities for the clinic
- Walk through a typical clinic appointment
- Walk through a non-typical clinic appointment (e.g. emergency situation)
- Inquire if there have been any outside audits and/or reports
- Determine if student workers or students in training work in the clinic and what their roles are
- Ask about negative events or complaints

# Identifying Significant Processes and Activities

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- Consider what you know about making a doctor's appointment
- Consider common processes
- Where do the most significant risks lie?
- What could go wrong that could jeopardize patient safety/privacy, staff safety, operations, reputation, etc.?

# Identifying Significant Processes and Activities

| Significant Processes and Activities                              |   |
|---|---|
| Scheduling  | Information technology and security               |
| Intake  | Supervision and oversight                         |
| Obtaining consents for treatment and for video/or voice recording | Timely and accurate documentation in patient file |
| Billing and collections/cash handling                             | Training  |
| Research activities   | Contractual arrangements                          |
| Grants  | Physical access to patient files                  |
| Pharmaceutical inventory  | Equipment inventory                               |
| Tracking licensure and insurance coverage                         | Background checks                                 |
| Research  | Crisis situation/emergency procedures             |

# Fraud Considerations

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Examples of fraud considerations:

- Theft of cash, pharmaceutical drugs, or supplies (needles)
- Stealing patient identifiable data and financial data (credit card data)
- Billing for services not rendered
- Waiving of deductibles or co-payments
- False or unnecessary issuance of prescription drugs

# Examples of Audit Objectives & Testing Procedures

Determine if appropriate supervision and monitoring exist to ensure effective and efficient operations and sufficient oversight of all staff.

1. Request organization chart or develop one from interviews and inquiries.
2. Inquire about employee training. Request support for staff training in areas of privacy compliance (HIPAA, FERPA, Texas Medical Records Privacy Act), safety, use of EHR, etc.
3. For student trainees, review a sample of files to ensure review and signoff was performed by a supervisor.
4. For licensed employees, review a sample of files for completeness.

If hard copy patient files are used, determine if they are maintained in a secure area with limited access.

1. Visit the location of hard copy files.
2. Determine if files are in a lock filing cabinet or in a locked room.
3. Determine who has keys to clinic and to areas where patient files are maintained.
4. Ask to see log book showing access to files.
5. Ask for list of client files. If none, you may need to inventory the files as of a specific date.

# Examples of Audit Objectives & Testing Procedures

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Determine if patient files contain all required forms and have been properly reviewed and signed.

1. From a sample of files, determine if required forms such as informed consents, initial intakes, fee/payment agreement, consent to video/voice record, release of medical records have been completed and signed.
2. Determine if documentation (e.g., provider notes, progress notes) after each visit have been properly signed.
3. If electronic file, gain reader access and determine how “forms” are completed. May be a combination of hard copy and electronic. Sometimes hard copy paperwork is scanned into the electronic health record (EHR).

Determine if emergency procedures are documented and if staff is trained on these procedures.

1. Obtain copies of any emergency or crisis situation procedures.
2. Identify any potential deficiencies within the procedures.
3. Obtain evidence that staff has been trained on these procedures.
4. Inquire as to circumstances in which staff have had to enact these procedures and the outcomes.
5. Interview staff on their knowledge of these procedures.

# Examples of Audit Objectives & Testing Procedures

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Determine if appropriate controls exist for billing and collections.

For electronic system:

1. Generate an A/R list.
2. Pull collections for a certain period.
3. Pull patient names from schedules and review in patient accounting system.
4. Obtain fee schedule.
5. Identify patient population and select a sample.
6. Pull account activity for the sample, if any activity. Pull by exceptions.
7. Review billing timeliness, collection activity, adjustments, write-offs.
8. Determine if proper segregation of duties exists for cash collections, credit card activity, deposits, recording revenue, making adjustments, etc.

For manual system:

1. Inquire as to how patient accounting is tracked and maintained. Obtain a fee schedule.
2. Determine if any A/R list is maintained.
3. Review receipt book.
4. Review patient files for indication of payments received.



# Examples of Audit Objectives & Testing Procedures

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Determine if access to EHR or any applications or systems containing patient data or information is limited based on job duties.

1. Determine what systems or applications are used.
2. Obtain reports showing who has access to which functions within the system or application.
3. Identify any segregation of duties problems.
4. Review access/audit logs and compare to job duties. Inquire about access to files which may not coincide with job duties.
5. Determine if system or application is maintained in a secure area within the network.

Determine if a process exists to ensure employees are properly licensed to perform job duties and are covered by malpractice insurance without any lapse in coverage.

1. Determine who maintains records of licensure and malpractice insurance.
2. Review licensure records of current employees and compare to their job duties.
3. Obtain copies of proof of malpractice insurance coverage for employees required to carry such coverage. Determine if coverage has been continuous. Determine who pays for the coverage.

# Wrap Up

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- Include campus clinics in risk assessment process.
- Don't be afraid to audit because Audit staff are not healthcare experts as there are enough processes and activities to review that do not require a clinical background or clinical experience.
- Become familiar with laws and regulations regarding protected healthcare information, personally identifiable information, sensitive personal information, covered entities, and business associates.

# Resources

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- <http://www/statutes/legis.state.tx.us/>
  - Health and Safety Code
  - Occupations Code
  - Business and Commerce Code
  
- [http://texreg/sos.state.tx.us/public/readtac\\$ext.viewtac](http://texreg/sos.state.tx.us/public/readtac$ext.viewtac)
  - Texas Administrative Code
    - Health Code
    - TAC 202 – information Security Standards
  
- <http://www.hhs.gov/hipaa/for-professionals/security/laws-regulations/HIPAA Privacy Rule>
  - HIPPA Privacy Rule
  - HIPPA Security Rule

# Resources

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- “Are You Auditing Your Student Health Center? If Not, Why Not?”
  - [http://www.acua.org/ACUA\\_Resources/documents/ACUACandUJurnalSummer\\_14\\_FinalWeb.pdf](http://www.acua.org/ACUA_Resources/documents/ACUACandUJurnalSummer_14_FinalWeb.pdf)
  
- “10 Popular Health Care Provider Fraud Schemes”
  - <http://www.fraud-magazine.com/article.aspx?id=4294976280>
  
- Covered Entity Charts
  - <https://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/HIPAAGenInfo/Downloads/CoveredEntitycharts.pdf>
  
- Attorney General of Texas: State and Federal Health Privacy Laws
  - <https://texasattorneygeneral.gov/cpd/state-and-federal-health-privacy-laws>

# Presenters' Contact Information

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**Mike Miller, CIA, CGAP**  
Senior Auditor  
Texas State University System  
Texas State University  
[wmm30@txstate.edu](mailto:wmm30@txstate.edu)  
512-245-8105

**Ramona Stricklan, CIA, CFE**  
Audit Director  
Texas State University System  
Lamar Components  
[ramona.stricklan@lamar.edu](mailto:ramona.stricklan@lamar.edu)  
409-880-1766