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## **Annual Compliance Work Plan – Calendar Year 2023**

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### **Purpose and Organization**

The Lake County Health Department and Community Health Center (LCHD/CHC) Compliance Program Work Plan (Work Plan) describes activities in support of the Agency's Compliance Plan during the calendar year 2022. It is used to provide a structured approach to implementing ongoing activities such as compliance program audits and training as well as "one time" projects intended to improve processes or program results.

The Work Plan addresses one or more aspects of the following seven elements of an effective compliance program:

- 1) Written Policies, Procedures, and Standards
- 2) Designation of a Compliance Officer and Compliance Committee
- 3) Effective Training and Education
- 4) Developing Effective Lines of Communication
- 5) Auditing and Monitoring
- 6) Enforcing Standards Through Well-Publicized Disciplinary Guidelines
- 7) Response to Violations and Development of Corrective Actions

### **External Documentation and Coding Audit**

An external coding consultant was selected to assist with a gap analysis. This analysis informs the establishment of a provider baseline for documentation and coding. The consultant will also provide training on new codes for the coming year. An initial coding training was conducted for all medical providers in January 2023 for the new codes. A similar training will be conducted in March for all psychiatrists for the new codes and based on an analysis of their individual documentation. Coding audits will be conducted by the external coding consultant after training is complete to determine if additional one on one training is needed.

### **Develop Data Recovery Strategies for Cloud Services**

Create a plan for leveraging our cloud presence to provide greater availability of services in case of an emergency or disaster. Develop a strategy for multiple data replications to ensure our data loss is minimal in the case of disaster recovery. These efforts may include the implementation of a specialized solution (know as an air-gapped solution) that is protected from ransomware. Where possible, align our backup architecture with the Lake County Enterprise Information Technology department.

### **Grant Funded Equipment Audit**

Conduct an inventory of all grant funded equipment. Complete any required improvements and verify that the desired impact was sustained.

### **Assess Policy Management System**

This item is carried over from the 2022 Work Plan. Near the end of 2022, we became aware of an option to consider for a policy system provided as a new offering through an existing technology partner. A demonstration was provided by the company and initial cost proposals are under review. A more detailed review of the functionality will be completed with a larger group of interested staff to fully vet the viability of the solution. If viable and agreeable pricing can be reached, we expect to move forward by mid-2023. Otherwise, this review will provide us with an understanding of system features which can be used to assess alternatives. A system selection and implementation in 2023 is expected.

### **Refine the processes for on/off-boarding personnel and equipment.**

The processes related to staff and contractors starting and stopping work on behalf of LCHD/CHC require actions to help assure the security of our data. Some proposed areas of activity include: 1) Identifying gaps and improvements which may negatively affect information security 2) Implement process changes that create efficiencies in these processes and close identified gaps 3) Ensure there are clearly defined roles and responsibilities for the processes. This will include the development and implementation of role-based access for security compliance. 4) Provide tracking tools to enable more insight on system use and access. This type of review is a best practice expectation for information security under HIPAA.

### **Training**

Assure the development of more formal process for the deployment of required training and the tracking of timely completion consistent with the organizational expectations for key compliance topics.

### **Computer Equipment Inventory Audit**

Staff shall conduct an internal audit of computer equipment to determine adherence of internal policies and procedures and to verify the tracking processes of the equipment are in place. Complete any required improvements and verify that the desired impact was sustained.

### **Gift Card Audit**

Conduct an audit of Gift Card purchases to determine adherence to internal policies and procedures as well as to any grant rules and regulations regarding the use of Gift Cards. Complete any required improvements and verify that the desired impact was sustained.

### **Inventory/Asset Mgmt System/Solution**

Assess current needs for inventory and asset management system solutions. Currently, equipment and assets are tracked in different systems. This occurs, in part, due to the evolution of grant-funded equipment tracking requirements and the growth in technology and specialized equipment used in daily operations. In addition, the tracking of supplies inventories is decentralized. Through analysis of current systems, identification of improvements needed to closely monitor location and use, and potential benefits to improve operations, this initiative will determine if one or more software systems is needed to resolve identified needs. Then, systems solutions will be pursued and implemented.