

Healthcare fraud enforcement in federal programs

an interview with
Amy Berne





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by Nancy J. Beckley

Connecting for advice, and maybe a breach? Facebook grand rounds

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It all started with grand rounds—my questions and answers about therapy patients. Let me give some context. I started my career in therapy at the most exciting time. I was developing wheelchair sports programs, community integration rehabilitation activities for discharged spinal cord-injured patients, and often spent the day in my rehabilitation center’s therapy pool. During those days over 30 years ago, I learned compliance from all the risk management exposure—permission to bring pets in the rehab center, taking patients “sit-ski” water skiing, and assembling wheelchair rugby, basketball, and track teams. During these at-risk activities, it was important to know how to manage a patient, based upon their medical complexities, including the risk of pressure sores, autonomic dysreflexia, sodium content, catheterization and suction schedules, and adaptive equipment.



Beckley

Fast forward to today, and although hospital grand rounds are still taking place, there is another network of grand rounds taking place in online groups. Well-intentioned students and new therapists post detailed descriptions of their “cases,” hoping to get advice on treatment techniques and approaches. Sound good? Well, not exactly,

under HIPAA. People who post online, who believe that they are in a “group,” may not understand that an online post is accompanied by their picture and profile. A poster’s profile likely includes place of employment, such as a therapy clinic, skilled nursing facility, or a hospital. The group includes new therapists as well as student therapists. Match that with identifying patient information or a picture or video to demonstrate the problem. It’s easier to connect the dots to a HIPAA breach than the poster, or the Privacy Officer, may even be aware.

So where is the clinical instructor or the referring physician? Where is additional medical and background information to assist the posting clinician? Far too many clinicians ask for advice by identifying someone as a family member (“my brother has this condition...”) or a neighbor. Online posters never seem to have “hypothetical” patients. Is it just too easy to spill it all out? I have been watching online posting in preparation for a few presentations about the use of “fake news” related to documentation coding and billing that could potentially lead to the submission of a false claim. A recent poster updated the status of a “case.” I wondered if I should pick up the phone and call the Privacy Officer—once it was there for everyone to see that the patient presented in social grand rounds had a psychological overlay and with details of the psych consult. What’s your policy on Facebook grand rounds? 