

PAUL E. FLANAGAN, JD, MS, CHC, CCEP

215-571-4708 (W)

EDUCATION

InfraGard- Member in FBI -Partnership Association, 2015

Certified Compliance & Ethics Professional (CCEP), 2012

Certified Healthcare Compliance (CHC), 2005

Juris Doctor, Creighton University School of Law, Omaha, Nebraska 1995

- Honors - Highest Grade Awards: Law and Medicine, Criminal Law, Remedies

Masters of Science in Human Resources, Widener University, Chester, Pennsylvania 1993

- Graduated with Honors:

Bachelor of Arts, Catholic University of America. Washington, DC 1988

- English Literature and Composition

EXPERIENCE

Executive Director, Compliance and Privacy Services

Drexel University Compliance and Privacy Office, Philadelphia, Pennsylvania, June 2014- October 2017

- Helped manage the Compliance and Data Privacy and Security programs of the University focusing the majority of effort on monitoring and educational activities of the programs.
- Responsible for Providing complete and comprehensive compliance and privacy services to The Drexel College of Medicine/ Medical School including HIPAA/Privacy and Compliance Program.
- Provides guidance for senior management of the University on activities related to the development, implementation, maintenance of, and adherence to the University's policies and procedures covering the privacy of student, faculty, professional staff, and institutional data, including sensitive and Protected health information and compliance with local, state, federal regulatory requirements and the University Code of Conduct.
- Responsible for implementing, monitoring, maintaining, and assessing the University's Compliance and Data Privacy and Security programs and associated policies, with particular focus on data privacy of sensitive and health information and promoting and reinforcing a culture of integrity imbued with ethical business principles and practices.
- Serves as an internal resource to enable concerned parties to quickly address compliance and privacy and security matters with appropriate recommendations for resolution.
- Acts as a channel of communication to receive university compliance, hotline and privacy incident reports and to enable investigation and resolution.
- Established an Enterprise Risk Management program for the University.
- Help manage Hotline calls.
- Help manage Conflict of Interest Program.
- Helped manage Cybersecurity Audit and Risk Assessment

Chief Compliance/Privacy Officer, and Internal Audit

Abington Memorial Health, Abington, Pennsylvania, June 2012- June 2014

Abington Memorial Hospital (AMH) is a 665-bed, regional referral center and teaching hospital, which has been providing comprehensive, high-quality services for people in Montgomery, Bucks and Philadelphia counties for more than 90 years. AMH employs over 5,400 employees, and is one of the largest employers in Montgomery County. The hospital's medical staff consists of over 1,100 physicians, including primary care, medical and surgical specialists.

- Developed a Work Plan, Risk Assessment, and Gap analysis for Compliance and Privacy Risks.

- Developed an institutional Audit Program reviewing institutional risks.
- Developed an institutional Business Ethics Program reviewing institutional risks.
- Instituted an institutional-wide Annual and Refresher Training program, training over 6500 employees on the Compliance Program, Code of Conduct and Select Compliance, Privacy and Security policies.
- Developed Specific Training on identified risks and policies to address those risks.
- Report quarterly to the Board and Weekly to the CEO
- Oversee Hotline and Compliance Investigations.
- Oversaw the implementation of HIPAA/Privacy Program and compliance with the HIPAA Omnibus Final Rule for September 23, 2013 deadline.

VP Business Integrity and Chief Compliance & Privacy Officer

Precyse Solutions, Wayne, Pennsylvania, October 2011 – July 2012

Precyse Solutions is an industry-leading provider of quantifiable, outsourced Health Information Management (HIM) services to U.S. based hospitals and healthcare organizations. Its services include medical transcription, coding, oncology data management, HIM consulting, and interim management and departmental outsourcing.

- Developed a Risk Assessment Gap analysis for Compliance and Privacy Risks.
- Oversee and direct a Quality Coding Audit Program directing 4 Quality Auditors to review coding audits including a conversion to ICD-10.
- Developed an institutional Audit Program reviewing institutional risks.
- Developed administered and trained on Compliance, Privacy and Coding Policies.
- Instituted an institutional-wide Annual and Refresher Training program, training over 1100 employees on the Compliance Program, Code of Conduct and Select Compliance, Privacy and Security policies.
- Developed Specific Training on identified risks and policies to address those risks.
- Report quarterly to the Board and Weekly to the CEO
- Oversee Hotline and Compliance Investigations.

Chief Compliance Officer / Privacy Officer

Hahnemann University Academic Hospital, Philadelphia, Pennsylvania, February 2010 - October 2011

Established in 1885, and acquired by Tenet Healthcare, Hahnemann University Hospital is a for profit teaching hospital with 618 beds, magnet recognition, and ranked as one of the Top 50 Hospitals in US News and World Report in 2010. Hahnemann is affiliated with Drexel University College of Medicine and St. Christopher's Hospital for Children.

- Instituted a comprehensive education and training program that included general and specific compliance training for 3,200 people regarding various compliance issues and risks including Stark, Red Flag Program, RAC, False Claim Act, HIPAA and other compliance topics as required by the Corporate Integrity Agreement with the federal government.
- Responsible for auditing and monitoring, compliance investigations, Board Reports, quality and JCAHO monitoring.
- Chaired and ran the monthly Compliance Committee which included the CEO, CFO, CMO, CNO and directors on all compliance related issues.
- Worked with Risk Management on all risk issues within the complex academic hospital.
- Oversaw and directed the Clinical Research Director on the legal aspects and compliance requirements relating to research, including conflicts of interest and research activities, within the hospital.
- Oversaw all ongoing activities related to the development, implementation, maintenance of, and adherence to the organization's policies and procedures covering HIPAA and the privacy of, and access to, patient health information in compliance with federal and state laws and the healthcare organization's information privacy practices.

Chief Compliance Officer / Privacy Officer

21st Century Oncology, Ft. Myers, Florida, December 2007 - January 2010

21st Century Oncology is one of the largest Medical Oncology practices in the country, located in twenty-six states with over 350 employed physicians.

- Designed and developed the Compliance Program.
- Developed a complete training and education program that included general and specific compliance training for 2,000 people regarding various compliance issues and risks including Stark, Red Flag Program, RAC, False Claim Act, HIPAA and other compliance topics.
- Responsible for eight auditors of medical records.
- Worked with the Executive of Research to oversee the legal aspects and compliance requirements including conflicts of interest.

Chief Compliance & Privacy Officer

Express Scripts/CuraScript Inc, Orlando, Florida, January 2006 - December 2007

CuraScript is one of the top specialty pharmacy distribution companies in the US. A subsidiary of pharmacy benefit manager Express Scripts, the company provides specialty medications to people with chronic diseases that require high-cost injectable or infusible biotech drugs. Through a network of specialty pharmacies in eight states, CuraScript SP offers home delivery of drugs, while its CuraScript SD distributes drugs to doctors' offices and clinics. It also provides support services to patients in the form of on-call pharmacists, insurance counseling, and online communities. Its Freedom FP unit dispenses fertility drugs to doctors and patients.

- Designed and developed a Compliance Program for a growing Fortune 500 Pharmaceutical Company.
- Responsible for establishing and maintaining an effective and comprehensive compliance program in accordance with the "Compliance Program Guidance for Pharmaceutical Manufacturers," published by the Office of the Inspector General, U.S. Department of Health and Human Services.
- Responsible for implementing, training and auditing PhRMA Code on Interactions with Healthcare Professionals.
- Developed a complete training and education program that included general and specific compliance training for 2,500 people regarding various pharmaceutical compliance issues and risks including Stark, Off-Label Promotion, False Claim Act, HIPAA and other compliance topics.
- Oversaw SOX Audit, Medicare Part D Audit and regular auditing including Medicare and Medicaid billing. Responsible for developing a complete compliance workplan, compliance committee and reporting quarterly progress to the Board of Directors.

Chief Compliance & Privacy Officer

Shands Health System, University of Florida, Gainesville, Florida, March 2004 - January 2006

Shands Healthcare consists of ten hospitals, 15,000 employees, two teaching hospitals, six community hospitals, two specialty hospitals, homecare, clinical practices and a physician management company/billing company.

- Designed, developed and integrated a complex compliance program for the largest not-for-profit health system in the Southeast.
- Created an issues grid utilizing a compliance intake form, legal or regulatory authority, audit forms, education forms, issue resolution and follow up forms.
- Developed Risk Assessment forms, surveys and checklists for various departments including LAB, billing, coding, physicians and operations.
- Trained 15,000 employees on corporate compliance. Developed a complete training and education program that included general and specific compliance training regarding various compliance issues and risks. Training topics included medical necessity, ABN, Research, E&M, Coding and OIG Workplan specific issues for all the effected departments and facilities.
- Revamped the compliance committees to reflect the complex Shands Healthcare environment. Ten independent compliance committees were created or redesigned to address the risk and issues specific to each facility.
- Developed a Research Compliance Program for Shands Healthcare that included and interacted with the University of Florida. The program included clinical trials, IRB and research billing issues.
- Founding Board member of a pilot program, developed in conjunction with the Florida Hospital Association (FHA), to evaluate the effectiveness of Florida hospitals and providers through an audit.

- This program consisted of eight members from various Florida Hospitals who performed 2-3 day hospital surveys measuring compliance program effectiveness.
- Gathered and developed tools, charts, audits, education samples, checklists and other materials to audit for effectiveness through best networking and governmental sources.
 - Privacy Officer reported to me regarding ongoing activities adherence to the organization's policies and procedures covering HIPAA and the privacy of, and access to, patient health information in compliance with federal and state laws and the healthcare organization's information privacy practices

Vice President, Chief Compliance & Privacy Officer

Compliance Billing Specialist, San Bernardino, California, July 2002 - March 2004

- Developed HIPPA and compliance policies and procedures, workplans, code of conduct, hot line, audits, and audit procedures. Conducted HIPAA and compliance committee, investigative protocol, education and training seminars for CBS.
- Conducted financial billing and coding and compliance audits undertaken to look at revenue cycle. Integrated the Compliance department with Patient Financial Services, including ABN reviews, account and reimbursement reviews and correct documentation reviews, at various hospitals in the California and Arizona region, including a five hospital system in Long Beach, California and a county hospital in Phoenix, Arizona.
- returned several million dollars to hospitals through compliance ABN/LMRP reviews and audits, small dollar write-offs, coding and billing evaluations, physician education and compliance/legal reviews.
- Designed and implemented a complete Compliance and HIPAA Program for Maricopa Integrated Health System, the County Hospital with 6,000 employees in Phoenix, Arizona. Oversaw the Risk Management Department, insurance defense and hospital liability using MARS-I Insurance as our carrier.

Vice President / Chief Compliance Officer / Legal Affairs / HIPAA Privacy Officer / Risk Management.

Eisenhower Medical Center, Rancho Mirage, California, May 1999 - July 2002

- Negotiated a Corporate Integrity Agreement with the Office of Inspector General and US Attorney's Office, which included a mandatory five-year Corporate Compliance Program.
- Designed and implemented a complete Corporate Compliance program ratified by the Board of Directors of EMC.
- Developed policies and procedures, compliance workplan, code of conduct, hotline, compliance audits, audit procedures, compliance committee, investigative protocol, education, training seminars (over 2,000 employees and physicians trained on medical necessity, e/m coding HCFA Hot-lists etc.), manuals, videos for physicians/employees, and effectiveness reviews.
- Integrated regulatory compliance, including JCAHO accreditation, HCFA Conditions of Participation, certification, license, permit compliance and employee-human resources, home health, hospice, DME cancer center, physician clinics and lab compliance plans.
- Board member of Quality Counsel.
- Developed Charter involving members of Medical Staff and Board Members and Administration.
- Designed and developed a HIPAA program which included training and HIPAA implementation for a twenty five bed 2,000 employee hospital.
- Acted as Risk Officer responsible for the majority of insurance for the hospital, its officers and employees. Headed all risk claims and litigation defense of the hospital and physicians.
- Oversaw all ongoing activities related to the development, implementation, maintenance of; and adherence to the organization's policies and procedures covering HIPAA and the privacy of; and access to, patient health information in compliance with federal and state laws and the healthcare organization's information privacy practices

Chief Financial Compliance Officer

University Medical Center, Tucson, Arizona May 1998 - May 1999

- Negotiated a Corporate Integrity Agreement with the Office of Inspector General and US Attorney's office. The Agreement included a mandatory, five-year Corporate Compliance Program and hiring of an Independent Review Organization (IRO).
- Implemented a complete Corporate Compliance Program ratified by the Board of Directors of UMC for the Hospital, Home Health and Hospice programs.
- Developed policies and procedures, compliance workplan, code of conduct, hotline, compliance audits, and audit procedures, compliance committee, investigative protocol, education, training seminars, manual & videos for physicians/employees and effectiveness reviews.
- Integrated regulatory compliance including JCAHO accreditation, HCFA Conditions of Participation, certifications, licenses, employee-human resources, home health, cancer center, physician clinics and lab compliance plans.

Senior Compliance Specialist

Price Waterhouse Coopers/Coopers and Lybrand, Phoenix, Arizona, and Los Angeles, California, August 1997 - May 1998

- Implemented a Compliance Program during the merger of the Stanford University and University of California Hospital Systems.
- Worked closely with the former Deputy Inspector General of the United States, Eileen T. Boyd, in rolling out a complete compliance program.
- Implemented concurrent audits at Stanford University and the various physician groups in preparation of a 1998 Path Audit.
- Worked with the American Hospital Association (AHA) in writing and developing a 1998 manual and compliance program offered by the AHA and Coopers and Lybrand to all participating AHA members.

Chief Compliance Officer / Medical/Legal Affairs

Alegent Health, Omaha, Nebraska, June 1995 - July 1997

- Originated, designed and developed a Corporate Compliance Program and Workplan ratified by the Board of Directors of Alegent Health.
- Developed the Corporate Compliance Manual for directors and managers.
- Authored the Code of Conduct Manual providing guidelines for all employees.
- Created organizational policies and procedures for a documentation retention system, disciplinary measures and a compliance hotline.
- Established a Legal Audit team for a thorough evaluation of existing legal and financial controls, ongoing risk analyses, and anti-vulnerability assessments of the operational areas.
- Created and led the Corporate Compliance Advisory Committee consisting of the Legal Counsel, Chief Financial Officer, Chief Medical Officer, Chief Operating Officer, Risk Management Director and Human Resources Officers reporting to the Chief Executive Officer and the Board of Directors.
- Directed investigative protocol by organizing legal, audit, security, risk management and human resources departments.
- Conducted educational and training seminars for all Alegent employees and physicians regarding compliance with all federal, state and local laws and regulations.

Medical/Legal Affairs

- Integrated and modified hospital bylaws, policies and procedures.
- Counseled physicians regarding medical—legal issues, contracts and agreements.
- Developed objective and clinically valid criteria for privilege delineation.
- Integrated quality assurance and risk management responsibilities of medical staff.
- Interpreted, modified and applied JCAHO standards.
- Member of a centralized credentialing task force for the consolidated hospitals.
- Liaison between physicians and administrators.
- Editor and writer for the Monthly Medical Staff Newspaper.

BOARD AND TEACHING POSITIONS

InfraGard, Member

National Board of Directors, The Healthcare Compliance Officer Association (HCCA) 1998-2001

American College of Healthcare Executives, Member

Administrator Professional In Residence: The Betty Ford Center, Rancho Mirage, California. 1999

Adjunct Professor, Widener Law School, Wilmington, Delaware, Capstone Course Corporate Compliance. 2013-Present

Adjunct Professor, The University of Southern California, Masters in Hospital Administration. Summer 1999

- Hospital Administration

Adjunct Professor, Bellevue University, Omaha, Nebraska, Winter 1996 and Spring 1997

- Legal and Medical Ethics: a course requirement for the Masters in Healthcare Care Administration Degree.
- University of Southern California, Masters in Hospital Administration Graduate level teaching courses

SPEAKING ENGAGEMENTS

- 2013 Fraud and Compliance Forum, September 29-October 1, 2013, Hilton Hotel Baltimore, MD. *Managing Physician Compliance Issues*,
- 2012 HCCA Compliance Institute, Las Vegas, Nevada, April 30, 2012 *Compliance and ICD-10: Mitigating the Risks with Computer Assisted Coding*
- Physician Practice Compliance Conference, November 2011 Philadelphia, Pennsylvania. Presentation Entitled: *Physician Practice Compliance*.
- Southeast HCCA Conference, March 2006 Orlando, Florida. Presentation Entitled: *Auditing and Monitoring for Effective Compliance*.
- Southeast HCCA Conference, March 2005 Miami, Florida. Presentation Entitled: *Developing an Effective Corporate Compliance Program*.
- 4 conferences for AHIMA and other groups from 2000-2003.
- Chairperson for the "National Symposium on Healthcare Compliance" held in Los Angeles, California, November 4-5, 1998. Presentation Entitled: *Compliance Committee*. Moderator for Compliance Officer Roundtable.
- Featured speaker for The Credentialing Forum, "Physician Credentialing and Physician Compliance Issues" held in Phoenix, Arizona, October 22—23, 1998.
- Speaker at the annual HFMA Arizona conference held in Prescott, Arizona, October 1-2, 1998. Presentation Entitled: *False Claims and Corporate Compliance Programs*.
- Speaker at the AHIA (Healthcare Internal Auditors) annual conference held in Tampa, Florida, September 13—16, 1998. Presentation Entitled: *Compliance Implementation: Checklist to Compliance*.

- Speaker for AIC Worldwide conference held in Washington D.C., September 10-11, 1998. Presentation Entitled: *Compliance Training and Implementation Techniques*.
- Speaker and Master of Ceremonies for The Corporate Compliance Forum conference, "Two Advanced Conference on Healthcare Compliance" held in Chicago, Illinois, June 24-26, 1998. Moderator and Speaker for Advanced Compliance Program Implementation for a Roundtable of Compliance Officers.
- Speaker for HFMA conference held in Lafayette, Louisiana, April 1998.
- Speaker for the Association of CPA's of Louisiana, April 1998.
- Speaker for Cambridge Health Resources Conference, "Healthcare Compliance Programs" held in Washington, D.C., March 19-20, 1998.
- Chairman and Speaker for The Corporate Compliance Forum, "Advanced Corporate Compliance Issues" Phoenix, Arizona, March 12-13, 1998. Presentation Entitled: *Implementing a Healthcare Corporate Compliance Program*.
- Featured speaker for AIC Conferences, "Designing and Maintaining an Effective Corporate Compliance Program for Healthcare Organizations" held in Washington D.C., March 3-4, 1998. Presentation Entitled: *Compliance and Employee Issues*.
- Speaker for Healthcare Roundtable for CEO's, "Implementing Effective Medical Compliance Models and the Model Compliance Plan for Hospitals" held in Saint Petersburg, Florida, February 19-20, 1998. Presentation Entitled: *Understanding and Meeting New Guidelines and Expectations*.
- Featured speaker for the Indiana Association of Healthcare Risk Managers held in Indianapolis, Indiana, December 12, 1997. Presentation Entitled: *The 1998 OIG Model Hospital Compliance Workplan*.
- Panel speaker for the Healthcare Compliance Annual Meeting, National Healthcare Fraud and Abuse Symposium held in Los Angeles, California, Nov. 3-5, 1997.
- Speaker for The Corporate Compliance Forum seminar "Healthcare Corporate Compliance Programs: The next Step. Stopping the Spread of Fraud & Abuse" held in Miami, Florida, October 9-10, 1997. Presentation Entitled: *Shuttle Diplomacy Corporate Compliance and The Corporate Compliance Officer*.
- Featured presenter at the HFMA's Virginia Chapter's seminar, "Managed Care and Its Side Effects" held August 27-29, 1997.
- Presenter for the Arizona Society of Healthcare Risk Manager's seminar held in Casa Grande, Arizona, November 14, 1997. Presentation Entitled: *The Importance of Compliance Programs*.
- Presenter for the Louisiana Society of Accountants seminar held in New Orleans, Louisiana, October 20, 1997. Presentation Entitled: *The 1998 OIG Workplan and Compliance Program Issues*.
- Featured presenter for the Nebraska Hospital and Healthcare Association seminar in Kearney, Nebraska, May 22-23, 1997.
- Panel speaker for The Conference Bureau's 1997 Symposium, "Healthcare Fraud and Abuse: Enforcement, Compliance and Managed Care" held in San Francisco, California, May 19—20, 1997. Presentation Entitled: *Designing and Implementing An Effective Corporate Compliance Program ...Keys to Avoiding Fraud and Abuse Pitfalls*.
- Speaker for the United Communications Group seminar, Compliance Strategies '97 – "How to Protect Your Health Care Venture" held in Crystal City Virginia, May 5-6, 1997. Presentation Entitled: *Your Complete Guide to Compliance Plan Protection*.

EDITING and ADVISORY BOARD POSITIONS

- Contributing Editor and Advisory Board Member for CCH Healthcare Compliance Letter published monthly by CCH Inc., December 1998-2000.
- Advisory Board Member and Writer for the periodical *Checklist to Compliance* published monthly by The Corporate Compliance Forum, January 1998-October 1998.
- Co-founder of The Corporate Compliance Forum - A business that organizes healthcare compliance seminars and publishes a monthly newsletter, July 1997.
- Contributing Editor of the periodical *Corporate Compliance Officer* published monthly by Opus Communications, Inc., May 1997 - May 1998. Advisory Board Member May 1997 – 2000.

PUBLICATIONS AND INTERVIEWS

- Contributing Author, *2013 Health Law and Compliance Update*, Wolters Kluwer, Law & Business, John Steiner Editor
- Interviewed by HCCA Compliance Today March 2005, *Incorporating Effectiveness Into Your Compliance Program*.
- Author, *Special Report Implementing A Compliance Program to Prevent Health Care Fraud and Abuse: Report From the Front, Prevention of Corporate Liability*, BNA, Vol. 4, No. 12, January 20, 1997.
- Author, *Getting With the Program*, Health Systems Review, January / February 1997.
- Co-Author, *Health Care Providers Caught In the Crossfire: Corporate Compliance Programs Are Now A Necessity*, The ABA Health Law Section, The Health Lawyer, Vol. 9, No. 3, 1997.
- Co-Author, *Compliance Programs: Why Hospitals Need Corporate Compliance Programs and How We Implemented Ours; Lessons From The Front*, National Center for Preventative Law, Preventive Law Reporter, Vol. 15, No. 4, Winter 1996 – 1997.
- Author, *In the Trenches: How a Corporate Compliance Officer Implemented His Program*. Healthcare Business and Legal Strategies Perspectives, *December 16, 1996*.
- Co-Author, *Story Front: Corporate Compliance Officers Report How They Implemented A Compliance Program*, AON Healthcare Alliance Healthline, Vol. III, No. 4, 1996.
- Interviewed in featured story, *Answers from the Audit Trail: Everyone's Talking Compliance. These Practical Tips Will Make Your Life Less Anxious*, by Chris Serb, Hospitals and Health Networks, February 20, 1998.
- Interviewed for featured story, *Hot New Job in Health Care: In-house Cop, The Compliance Officer*, by George Andrews, Wall Street Journal, September 18, 1997.
- Quoted in *Corporate Compliance Program Looks at Credentialing Processes, Too*, Medical Staff Briefing, Vol. 7, No. 5, May 1997.
- Quoted in *How To Get Physician Buy-In For A Corporate Compliance Program*, Briefings On Practice Management - Information and Advice for Medical Practice Managers, Vol. 5. No. 3, March 1997.
- Contributor for *Corporate Compliance Program Guards Against Charges of Medicare Violations*, Briefings On Practice Management Information and Advice for Medical Practice Managers, Vol. 5, No. 2, February 1997.
- Contributor for *Compliance Programs Beneficial for Health Care Organizations*, Nebraska Health Law Digest A Quarterly Publication for Professionals In the Health Care Industry, Vol. 4, No. 1, Winter 1997.
- Interviewed for two part article, *Save Time Creating Your Compliance Plan*, Medicare Compliance Alert with Civil Money Penalties Reporter, Vol. 8, No. 25, December 16, 1996 and Vol. 9, No. I, January 13, 1997.