

# Annual Report

## Fiscal Year 2024-25

San Francisco  
Department of Public Health  
Office of  
Compliance and Privacy  
Affairs

December 1, 2025



# 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:

1. Protecting patient privacy
2. Compliance with governmental payer regulations
3. Ensuring legal sharing of DPH data with its partners, and
4. Whistleblower investigations



# FY 2024-25 – Executive Summary



Implementation of the Monthly BHS Program Integrity Provider Meeting (started August 2024).

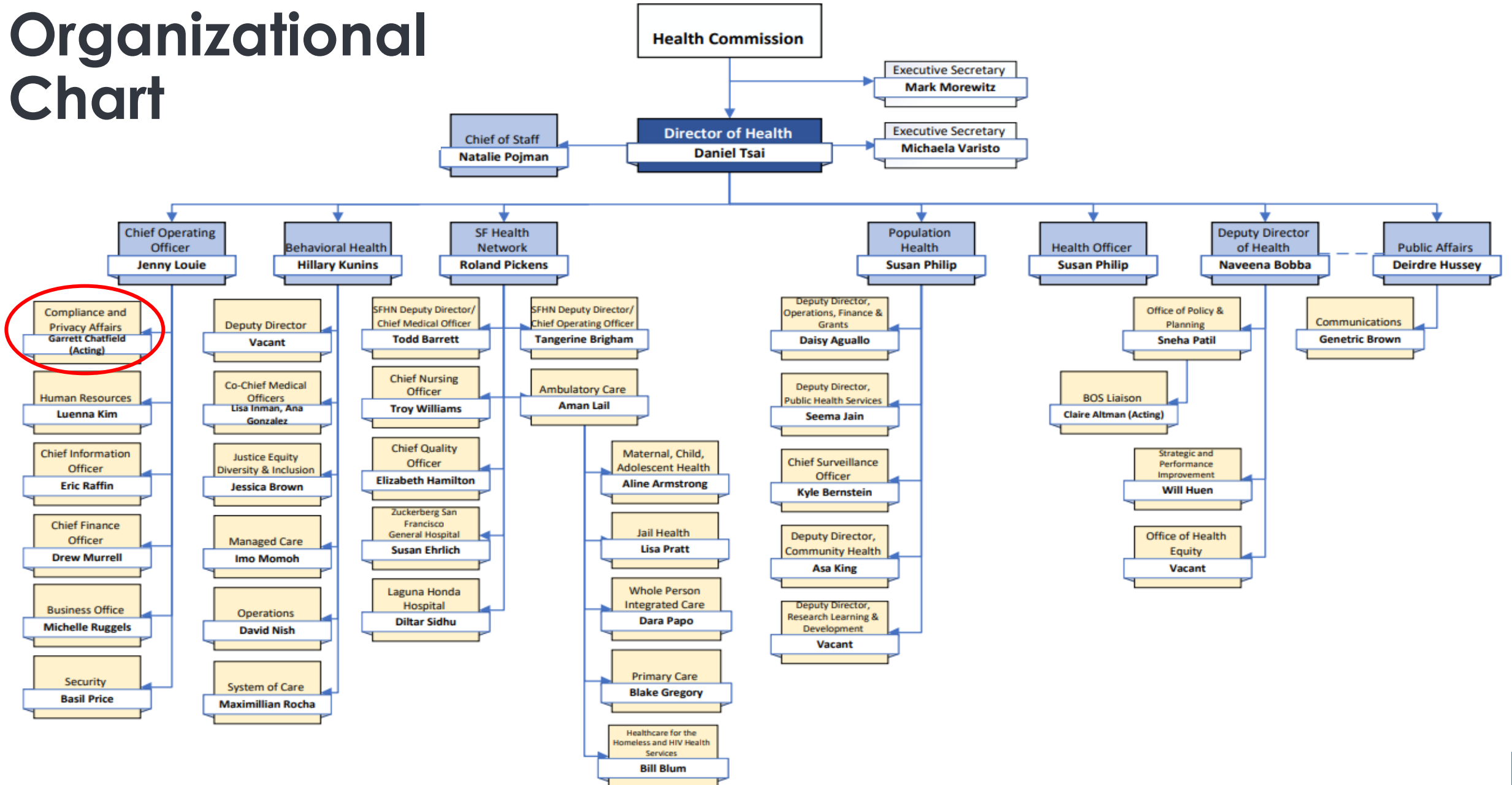


Continued to focus significant efforts on the Annual Compliance and Privacy training.



Developed centralized reporting system to capture privacy and compliance reports.

# DPH Organizational Chart



# OCPA Organizational Chart



Privacy Officers  
Privacy Investigators  
Privacy Auditors

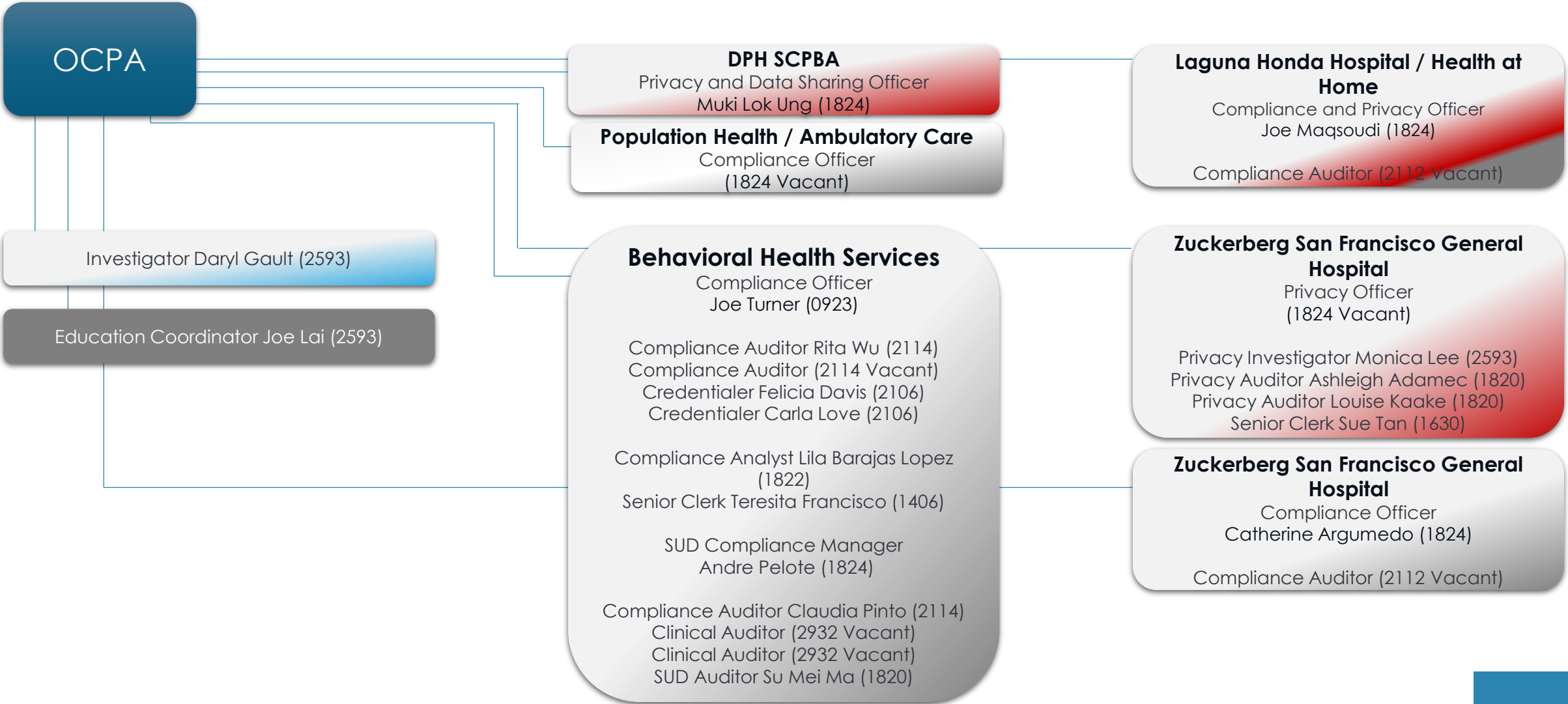


Compliance Officers  
Compliance Auditors



Whistleblower  
Investigators

**Acting Director:** Garrett Chatfield





# Compliance Program

# Compliance Program Overview, Disallowances, and Fines

## Overview of Program

The Compliance Program ensures that DPH and its workforce conduct operations and activities ethically; with the highest level of integrity, and in compliance with regulatory requirements.

The goal of the program is to practice and promote good behavior and avoid conduct that may cause financial or reputational harm to DPH.

OCPA partners with department managers to identify and manage risks; provide education and training to staff and providers and integrate compliance into the daily operations of DPH.

## Disallowances

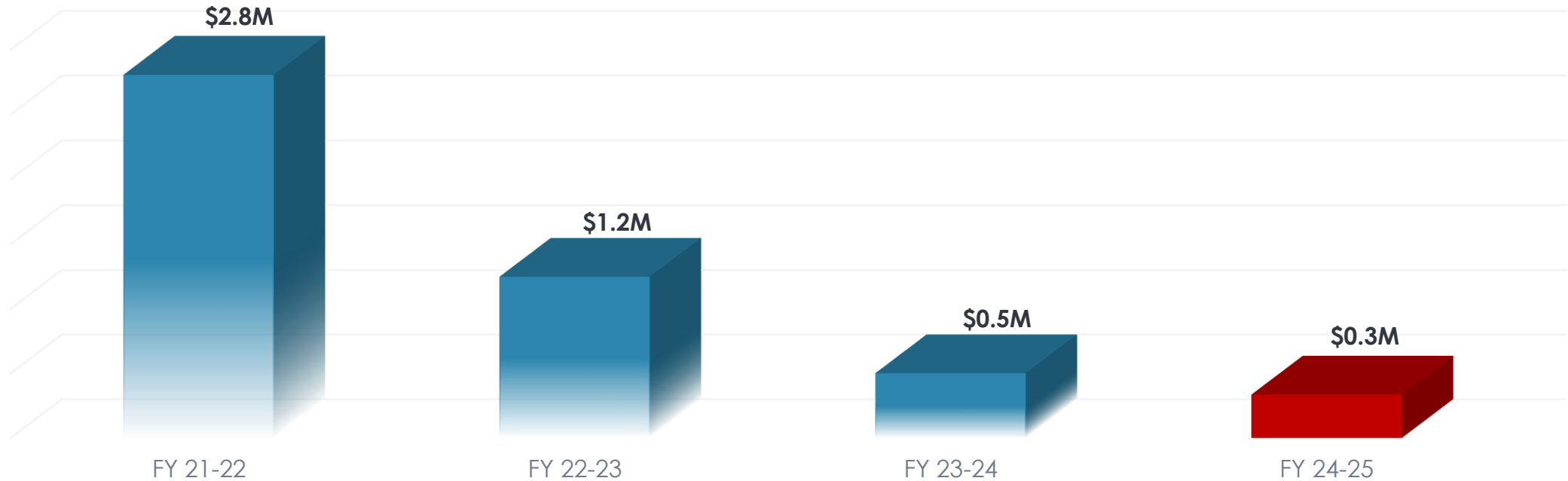
DPH returned just over **\$335k** in disallowed claims.

## Compliance Fines

DPH paid no compliance-related penalties to regulators.



# DISALLOWANCES



## Trends Comparison

- In FY 24-25 we continued to see a decrease in the number of claims that were disallowed due to a deficiency.
- The Compliance Program works with operational areas to address disallowance findings and to reduce identified errors from reoccurring.

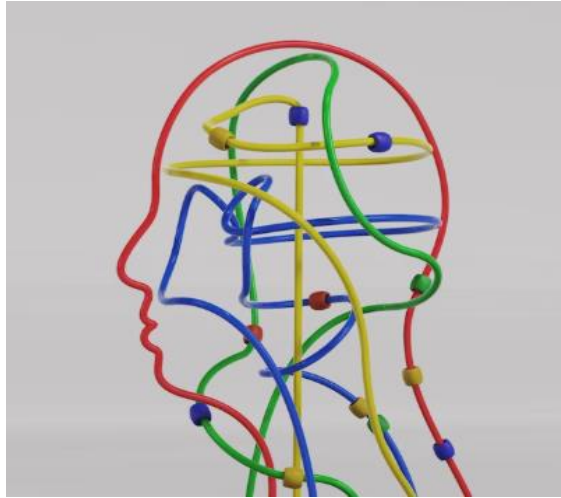
# Compliance Behavioral Health Services

- 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 Key Takeaways

FY 24/25

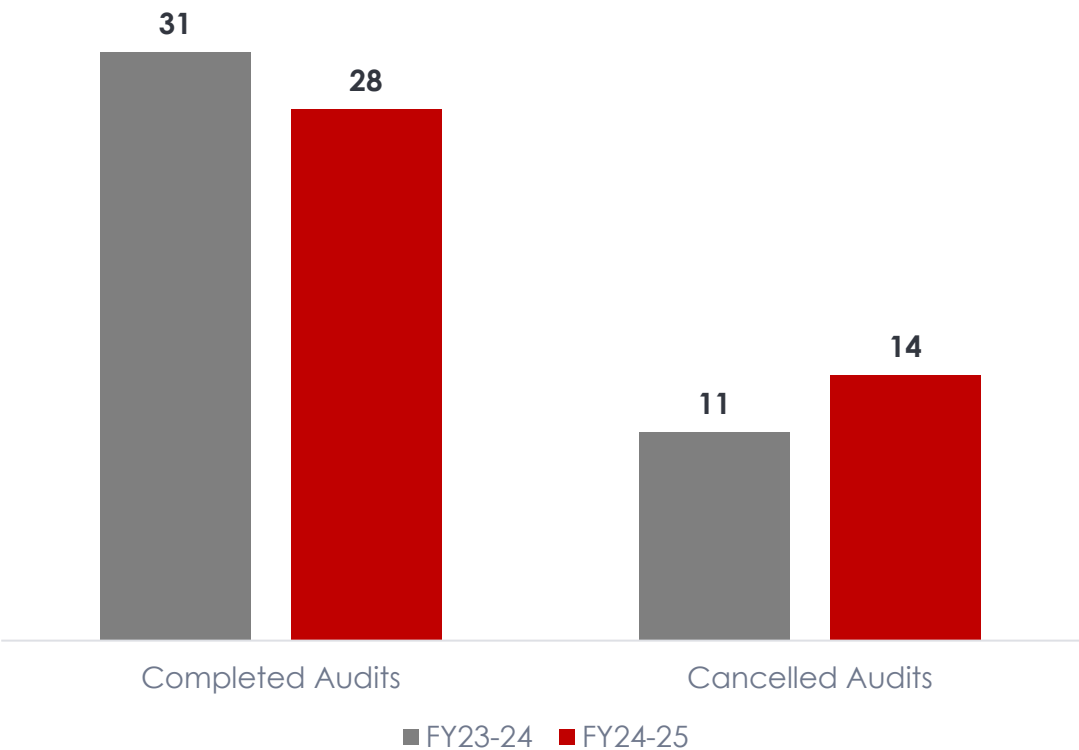


- Overall agency error rate is 11%
  - Decreased from prior FY error rate of 13%.
  - CMS PERM Audits – nationwide error rate is 10%.
- SMHS overall error rate is 8%
  - Remained the same for last two FYs.
- DMC-ODS overall error rate is 22%
  - Decreased from prior FY error rate of 31%.
- 39% of all agencies had a **ZERO** error rate meaning all claims were valid.
- 57% of all agencies audited in FY24/25 had an error rate of 10% or less

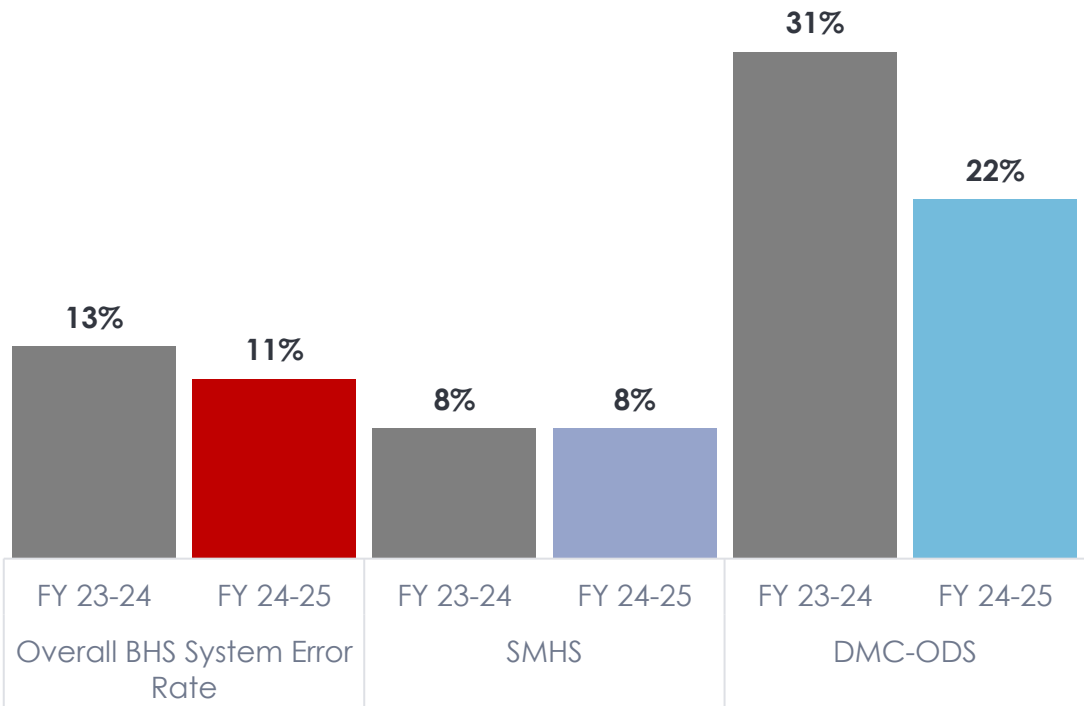
# AGENCY INFORMATION AND OUTCOMES

FY 2024-25

Completed Audits



MHP/ODS Plan Error Rate Outcomes



\* SMHS is Specialty Mental Health Services. \*\* DMC-ODS is Drug Medi-Cal Organized Delivery System

# Compliance Mitigation Efforts



## Communication



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

## Consultation



- ✓ Provide targeted clinician trainings for appropriate billing rules
- ✓ Optimize workflows and appropriate documentation standards

## Audits & Inspection



- ✓ Quarterly Audits
- ✓ Ongoing Payor Compliance Review

## Policy & Procedures



- ✓ Compliance Committee Engagement
- ✓ Process Improvement & Documentation Streamlining
- ✓ Quarterly Policy Review



# Privacy Program

# Privacy Program Overview, Penalties, and Fines

## Overview of Program

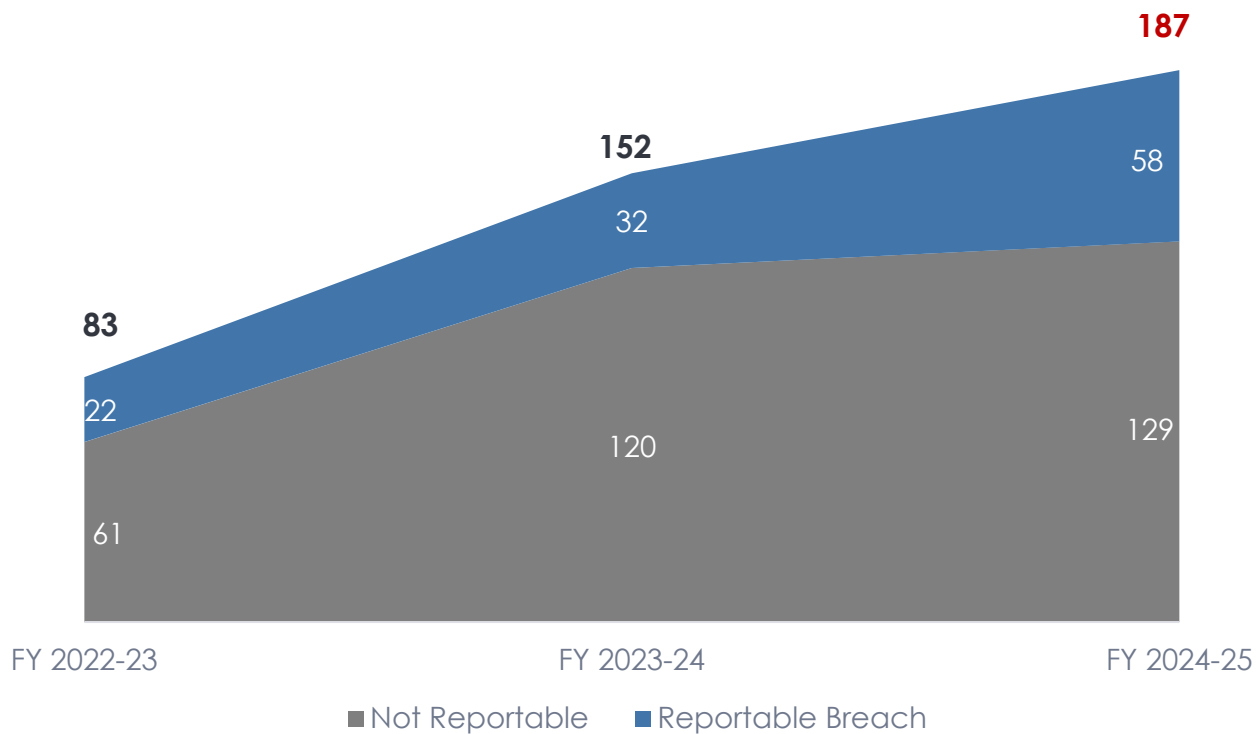
The Privacy Program's purpose is to ensure the confidentiality, integrity, and availability of all Protected Health Information (PHI) that DPH creates, receives, maintains or transmits.

## Penalties / Fines

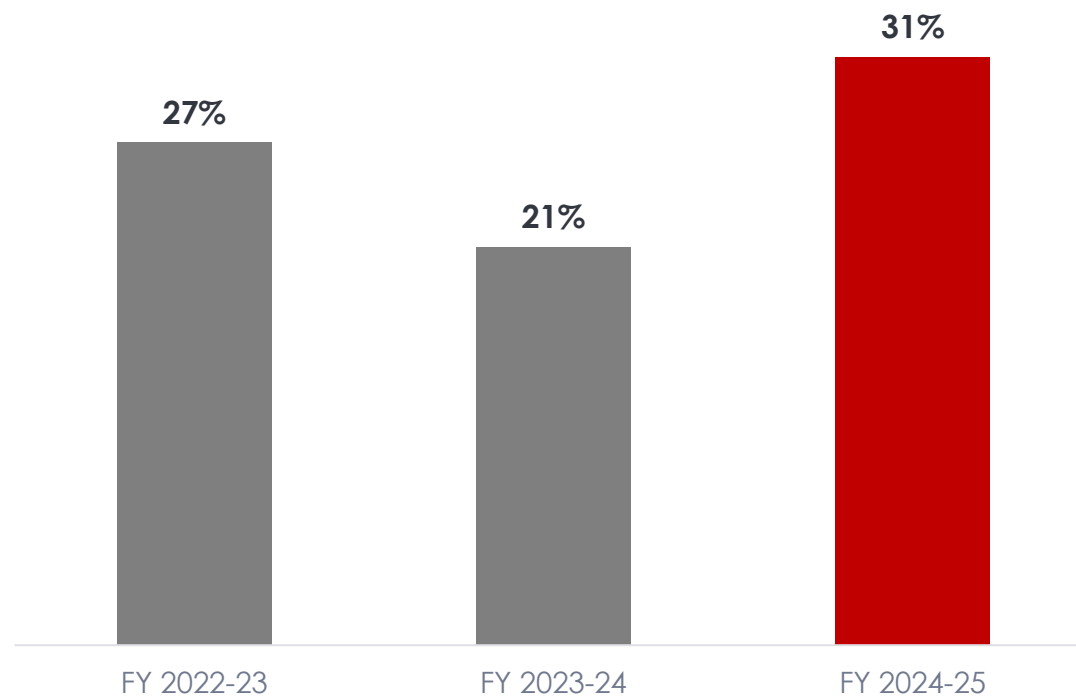
DPH paid no privacy-related penalties to regulators.



Total Privacy Incidents



Reportable Breaches Year over Year



## Trends Comparison

- DPH as an organization is reporting more incidents.
- With the increase in the number of reports, OCPA is discovering more reportable HIPAA privacy breaches.

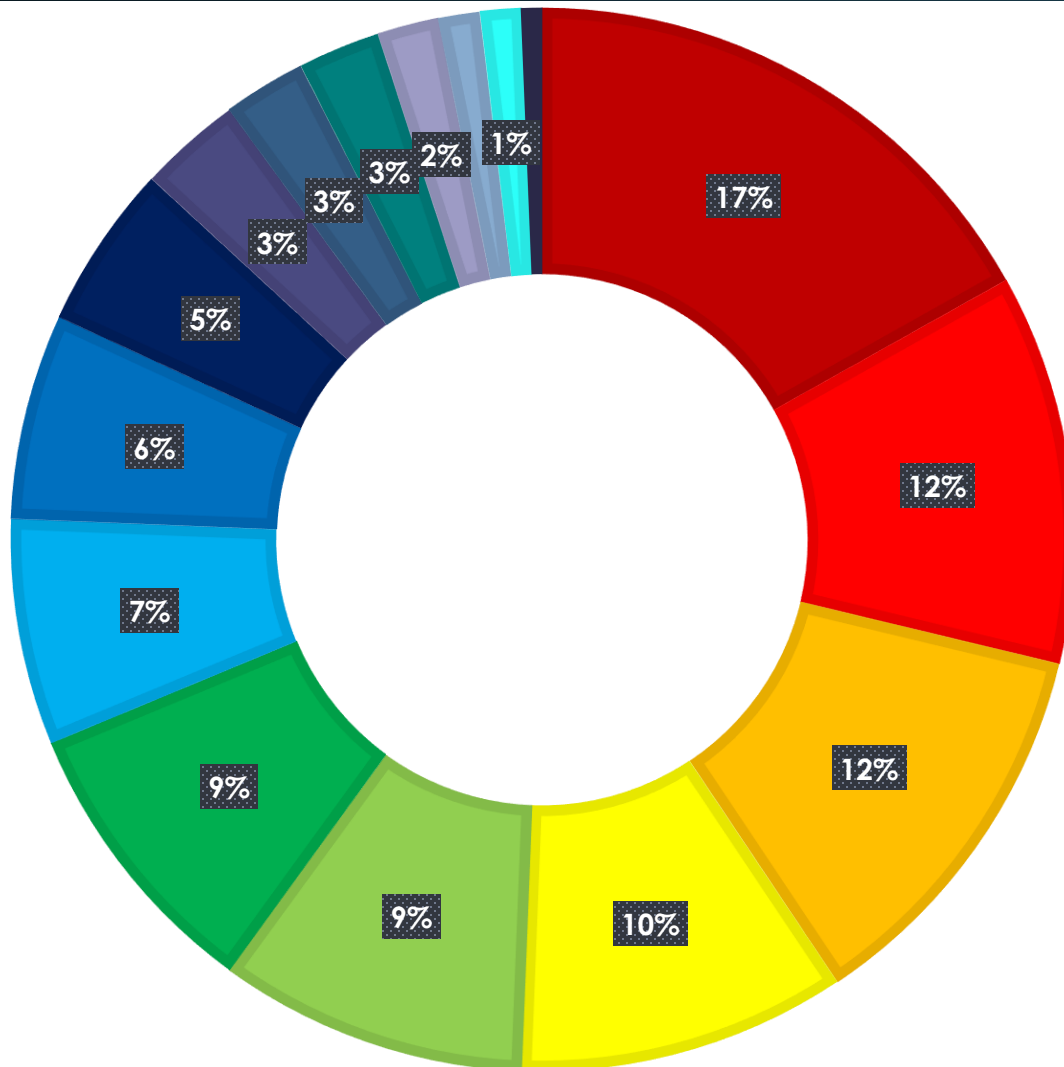
# Privacy Incidents by Division

FY 2024-25

Location	Reportable Breaches	Non-Reportable Incidents	Total Incidents	% of Reportable Breaches
ZSFG	28	65	93	30.1%
LHH	3	12	15	20.0%
BHS/CBO	17	22	39	43.5%
DPH – All Other	10	30	40	25.0%
Total	58	129	187	31.0%

# Privacy Incident Reasons

Data Highlights  
FY 2024-25



- UnauthAccessViewing
- UnauthDisclosure
- MissentUnencryptedEmail
- Privacy Other
- PaperLossTheftONsite
- WrongPaperworkGivenProvided
- UnauthPhotoVideo
- VerbalUnauthDisclosure
- MissentEncryptedEmail
- PaperLostTheftOFFsite
- SocialMediaPost
- LostStolenElectronicDevice
- Hacking / IT Event
- Privacy Audit No Breach
- MissentFax
- Cyber/Hacking Breach

# Privacy Mitigation Efforts



## Communication



- ✓ OCPA issues the Privacy Pulse every two months to address topical privacy concerns, and to emphasize DPH's commitment to patient privacy
- ✓ Use data to inform communication strategy

## Training



- ✓ OCPA also conducts targeted training in response to privacy incidents and recommends corrective actions to mitigate future reoccurrence
- ✓ OCPA is creating an online catalog of standard refresher targeted trainings

## Audits & Inspection



- ✓ Continue access audits in FY2025-26
- ✓ Explore additional audits/privacy monitoring software

## Policy & Procedures

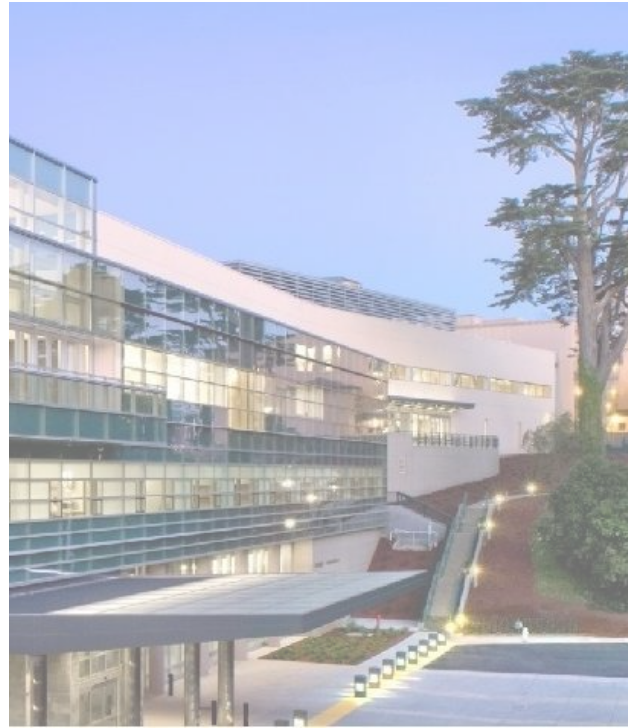


- ✓ Quarterly OCPA Policy Review
- ✓ Review Divisional policies around unauthorized access, disclosure, and paper handling

# OCPA Other Activities - Programs



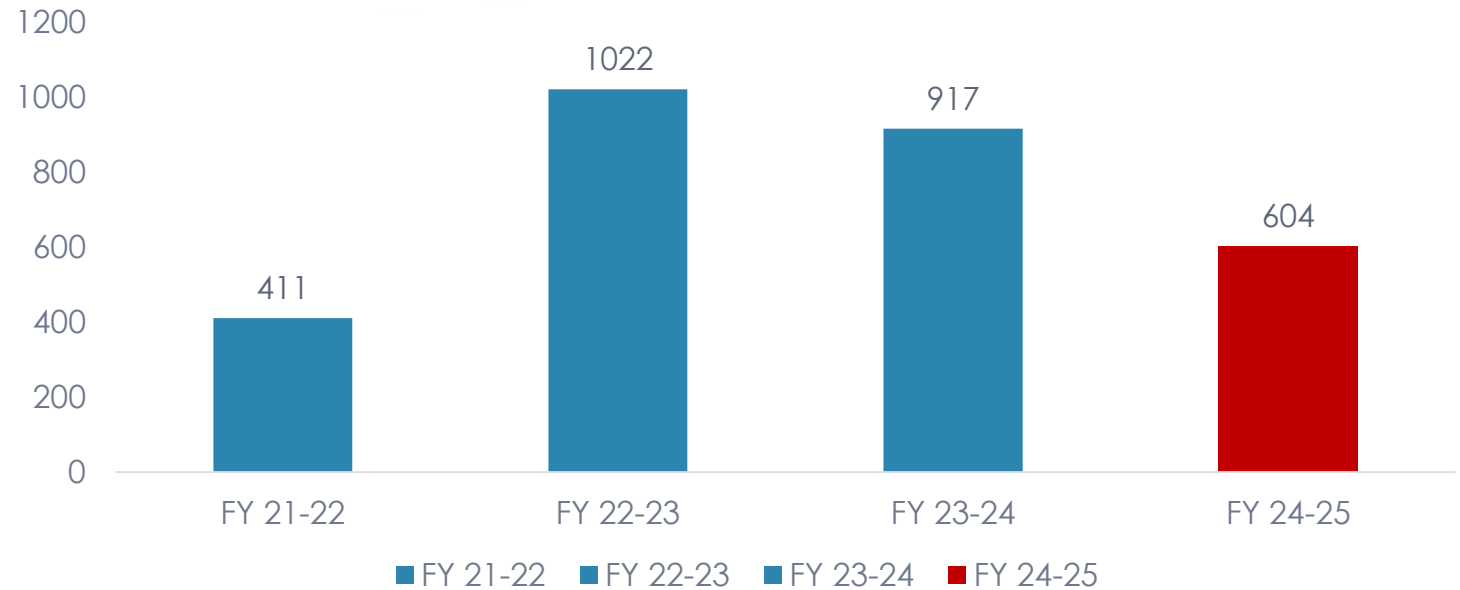
ZSFG / LHH / HAH /  
CO



SFHN / PHD / BHS /  
AMB



**OCA  
Toll Free  
Number  
855-729-6040**



OCA 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 24-25 the Hotline received **604** inquiries on various matters.

# 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.

20Folder/DPH%20Compliance%20&%20Privacy%20Troubleshooting%20Guide.pdf

2 / 3 | 100%

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

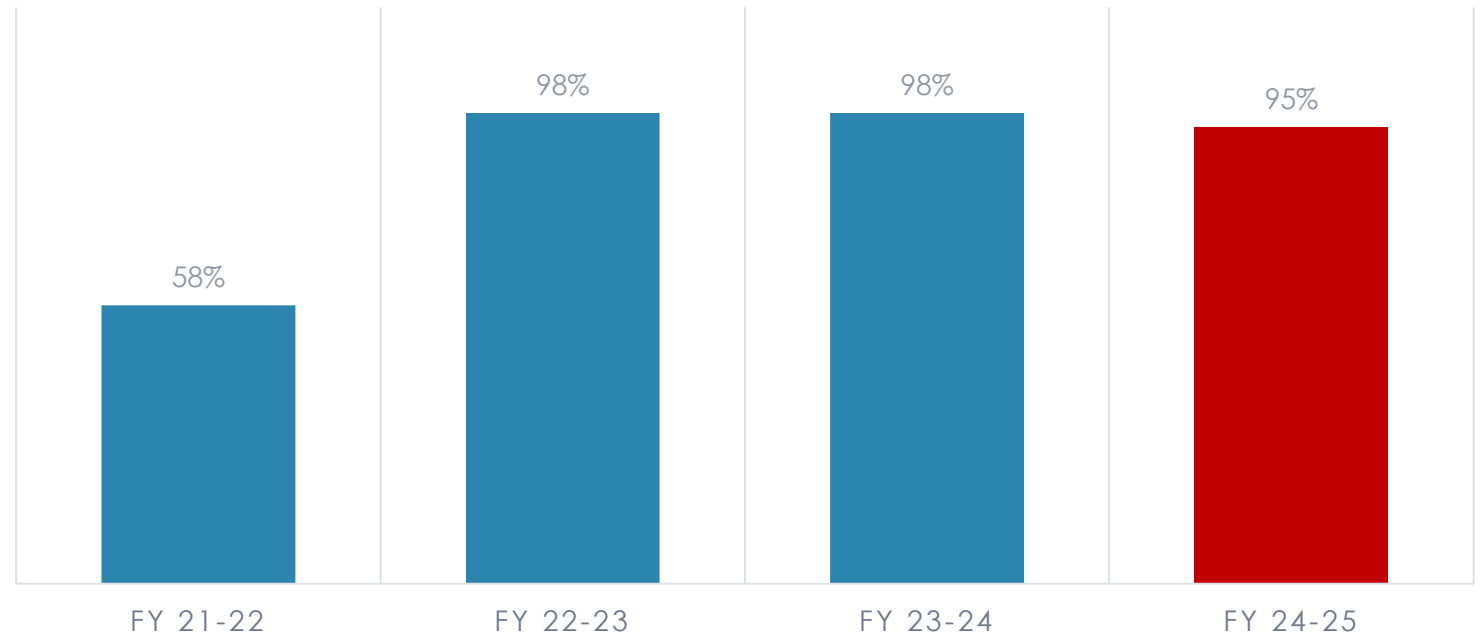
The SF Employee Portal

Step Two: My Learning

April 2021 | DPH Compliance ... | Document1 - Word | Exec Report OCPA ...

# Annual Compliance and Privacy Training

## YEAR-TO-YEAR COMPARISON



- 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.

# Data Sharing

OCPA works closely with Contracts, IT Security, and the City Attorney's Office to manage data sharing with external partners 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.



## Key Highlights

- Organized and centralized MOUs and Data Sharing Agreements
- DPH Contracts training and ongoing support
- CalAIM data sharing needs including Jail Health Services (JHS) care coordination with supporting services
- Homelessness and Supporting Housing (HSH) analysis to support treatment initiatives

# 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 **144** complaints regarding matters at DPH during FY 24-25.\*

DPH receives the highest number of Whistleblower complaints among all City departments.



\*Information obtained from the Controller's Office Whistleblower Program Quarterly Reports for FY24-25.



# 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](mailto:compliance.privacy@sfdph.org)