How to Use "Measuring Compliance Program Effectiveness" – Some Perspectives

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Measuring Compliance Program Effectiveness: A Resource Guide

HCCA-OIG Compliance Effectiveness Roundtable  
Roundtable Meeting: January 17, 2017 | Washington, DC
Right-sizing the Guide:

A Tool For Any Size Organization

Putting Measures into Practice:

A Discussion of Examples
Assessment

1.27

Essential Compliance Policies and Procedures exist

- Can staff articulate Policies and Procedures?

Compliance Officer

2.27

Compliance Officer Independence and Objectivity

- Review the CO Job Description
- CO reporting structure?
- CO in the Org Chart
- Independence
- Authority to retain counsel
Compliance Plan
2.45

What is the Company Doing to Drive the Compliance Culture?
• Surveys
• What does the company incentivize?
• What does the company promote?
• Is the Compliance Program tied to Mission, Vision, and Values?

Employee Screening
3.9

All employees are screened prior to hire
• Audit HR files to ensure documentation supports that newly hired employees were screened prior to their first day worked
The organization evaluates policy and/or compliance failures and provides re-education to applicable staff

- Audit failures to determine if training is considered in corrective action
- Audit to ensure re-training completed
- Track for reoccurrence to determine understanding and effectiveness
Monitoring and Auditing Work Plan

5.40

Auditing and Monitoring Process

- Document and process review
- How is the annual Work Plan developed?
- Who is responsible for the Work Plan?

Sample Monitoring & Auditing Tool

<table>
<thead>
<tr>
<th>Performance Indicator</th>
<th>Monitoring Parameters</th>
<th>Information Source</th>
<th>Method of Data Collection</th>
<th>Data Collection</th>
<th>Data Analysis &amp; Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>License and Sanction Checks</td>
<td></td>
<td></td>
<td></td>
<td>Frequency</td>
<td>Who</td>
</tr>
<tr>
<td>- License verification</td>
<td>- For all licensed positions</td>
<td>- Employee application</td>
<td>- State license database</td>
<td>- Copy license</td>
<td>- Print</td>
</tr>
<tr>
<td>- OIG LEIE Sanctions Database</td>
<td>- For all employees</td>
<td>- OIG LEIE list</td>
<td>- Print findings (page)</td>
<td>- Employment</td>
<td>- Quarterly</td>
</tr>
<tr>
<td>- Medicaid Exclusion Database</td>
<td>- For all employees</td>
<td>- State Medicaid exclusions database (if applicable)</td>
<td>- Print findings (page)</td>
<td>- Employment</td>
<td>- Quarterly or monthly if required</td>
</tr>
</tbody>
</table>
**Awareness**

6.12

*Distinction between disciplinary action and non-retaliation*

- Interview staff for understanding
- P&Ps support discipline
- Assess the difference between discipline and non-retaliation
- Make sure of appropriate protections

**Timeliness of Response**

7.42

*Self Disclosure Guidelines*

- Document reviews and interviews
  - Are there written guidelines for self disclosure?
  - Do they address everyone that is impacted?
  - Do they address information to be shared with regulators?
Questions?

Comments?

How Will You Use This Guide?

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How do you know if you have an effective Compliance Program?

A window into compliance efforts in the real world
an interview with Susan Gillin, Chief of the Administrative and Civil Remedies Branch,
Office of Counsel to the Inspector General,
U.S. Department of Health and Human Services
— an interview by Gabriel L. Imperato

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Resources:
https://oig.hhs.gov/authorities/docs/physician.pdf