

Leveraging Your Compliance Committee: Practical Approaches to Maximize Your Compliance Committee's Role, Overall Effectiveness, and Value to the Organization

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Objectives

- I. Best practices and tools to maximize evidence for compliance program effectiveness
- II. How to successfully engage senior leadership to actively support the committee's role, responsibilities, and participation to effect *real change*
- III. Scenarios utilizing Compliance Committee to operationalize solutions to tough compliance issues

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Areas of Focus

- Regulatory Background
- Practices and Tools
- Questions to Ask Yourself
- Scenarios
- Templates
- Resources



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Regulatory Background

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OIG Compliance Guidance

- Compliance Committee Coverage Element 2
 - The designation of a chief compliance officer **and other appropriate bodies**, *e.g., a corporate compliance committee*, ...
- Application
 - Is there an **active** compliance committee, comprised of **trained representatives** of each of the **relevant** functional departments, as well as **senior management**?
- More specifically . . . “The OIG recommends that compliance committee be established to advise the compliance officer and assist in the implementation of the compliance program”

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OIG Compliance Guidance

... The committee's functions should include:

- Analyzing the organization's industry environment, the legal requirements with which it must comply, and specific risk areas
- Assessing existing policies and procedures that address these areas for possible incorporation into the compliance program
- Working with appropriate hospital departments to develop standards of conduct and policies and procedures to promote compliance with the institution's program
- Recommending and monitoring, in conjunction with the relevant departments, the development of internal systems and controls to carry out the organization's standards, policies and procedures as part of its daily operations
- Determining the appropriate strategy/approach to promote compliance with the program and detection of any potential violations, such as through hotlines and other fraud reporting mechanisms
- Developing a system to solicit, evaluate and respond to complaints and problems. The committee may also address other functions as the compliance concept becomes part of the overall hospital operating structure and daily routine

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"Measuring Compliance Program Effectiveness: A Resource Guide"

- OIG/HHCA joint 53-page guide published March 2017
- Stated purpose: provide healthcare organizations ideas for measuring compliance program effectiveness (e.g., 400 metrics for 7 elements)
- Element 2: Compliance Program Administration
 - 24 Standards: 2A through 2X - Examples of direct **committee** references:
 - Standard 2C: Coordinate operational aspects of a compliance program with the oversight committee
 - Standard 2G: Assure that the compliance oversight committee's goals and functions are outlined
 - 10 Metrics: 2.9-2.18 out of 68 Element, 2 metrics provide the "HOW" to measure Compliance Committee effectiveness

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	Compliance Committee	How to Measure
2.9	Active involvement of compliance committee members	Track % of attendance of each member over last year
2.10	Assure that the compliance oversight goals and functions are outlined	Review Charter
2.11	Committee structure	Review documentation of structure of committee as well as charters. Ensure no charters
2.12	Composition and Attendance	Review Charter and Minutes to assure attendance
2.13	Cascade administration of compliance program throughout the organization	Different operational areas give some certifications/disclosures to the compliance
2.14	Composition of Compliance Committee	Review organizational chart to validate correct composition
2.15	Effectiveness of meetings	Keep executive report card by member qualitative/quantitative with indicators of on topics
2.16	Engagement	Last two years- have meetings been held in accordance with the Charter
2.17	Engagement of Directors/ Manager	Review committee structure to evaluation how directors/managers are participating Compliance Operational Committee(s) meeting includes agenda, minutes, attendance reports from subcommittees
2.18	Executive leadership engagement	Review of frequency of meetings, membership, attendance and minutes over the the members of Executive Committee team receiving information directly from C Officer
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CIA Mandates for Committee

- The Compliance Committee shall, at a minimum, include the Compliance Officer and other members of senior management... (e.g., senior executives of relevant departments, such as billing clinical, human resources, audit and operations)
- The Compliance Officer shall chair the committee
- Compliance Committee shall support the Officer in fulfilling his/her responsibilities (e.g. shall assist in the area of risk areas)
- Oversee monitoring of internal and external investigations
- Meet at least quarterly
- Minutes
- Updates of compliance committee’s activities to the Board of Directors
- Stipulated penalties (\$2,500) for failing to establish a committee

Department of Justice: “Evaluation of Corporate Compliance Programs”

- DOJ “sample” evaluation criteria released Feb 2017
- Compliance focused questions Fraud Division considers when evaluating a corporate compliance question
- 11 categories of topics and questions
- Includes “Senior and Middle Management”
 - Conduct at the Top
 - Shared Commitment
 - Oversight



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Practices and Tools to Maximize Effectiveness

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Engaging Senior Leadership

- How to successfully engage senior leadership to actively support the committee's role, responsibilities, and participation to effect *real change*
 - WHY they should care about compliance
 - Guidance
 - Ongoing
 - Meaningful
 - Relevant
 - Training/Education
 - Get on the agenda (director's meetings, forums, operational committees, etc.)
 - CONNECT to organizational goals
 - Increased revenue
 - Increase patient quality
 - Decrease regulatory risk
 - Public image/Reputation

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Compliance Committee Governance

- Role of the committee:
 - Aids the CCO in overseeing, implementing and advising on compliance program operations
 - Serves as a check and balances on the compliance program as well as compliance program accountability
- Positioning:
 - Compliance committee operations can be reported to the senior leadership group as well as to the board
- Oversight vs. Operational

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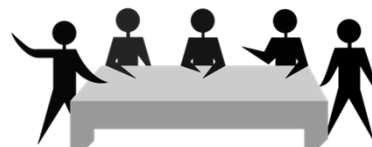
Considerations for Different HealthCare Entities and Structures: Large Systems

- Consider creating facility or service line subcommittees that report up to a main compliance committee
 - By department (laboratory, pharmacy, revenue cycle)
 - By provider type (hospital, SNF, home care, physician group, alternative payment models, etc.)
 - By geographic location
 - By product (healthcare services, insurance, billing)

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Charter

- Purpose
 - Oversight vs. Operational
- Composition
 - Include by position
 - Quorum
- Meetings
 - Frequency, chairperson, who maintains minutes, etc.
- Goals
- Responsibilities/Duties



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Updated Committee Structure

- Memo from the CEO to Members
- Inaugural Meeting
 - Basic 7 elements
 - CCO and Committee functions/roles & responsibilities
 - Relevant Acronyms and Agencies
 - Case Studies
- Structured orientation for new members
- Regular Updates
- Involve members re: educational needs

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Scheduling Committee Meetings

- Schedule for the entire year (e.g., first Wednesday of the month beginning each quarter)
- Coordinate beforehand with CEO and other senior leadership regularly scheduled meetings to avoid conflicts
- Conduct at least two weeks prior to the Board of Directors scheduled meetings
- “Carrot” approach: provide a meal a half hour before start time (e.g., 11:30 AM start time) and serve lunch (yes, really)

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Meeting Preparation

- Distribute agenda to all members ahead of time electronically and print for distribution at meeting (see template in handouts)
- Agenda to include (and stick to it)
 - Start time
 - Finish time
 - Time allotted to each segment
- Standing agenda items/reports
 - New Business and progress/updates on Old Business
 - Compliance related education-use specific education focused on compliance related operational issue
 - Reports (Privacy, Audit, etc.)
 - Sub-committees (Research, Special Task Force reports)

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Meeting Preparation

- Assign presentations to operational areas (e.g., CAP status, newly identified risk area)
- Roundtable
- Adjourn
- Add note for next meeting date

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Conducting Meetings

- Start on time; end on time; keep to agenda
- Distribute Attendance Sheet
 - Date, location, name of committee
 - Templated list of members and place for signature
- Confidential materials to be marked and collected
- Actively Chair the meeting (e.g., request a resolution when action is required (ask the question: *is there a motion?*))
- When necessary, hold “the meeting before the meeting” to avoid confusion, finger pointing, and embarrassment
- Utilize a facilitator and facilitation tools such as a “parking lot”, a timekeeper, and clear desired outcomes
- Utilize consent agenda where appropriate

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Minutes

- Draft immediately
- Contents
- Be concise
- Use neutral language
- Do not memorialize privileged legal discussion
- Distribute timely
- Retention policy



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Questions to Ask Yourself

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Questions to Ask Yourself

- Structure
 - Is there a Charter, policy or other document that establishes the membership, authority, roles and responsibilities?
 - Is the committee appropriately structured with senior executives including CEO, CFO, COO, and others responsible for all operations posing regulatory risks?
 - Does the committee meet at least quarterly?
 - Is there active participation?
 - Do minutes evidence meetings and attendance?
 - Do minutes document key discussions, decisions, and follow-up?
 - Does Committee use functioning subcommittees?

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Questions to Ask Yourself

- Oversight function
 - Does committee assure the Compliance Department has adequate budget and resources to carry out its function?
 - Has the committee established controls to ensure your organization is aware of regulatory changes?
 - Evidence of committee's active involvement in analyzing changing regulatory environment and associated risk areas (e.g., actions, metrics such as error rates and qualitative training results)?
 - Is there a formal process to review the Code of Conduct and policies related to the program's operation and management?

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Questions to Ask Yourself

- Does the committee provide input related to hotline and other compliance communication channels, significant investigations, and corrective action (e.g., repayment)?
- Does the committee oversee ongoing auditing and monitoring function (e.g., involvement in identifying risks, work plan, and corrective action follow up)?
- Does your Committee establish task forces/work groups for identified high risk areas as needed?
- Does the Committee ensure effectiveness of Compliance program and structure and provide evidence to the Board of Directors?
- Does your Committee ensure operational regulatory compliance?
 - Annual risk identification and assessment process
 - Remediation of identified/prioritized risks
 - Develops/approves annual audit work plan
 - Ensures corrective actions developed and implemented

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Slide 26

JF3

i rewrote this to use as questions/points to make before discussing specific tools.

Judith Fox, 2/11/2019

Case Studies

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Case Study #1 – Provider Contract Management

- Questions:
 - Does process change identified by compliance team that have an immediate impact on regulatory compliance seem out of reach?
 - Does your Compliance Committee actively support process improvement?
- Background
- Original Issue
- Problem/Risk
 - Compliance
 - Operational
- Steps
- Results

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Case Study #2: Accountability

- Questions:
 - What role can the committee play with regard to creating and monitoring accountability of compliance initiatives such as corrective action plans.
- Background
- Original Issue
- Problem/Risk
 - Compliance
 - Operational
- Steps
- Results

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Case Study #3: Risk Assessment

- Questions:
 - What is the compliance committees role with regard to risk assessment.
- Background
- Original Issue
- Problem/Risk
 - Compliance
 - Operational
- Steps
- Results

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Questions



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Templates

- Charter
- Agenda
- Minutes

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LOGO

 ABC Provider Corporate Compliance Committee

Purpose

The Board of Directors of ABC Provider has established the (Executive) Corporate Compliance Committee ("Committee") to provide oversight and support to ABC Provider's Corporate Compliance Program ("Compliance Program"). The Committee Members have the responsibility to contribute to continual improvement in the performance of the Compliance Program.

Structure

The Committee is a senior level committee representing (insert reference to all entities). Committee membership includes, but is not limited to, representation from the following:

- CEO (or designee)
- CFO (or designee)
- Human Resources
- Risk Management
- Patient Financial Services
- Nursing/Clinical Ancillary Areas
- HIPAA Privacy Officer
- Data Security Officer
- Information Systems
- Legal Counsel
- Quality Care
- Medical Officer
- Materials Management
- Additional representatives as designated by the Chair as needed.

The Committee may create subcommittees and/or adhoc committees to address various issues, as needed.

The Chief Compliance Officer shall Chair the Committee and is responsible for reporting the compliance activities of the organization, maintaining the minutes of the meeting, ensuring that decisions are implemented in a timely fashion, and reporting to the ABC Provider Board of Directors.

The Committee shall meet on no less than a quarterly basis, and/or more frequently as needed

Goal & Responsibilities

The Committee shall be knowledgeable about the content and operation of the Compliance Program and must exercise reasonable oversight with respect to its' implementation and effectiveness.

The goals of this Committee include:

1. To create a centralized mechanism for tracking and monitoring compliance with all applicable laws, rules and regulations.
2. To prevent, detect and correct known or suspicious fraud or abuse or other forms of misconduct that would expose the organization.

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The Committee shall play an active role in recommending, monitoring and developing internal systems and controls to ensure adherence to organizational standards, policies and procedures, including but not limited to:

- 1 Regular review of Compliance Program policies to ensure they adequately address legal requirements and identified risk areas;
- 2 Ensuring appropriate training and education is provided to employees;
- 3 Evaluating potential areas of compliance vulnerability;
- 4 Ensuring proper evidencing of the Compliance Program effectiveness;
- 5 Establishing heightened awareness of compliance issues, and improved employee skills in dealing with these issues;
- 6 Enhancing appreciation by leadership for how to promote compliance in the work environment;
- 7 Ensuring an appropriate infrastructure for the administration of the Compliance Program including mechanisms for long term support;
- 8 Advancing the principles set forth in the ABC Provider's Code of Ethics;
- 9 Reviewing disciplinary actions relating to serious violations of the Code, including possible criminal or civil fraud activities;
- 10 Acting as the oversight Committee for HIPAA Privacy; and
- 11 Forming ad hoc committees to address issues in particular areas of need.

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[COMPANY NAME]
EXECUTIVE COMPLIANCE COMMITTEE CHARTER
 Adopted [Date]

Introduction and Purpose
 [Company Name] (the "Company") is a publicly-held company and operates in a complex, dynamic, highly competitive, and regulated environment. The Company's business involves an environment that is highly regulated at both the federal and state level. To assist the Company's senior management in its responsibilities relating to the Company's operational compliance with applicable legal requirements and sound ethical standards, the Company's senior management has established an Executive Compliance Committee, which will provide oversight of and direction to the Compliance Officer and receive a report from the Compliance Officer no less frequently than every quarter.

Composition
 The Executive Compliance Committee is composed of the following positions:

- Chief Financial Officer
- Senior Vice President of Human Resources
- Chief Executive Officer, ex officio
- Compliance Officer
- General Counsel
- Corporate Controller
- Chief Information Officer or designee
- Chief Operational Officer and President, ex officio
- Internal Auditor representative, ex officio

and such other positions appointed by the Chief Executive Officer.

Meetings
 The Executive Compliance Committee shall meet quarterly, approximately 2 weeks before each Board of Directors meeting. A majority of the Committee constitutes a quorum for the transaction of business. The Committee shall take action by the affirmative vote of a majority of the Committee members present at a duly held meeting.

Responsibilities and Duties
 The Executive Compliance Committee will undertake the following responsibilities and duties and any other activities related to the Company's Compliance Program.

Compliance Standards and Policies

- Oversee the development or modification, issuance, distribution and review of the Code of Conduct and appropriate Compliance policies.
- Oversee the development and implementation of employee communication and training regarding the Code of Conduct, policies and ethics and compliance issues.

Executive Compliance Committee Charter Page 1 Revised: [Date]

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Employee and Contractor Training

- Oversee the development and implementation of appropriate and adequate training regarding the Code of Conduct, policies and Compliance Program
- Oversee the development and implementation of employee communication regarding the Compliance Program and issues.
- Oversee administration of a certification program for all employees and appropriate contractors to ensure that they receive, read, acknowledge understanding of, and agree to comply with the Company's Code of Conduct and policies.

Reporting and Complaints Processes

- Oversee the Company's processes, including a toll-free telephone number, through which employees may seek advice on application of the Company's Code of Conduct and policies and report potential Code, policy and legal violations.
- Oversee, on the basis of quarterly reports from the Compliance Officer, the investigations of compliance violations reported to the Compliance Officer.

Monitoring and Auditing Compliance
With Code of Conduct, Policies and Legal Requirements

- Ensure appropriate internal and/or external audits and surveys are conducted to verify adherence to the Code of Conduct, policies and applicable legal requirements.
- Oversee periodic employee surveys to test awareness of the Company's compliance guidelines and procedures.
- Direct the Compliance Officer to commission special audits as necessary to verify adherence to the Code of Conduct, policies and/or legal requirements.

Enforcement and Discipline

- Oversee appropriate and consistent discipline is imposed for violations of the Code of Conduct, policies and legal requirements
- Receive quarterly reports from the Compliance Officer regarding reported disciplinary action taken during the prior quarter.

Response and Prevention

- Oversee the action taken by the Company to ensure violations of the Code of Conduct, policies and/or legal requirements are remedied.
- Oversee steps taken to prevent similar violations from occurring in the future

<https://www.hcca-info.org/Resources/View/tabid/451/ArticleId/2406/Executive-Compliance-Committee-Charter.aspx>

Executive Compliance Committee Charter Page 2 Revised: [Date]

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[enter logo]

[enter organization] Corporate Compliance Committee
Tuesday, October 9, 2018 at 2:00 to 3:30 PM
[enter location]

AGENDA

Agenda Items	Presenter	Time Allotted
1. Call to Order		
2. Approval of Minutes (Att. I)		
3. Consent Agenda		
4. Old Business		
5. Committee Education		
6. Compliance Department Reports		
7. New Business		
8. Standing Reports		
9. Round Table		
10. Adjourn		

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[Insert Logo]

[INSERT NAME] COMPLIANCE COMMITTEE MEETING MINUTES

DATE: _____ CALL TO ORDER: _____

TIME: _____ TIME ENDED: _____

MEMBERS/GUEST(s): PRESENT LOCATION OF MEETING: _____

EXCUSED: _____

CHAIR/PRESIDING: Chief Compliance Officer RECORDER: _____

TOPIC	DISCUSSION/CONCLUSION	RECOMMENDATION/ ACTION/RESOLUTION
Call to Order:		
Approval of minutes from prior meeting		
Consent Agenda		
Old Business		
New Business		
Standing Reports		
Round Table		
Adjourn Next Compliance Meeting	Date: Time: Location:	

Resources

- **Slides 6 and 7:** OIG Compliance Program Guidance for Hospitals: <https://oig.hhs.gov/authorities/docs/cpghosp.pdf>, issued in 1998 and supplemented in 2005: <https://oig.hhs.gov/fraud/docs/complianceguidance/012705HospSupplementalGuidance.pdf>.
- **Slides 8 and 9:** Measuring Compliance Program Effectiveness: A Resource Guide, prepared by the HCCA-OIG: <https://oig.hhs.gov/compliance/101/files/HCCA-OIG-Resource-Guide.pdf>, issued March 27, 2017
- **Slide 10:** <https://oig.hhs.gov/compliance/corporate-integrity-agreements/cia-documents.asp>
- **Slide 11:** U.S. Department of Justice, Criminal Division, Fraud Section: Evaluation of Corporate Compliance Programs: <https://www.justice.gov/criminal-fraud/page/file/937501/download>, issued in February 2017.

Additional Resources:

- Practical Guidance for Health Care Governing Boards on Compliance Oversight: <https://oig.hhs.gov/compliance/compliance-guidance/docs/Practical-Guidance-for-Health-Care-Boards-on-Compliance-Oversight.pdf>, issued on March 20, 2015 by the OIG, AHIA, AHLA and HCCA.
- Corporate Responsibility and Corporate Compliance: <https://oig.hhs.gov/fraud/docs/complianceguidance/040203corpresprsceguide.pdf>, issued in 2003 by the HHS OIG.
- An Integrated Approach to Corporate Compliance: <https://oig.hhs.gov/fraud/docs/complianceguidance/Tab%204E%20Appendx-Final.pdf>, issued in 2004 by the HHS OIG and AHLA.
- Corporate Responsibility and Health Care Quality: A Resource for Health Care Boards of Directors: <https://oig.hhs.gov/fraud/docs/complianceguidance/040203CorpRespRsceGuide.pdf>, issued in 2007 by the HHS OIG and AHLA.