

# Compliance and the Corporate Integrity Agreement

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# CORPORATE INTEGRITY AGREEMENT

- The Corporate Integrity Agreement (“CIA”) was effective on August 31, 2015, for a term of five years.
- The CIA was based on physician arrangements and other referral source arrangements. Main requirements based on referral sources:

<b>Referral Source Requirements</b>	<b>Contract Management System</b>	<b>Independent Review Organization</b>	<b>Tracking Remuneration</b>
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- The CIA had other requirements:

<b>Training</b>	<b>Sanction Screening</b>	<b>Risk Assessment</b>	<b>Reportable Events</b>
<b>Disclosure Program</b>	<b>Code of Conduct</b>	<b>Policies &amp; Procedures</b>	<b>Overpayments</b>

- Lastly, the CIA required oversight by the following:

<b>Chief Compliance Officer</b>	<b>Board Compliance Committee</b>	<b>Executive Compliance Group</b>
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# EXECUTIVE COMPLIANCE GROUP

-Executive Compliance Group (“ECG”) – The ECG consists of executives from the Corporate Offices and also from each of the hospitals and regional facilities. This group helps drive the program down to the operating level of BH. A charter for the ECG was developed and approved and been provided to the Board of Commissioners. The ECG was divided into seven subcommittees, each focused on specific area of responsibility. Each subcommittee is chaired by a BH executive with support staff from the Compliance Office.



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# ECG SUBCOMMITTEES

- 1) IRO Plan of Correction Sub-Committee – The Sub-Committee would review and track any recommendations made by the IRO during their testing of transactions and systems. A checklist of recommendations was used as the tracking mechanism.
- 2) Disclosures Sub-Committee – The Sub-Committee reviews the timeliness of resolving disclosures and the institution of corrective action so that the issue is not only resolved but does not recur. If needed, management may be brought before the Committee to discuss any delays in taking corrective action.
- 3) Sanctions Screening Sub-Committee – The CIA required that all covered persons and entities be screened upon hire and monthly thereafter. The Committee was charged with verifying and reporting on the screening process; and ensuring proper follow up actions is taken on any verified “hits”.



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# ECG SUBCOMMITTEES

4) Risk Assessment, Auditing, and Monitoring Sub-Committee – The Sub-Committee reviews the enterprise risk assessment (“ERM”) process and identifying new risks to be considered and assessed. The Committee is also charged with the review of the Compliance Audit Plan and compliance and monitoring plan.

5) Training Sub-Committee – This Sub-Committee reviews/approves training goals and current compliance training programs; and makes recommendations to improve training program effectiveness.

6) Code of Conduct and Compliance Sub-Committee – This Sub-Committee ensures timely review BH’s Code of Conduct and reviews/approves all compliance policies within established timeframes.



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# CIA TRANSITION PLAN

- A tracking document was created to monitor completion of all items from CIA Transition Plan.
- The tracking document will be monitored by the Auditing and Monitoring Subcommittee of the ECG.
- The commitment to compliance by the Board of Commissioners and Executive Leadership throughout Broward Health will ensure compliance success into the future.



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