

# Understanding Compliance in Healthcare

## What is the OIG?

The **Office of Inspector General (OIG)** is part of the U.S. Department of Health and Human Services (HHS).

It's the agency that helps protect federal healthcare programs like **Medicaid and Medicare** from waste, fraud, and abuse.

For **Federally Qualified Health Centers (FQHCs)**, the OIG provides guidance on how to build strong compliance programs.

Following these guidelines helps ensure we:

- Follow all federal and state laws,
- Bill correctly for services,
- Protect patient information (HIPAA), and
- Maintain the public's trust and funding that keeps our center running.

The **OIG** outlines **7 essential elements** that every healthcare organization should follow to build a strong compliance program. These elements help us operate ethically, follow the law, and protect our patients and funding.

We'll explore these elements in the next slide.



# Building a Strong Compliance Program

## 1. Written Policies and Procedures

Clear written rules that explain what's expected, how to follow laws, and how to do our work ethically and correctly.

→ *They guide decisions and help prevent mistakes or violations.*

## 2. Compliance Officer and Committee

A compliance officer and a supporting committee make sure the program works and address any concerns.

→ *They lead by example and keep compliance a top priority.*

## 3. Training and Education

Regular, easy-to-understand training for all staff about laws, regulations, and ethical behavior.

→ *If everyone knows the rules, everyone can follow them.*

## 4. Open Lines of Communication

Safe, easy ways to ask questions or report concerns — like a hotline or talking to the compliance officer.

→ *We want people to speak up without fear of punishment*



# Building a Strong Compliance Program

## 5. Internal Monitoring and Auditing

Regular checks and reviews of how we do things — billing, patient privacy, procedures, etc.

→ *We find and fix problems before they grow bigger.*

## 6. Enforcement and Discipline

Fair and consistent consequences when rules are broken — for everyone, no exceptions.

→ *Accountability builds trust and fairness.*

## 7. Response and Prevention

When something goes wrong, we investigate, correct it, and make changes to prevent it from happening again.

→ *It's not about blame — it's about learning and improving.*

## Why It Matters

Following OIG guidance helps us stay compliant, protect our patients, and keep our FQHC strong and trustworthy.

It's about **doing what's right — every time, everywhere.**



# CHC Current Compliance Program Status

Element One	Board Compliance Committee Charter	Not Started	High
	Board Resolution Establishing a Compliance Program	Not Started	High
	Compliance Officer Job Description	Not Started	High
	Staff Compliance Committee Charter	Not started	High
Element Two	Board Member Screening Policy	Not started	High
	Corporate Compliance Plan	Not started	High
	Exclusion and Debarment Screening Policy and Procedure	Not started	High
	Preventing Fraud, Waste and Abuse - Policy and Procedure	Not started	High
	Record Retention - Policy and Procedure	Completed	Low
	Standards of Conduct_Conflict of Interest Policy and Procedure	Completed	High
Element Three	Training and Education - Policy and Procedure	Not started	Medium
Element Four	Compliance Hotline - Establish ( compliance email)	In progress	High
	Compliance Issue Reporting and Response - Tool	Not started	High
	Non-Retaliation and Whistleblower Protection - Policy and Procedure	Completed	Medium
	Reporting Instances of Non-Compliance - Policy and Procedure	Not started	Medium
Element Five	Internal Monitoring and Auditing - Policy and Procedure	In progress	Medium
Element Six	Responding to Allegations of Non-Compliance Concerning the CEO - Policy and Procedure	Not started	Medium
	Responding to Detected Offenses - Policy, Procedure and form letter	Not started	Medium
	Responding to External Compliance Audits or Investigations - Policy and Procedure	Not started	Medium
Element Seven	Compliance Provisions for Position Descriptions and Contracts - added to all contracts and position descriptions?	Not started	Medium
	Enforcing Disciplinary Standards - Policy and Procedure	Completed	Low

# CHC Current Compliance Program Status

- Total Compliance Elements: 21
  - Not Started: 16 (76%)
  - In Progress: 2 (10%)
  - Completed: 4 (19%)
- High-priority gaps exist in governance and policy foundations.
- Moderate progress in reporting, auditing, and enforcement elements.
- Training and corrective action components have not been initiated.

