



Policy #: XXXXX
Title: **Compliance Committee**
Department: Compliance
Section: Not Applicable
Approval: Name

Effective Date: xx/xx/xx
Last Revised Date: xx/xx/xx

I. PURPOSE

This policy describes the role and responsibility of [Insert Organization Name]'s Compliance Committee in ensuring and enforcing compliance with ethical standards, regulatory requirements, contractual obligations, the Compliance Program, including the Fraud, Waste, and Abuse (FWA) Plan and Code of Conduct, and [Insert Organization Name] policies and procedures.

I. POLICY

- A. The Compliance Committee shall oversee compliance efforts in accordance with the Compliance Program, including the Compliance Plan, Fraud, Waste, and Abuse (FWA) Plan, Code of Conduct, all applicable regulations, policies and procedures, and contracts.
- B. The Compliance Committee shall recommend and monitor, in collaboration with the Office of Compliance, the development of internal processes and procedures to implement and support the Compliance Plan, Code of Conduct, the FWA Plan, and adherence to relevant statutory, regulatory, and contractual obligations.
- C. The Office of Compliance shall provide summary updates of all issued Corrective Action Plan(s) (CAPs) to the Audit & Oversight Committee (AOC) and Compliance Committee for review. The Compliance Committee shall Monitor and report on the effectiveness of issued CAPs.

II. PROCEDURE

- A. Compliance Committee Organization
 1. The Compliance Officer shall serve as chairperson of the Compliance Committee.
 2. Each member of the Compliance Committee is a voting member. Voting members may appoint a Designee, when deemed appropriate. The Designee may serve as a subject matter expert at the Compliance Committee meeting; however, the Designee will not have voting rights unless approved in advance by the Compliance Officer.

3. At the request of the chairperson of the Compliance Committee, [Insert Organization Name] Employees may be requested to attend a Compliance Committee meeting on an ad-hoc basis. Attendance may be warranted to support discussion items at the Compliance Committee meeting and/or to provide clarification for the voting members.
4. Activities of the Compliance Committee, to the extent not deemed privileged and confidential, shall be disclosable.

B. Compliance Committee Meetings

1. The Compliance Committee shall meet at least on a quarterly basis, or more frequently, as significant non-compliant and/or FWA issues are identified outside of the quarterly time period, as determined by the Compliance Officer. Annually, Compliance Committee members shall receive a calendar of meetings for the calendar year as well as a reporting matrix which includes all planned reports to be presented during scheduled Compliance Committee meetings.
2. A Committee binder is distributed to all meeting attendees prior to the Compliance Committee meeting. The Committee binder shall include, but is not limited to:
 - a. Current meeting agenda;
 - b. Final draft meeting minutes from the previous Compliance Committee for approval;
 - c. Listing of open action items;
 - d. Submitted Compliance Committee reports;
 - e. Scheduled audit reports;
 - f. CAP monitoring;
 - g. Notices of Non-Compliance; and
 - h. Special reports, which may include, but not limited to, any reports not regularly presented to the Compliance Committee that may be of interest or concern, or is intermittent in nature.
3. Minutes of Compliance Committee meetings shall be maintained by the Office of Compliance in the normal course of business.
4. Ad-hoc Compliance Committee meetings may be held at the discretion of the chairperson, as deemed appropriate.

C. Compliance Committee Responsibilities

1. The Compliance Committee responsibilities include, but are not limited to:
 - a. Determine the appropriate strategy and/or approach to promote compliance; to prevent, detect, and correct potential violations; and to advise the Compliance Officer accordingly;

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- b. Review and approve training related to Compliance and FWA and ensure that training and education are effective and appropriately completed;
 - c. Assist with the creation and implementation of the Office of Compliance Annual Risk Assessment and of the compliance Monitoring and Auditing work plan;
 - d. Review and Monitor the effectiveness of the Compliance Program, including Monitoring key performance reports and metrics, evaluating business and administrative operations, and overseeing the creation, implementation, and development of corrective and preventive action(s) to ensure they are prompt and effective;
 - e. Review overall effectiveness of the internal controls designed to ensure compliance with applicable regulations in daily operations;
 - f. Receive reports from the Compliance Officer, on at least a quarterly basis, concerning the Compliance Program;
 - g. Review and approve recommendations of appropriate actions to ensure [Insert Organization Name] is complying with the applicable laws, regulations, and ethical standards;
 - h. Ensure legal counsel is consulted as appropriate and all applicable rights are preserved, including the attorney-client privilege;
 - i. Ensure [Insert Organization Name] has a Compliance & Ethics Hotline and an Office of Compliance email address for [Insert Organization Name] Members, members of the Governing Body, Employees, and FDRs to ask compliance questions and report potential issues regarding any [Insert Organization Name] program. Inquiries may include, but are not limited to, non-compliance and potential FWA. Information presented shall be handled confidentially (to the extent permitted by applicable law and circumstances) and may be submitted anonymously, if desired by the informant, without fear of retaliation;
 - j. Ensure [Insert Organization Name] has appropriate and current compliance policies and procedures;
 - k. Review and address reports of Monitoring and Auditing of areas in which [Insert Organization Name] is at risk of program non-compliance and/or potential FWA, and ensure CAPs and ICAPs are implemented and Monitored for effectiveness;
 - l. Provide regular and ad-hoc status reports of compliance with recommendations to the [Insert Organization Name] Board of Directors;
 - m. Analyze applicable federal and state programs, including contractual, legal, and regulatory requirements, along with areas of risk, and coordinate with the Compliance Officer to ensure the adequacy of the Compliance Program; and
 - n. Review the Office of Compliance's process for soliciting, evaluating, and responding to reports and disclosures within the Compliance Program.
2. The Compliance Committee shall evaluate the effectiveness of such corrective actions in collaboration with the appropriate [Insert Organization Name] departments and shall make recommendations regarding ongoing monitoring activities to ensure continuing compliance.

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- D. The Compliance Committee chairperson shall report to the Board of Directors on at least a quarterly basis. The report shall include a summary of compliance issues taken before the Compliance Committee, remedial action taken, and outcomes of such actions.

III. ATTACHMENTS

Not Applicable

IV. REFERENCES

- A. [Insert Organization Name] Code of Conduct
- B. [Insert Organization Name] Compliance Plan
- C. [Insert Organization Name] Compliance Committee Charter
- D. [Insert Organization Name] Policy XXXX: Corrective Action Plan
- K. Drug Medi-Cal Managed Care Manual

V. REGULATORY AGENCY APPROVALS

None to Date

VI. BOARD ACTIONS

- A. xx/xx/xx: Regular Meeting of the [Insert Organization Name] Board of Directors
- B. xx/xx/xx: Regular Meeting of the [Insert Organization Name] Board of Directors

VII. REVIEW/REVISION HISTORY

Version	Date	Policy Number	Policy Title
Effective	xx/xx/xx	XXXX	Compliance Committee
Revised	xx/xx/xx	XXXX	Compliance Committee

VIII. GLOSSARY

Term	Definition
Abuse	<p>Actions that may, directly or indirectly, result in: unnecessary costs to a [Insert Organization Name] Program, improper payment, payment for services that fail to meet professionally recognized standards of care, or services that are medically unnecessary. Abuse involves payment for items or services when there is no legal entitlement to that payment and the provider has not knowingly and/or intentionally misrepresented facts to obtain payment.</p> <p>Abuse cannot be differentiated categorically from fraud, because the distinction between “fraud” and “abuse” depends on specific facts and circumstances, intent and prior knowledge, and available evidence, among other factors.</p>

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Audit	A formal, systematic, and disciplined approach designed to review, evaluate, and improve the effectiveness of processes and related controls using a particular set of standards (e.g., policies and procedures, laws and regulations) used as base measures. Auditing is governed by professional standards and completed by individuals independent of the process being audited and normally performed by individuals with one of several acknowledged certifications
Code of Conduct	The statement setting forth the principles and standards governing [Insert Organization Name]'s activities to which Board Members, Employees, FDRs, and agents of [Insert Organization Name] are expected to adhere.
Compliance Committee	The committee designated by the Executive team to implement and oversee the Compliance Program and to participate in carrying out provisions of this Compliance Plan. The composition of the Compliance Committee shall consist of senior management staff that may include, but is not limited to, the: Executive team and workgroup partners from Administration, Business Operations, Clinical Programs, Housing Programs, Fiscal Operations, and Human Resources.
Compliance Program	The program (including, without limitation, the Compliance Plan, Code of Conduct and Policies and Procedures) developed and adopted by [Insert Organization Name] to promote, monitor and ensure that [Insert Organization Name]'s operations and practices and the practices of its Board Members, Employees and FDRs comply with applicable law and ethical standards.
Corrective Action Plan	A plan delineating specific identifiable activities or undertakings that address and are designed to correct program deficiencies or problems identified by formal audits or monitoring activities by [Insert Organization Name], Los Angeles County Drug Medi-Cal, or designated representatives. FDRs and/or [Insert Organization Name] departments may be required to complete CAPs to ensure compliance with statutory, regulatory, or contractual obligations and any other requirements identified by [Insert Organization Name] and its regulators.
Designee	A person selected or designated to carry out a duty or role. The assigned designee is required to be in management or hold the appropriate qualifications or certifications related to the duty or role.
First Tier Entity	Any party that enters into a written arrangement, acceptable to DHCS and/or CMS, with [Insert Organization Name] to provide administrative services or health care services to a Member under a [Insert Organization Name] Program.
Fraud	Knowingly and willfully executing, or attempting to execute, a scheme or artifice to defraud any health care benefit program or to obtain (by means of false or fraudulent pretenses, representations, or promises) any of the money or property owned by, or under the custody or control of, any health care benefit program. (18 U.S.C Section 1347).
Governing Body	The Board of Directors of [Insert Organization Name].
Monitoring	Regular reviews directed by management and performed as part of normal operations to confirm ongoing compliance and to ensure that corrective actions are undertaken and effective.

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Waste	The overutilization of services, or other practices that, directly or indirectly, result in unnecessary costs to a [Insert Organization Name] Program. Waste is generally not considered to be caused by criminally negligent actions but rather the misuse of resources.
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