

HOSPITAL CLINICAL COMPLIANCE COMMITTEE

CHARTER

3/2/09

The Hospital Clinical Compliance Committee (“Committee”) is an oversight group for clinical compliance issues related to OHSU hospital services. The Committee is advisory to both the Clinical Compliance Officer of the Hospital and the OHSU Clinical Compliance Committee (CCC). The Committee also assists with the Clinical Compliance Program. The term “compliance” used in this charter refers to adhering to federal, state, and local laws and regulations; OHSU policies; coding and billing rules for third party payors that impact or relate to hospital services. The Committee membership represents the hospital services of the Health Care System defined below.

The components of hospital services associated with the Health Care System include those services that are provided and billed by the hospital. The Health Care System includes activity from the Schools of Medicine, Dentistry, and Nursing; the Child Development and Rehabilitation Center; the clinical research enterprise; the Faculty Practice Plan; the Hospitals; and all other sites or programs that are involved in the delivery of patient care. As used in this charter, the term “OHSU” is used to refer to all of these components.

The Committee shall meet at least quarterly. However, the Committee may be convened at the Chair’s discretion for urgent matters. . The Committee may request that Legal Counsel attend the meetings from time to time to provide legal advice to the Committee or when matters are subject to attorney-client privilege. The Committee shall provide an annual report to the OHSU Chief Integrity Officer. Hospital services compliance will be included in the annual OHSU Integrity Program report to the OHSU Board of Directors.

The Committee shall maintain minutes of all its meetings to document its activities and recommendations. The primary goals of the Committee are to:

1. Assist the OHSU Board of Directors in fulfilling its governance responsibilities relating to OHSU hospital services compliance with applicable laws, regulatory requirements, industry guidelines, and policies.
2. Provide oversight to the development and implementation of an educational program for hospital services that will provide for proper documentation, billing, and collection processes and accurately reflect the services performed and billed by OHSU hospital activities.
3. Provide a vehicle for communication between the Committee and the OHSU Chief Integrity Officer, the CCC, and the OHSU Board of Directors.

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A Chair of the Committee will be a member of the committee. A co-chair will also be named from the committee members. The term of the Chair will be 2 years. At the end of the 2 year term the co-chair will become the new Chair and a new co-chair will be named.

Members of the committee are responsible to attend and actively participate in the meetings and representing the departments of the hospital or other areas that are within their purview. Members who cannot attend a meeting may not send a representative in their place.

The Committee will decide upon recommended actions by majority vote of members present. In some cases, the Chair may decide to conduct Committee business via electronic means and the majority vote of the members electronically responding will apply.

Advisory responsibilities of the Committee include:

1. Recommending approval to the CCC and providing oversight of the implementation, monitoring, and enforcement of a written program for compliance with regulations and guidelines of federal and state authorities, applicable to hospital activities (the Clinical Compliance Program).
2. Working with appropriate areas within OHSU to assure development of policies and procedures to promote compliance with the Clinical Compliance Program as it relates to hospital services.
3. Recommending approval to the CCC and providing oversight of a communication plan for personnel regarding the development, implementation, and monitoring of the Clinical Compliance Program related to hospital services.
4. Recommending approval to the CCC and providing oversight of the compliance risk assessment of areas of hospital activities at OHSU, including prioritizing high-risk areas of concern. At the direction of Legal Counsel, this assessment may be implemented as a privileged document that guides clinical compliance activities.
5. Recommending, monitoring and overseeing reviews, and developing and implementing plans for acting on results of the reviews.
6. Overseeing internal systems, controls, and monitoring to carry out the policies and procedures related to the hospital services standards of the Clinical Compliance Program.
7. Promoting and overseeing a system to solicit, evaluate, and respond to clinical compliance inquiries, complaints, and problems.

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8. Assuring timely response to clinical compliance problems in a manner that resolves immediate issues and prevents future issues of the same type.
9. Overseeing a continuous education program that explains the compliance program, specific requirements, and relevant laws and regulations for all OHSU personnel involved in hospital services activities.
10. Overseeing the periodic evaluation of the effectiveness of the hospital services portion of the Clinical Compliance Program

Members of the Hospital Clinical Compliance Committee include:

1. Director Health Information Management (HIM)
2. Director Patient Business Services (PBS)
3. Manager, Medicare & Medicaid, PBS
4. Senior Manager for Clinical Research Billing
5. Healthcare System Lab Director
6. Reimbursement Manager, Hospital Fiscal Services
7. Associate Healthcare Administrator for Finance
8. Director Care Management
9. Assistant Integrity Officers for Hospital Services (non-voting)
10. Clinical Compliance Officer, Professional Services or designee (non-voting)
11. Clinical Compliance Officer, Hospital Services (Staff)

Additional representatives as deemed appropriate by the Chair of the Committee

In addition to the above membership, legal counsel will attend and participate in the Hospital Clinical Compliance Committee meetings as necessary and appropriate for the rendering of legal advice to the Committee and OHSU. It is permissible for one representative to fill more than one of the identified roles for the Committee.