



TAHOE FOREST HOSPITAL DISTRICT

2016-01-20 Board Governance Committee Meeting

REVISED on 01/19/2016 at 9:59 a.m.

2016-01-20 12:00 PM

Tahoe Conference Room - Tahoe Forest Hospital

10054 Pine Avenue, Truckee, CA 96161

Meeting Book - 2016-01-20 Board Governance Committee Meeting

01/20/2016 Governance Committee Agenda

AGENDA

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5. APPROVAL OF MINUTES

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6. CLOSED SESSION

7. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

7.1. Governance Committee Education
David Henninger, Hooper, Lundy & Bookman

7.2. 2016 Corporate Compliance Program Annual Work Plan Review Page 9

7.3. Board Retreat Update

7.4. Contracts

7.4.1. Wicks_TFHD_Physician_Recruitment_Agreement revised.pdf Page 15

7.4.2. Wicks_TFH_Call_Coverage_Agreement_2016 revised.pdf Page 35

7.4.3. Wicks_TFHD_PSA-MSA_2016 revised.pdf Page 62

ITEMS 8 - 10: See Agenda



GOVERNANCE COMMITTEE AGENDA

(Revised on 01/19/2016 at 9:59 a.m.)

Wednesday, January 20, 2016 at 12:00 p.m.
Tahoe Conference Room - Tahoe Forest Hospital
10054 Pine Avenue, Truckee, CA.

1. CALL TO ORDER

2. ROLL CALL

Karen Sessler, M.D., Chair; Greg Jellinek, M.D., Board Member

3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

4. INPUT – AUDIENCE

This is an opportunity for members of the public to address the Committee on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Board Clerk 24 hours prior to the meeting to allow for distribution. Under Government Code Section 54954.2 – Brown Act, the Committee cannot take action on any item not on the agenda. The Committee may choose to acknowledge the comment or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting.

5. APPROVAL OF MINUTES OF: 12/16/2015

6. CLOSED SESSION

6.1. Approval of Closed Session Minutes: 12/16/2015

7. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

7.1. Governance Committee Education

Hooper, Lundy & Bookman will present committee education on Physician Compensation and Fair Market Value.

7.2. 2016 Corporate Compliance Program Annual Work Plan Review..... ATTACHMENT

Committee will review the proposed 2016 Corporate Compliance Program Annual Work Plan.

7.3. Board Retreat Update

Committee will receive an update on the February 1-2, 2016 Board Retreat.

7.4. Contracts ATTACHMENT

New, amended, and auto renewed contracts are submitted to the Governance Committee for review and consideration for recommendation of approval by the Board of Directors.

7.4.1. Wicks - Physician Recruitment Agreement for Conditional Loan Repayment 2016

7.4.2. Wicks - TFH Call Coverage Agreement 2016

7.4.3. Wicks - Professional Services Agreement-MultiSpecialty Clinics 2016

8. **REVIEW FOLLOW UP ITEMS / BOARD MEETING RECOMMENDATIONS**
9. **NEXT MEETING DATE**
10. **ADJOURN**

*Denotes material (or a portion thereof) may be distributed later.

Note: It is the policy of Tahoe Forest Hospital District to not discriminate in admissions, provisions of services, hiring, training and employment practices on the basis of color, national origin, sex, religion, age or disability including AIDS and related conditions.

Equal Opportunity Employer. The meeting location is accessible to people with disabilities. Every reasonable effort will be made to accommodate participation of the disabled in all of the District's public meetings. If particular accommodations for the disabled are needed (i.e., disability-related aids or other services), please contact the Executive Assistant at 582-3481 at least 24 hours in advance of the meeting.



GOVERNANCE COMMITTEE

DRAFT MINUTES

Wednesday, December 16, 2015 at 1:30 p.m.
Foundation Conference Room - Tahoe Forest Hospital
10121 Donner Pass Road, Truckee, CA.

1. CALL TO ORDER

Meeting was called to order at 1:34 p.m.

2. ROLL CALL

Board: Karen Sessler, M.D., Chair; Greg Jellinek, M.D., Board Member

Staff: Judy Newland, CNO/COO; Jake Dorst, CIO; Stephanie Hanson, Compliance Analyst, Gayle McAmis, MSC

Other: Jim Hook, The Fox Group

3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

7.1.5. NTAG contract was moved to be reviewed first since Dr. Thomas was in attendance to answer any questions.

4. INPUT – AUDIENCE

No public comment was received.

5. APPROVAL OF MINUTES OF: 11/18/2015

Director Sessler recommended approval of minutes.

Open Session recessed at 1:37 p.m.

6. CLOSED SESSION

6.1. Approval of Closed Session Minutes: 11/18/2015

Discussion was held on a privileged matter.

Open Session reconvened at 1:40 p.m.

7. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

7.1. Contracts

7.1.1. Kitts - Amendment to Agreement to Provide Coverage of Emergency Department Professional Services 2015

Governance Committee recommends to full board for approval on consent calendar.

7.1.2. Wicks - Physician Recruitment Agreement for Student Loan Repayment 2016

Jake Dorst and Gayle McAmis provided background on Dr. Wicks' agreement for student loan repayment.

7.1.3. Wicks - TFH Call Coverage Agreement 2016

Dr. Wicks' Call Coverage Agreement has a term of 18 months in order to align with the remaining pediatricians.

7.1.4. Wicks - Professional Services Agreement-MultiSpecialty Clinics 2016

Gayle McAmis highlighted the differences between physician's contract and other pediatricians. Contract was drafted using current MGMA data.

Discussion took place regarding compensation level against current pediatricians' compensation. Board Directors are concerned pediatricians are going to be offended by contract.

Discussion took place regarding difficulty to recruit pediatricians.

Contract does not deviate from compensation levels Board approved.

Contract has a clause that if physician falls lower than 90% of production target a review by Head of MSC, etc. will kick in.

All of current pediatricians exceed production target.

Board members expressed concern about this contract being a surprise to the other pediatricians at the Board meeting. Gayle McAmis was asked to speak with the other pediatricians prior to presenting the contract at the board meeting.

7.1.5. North Tahoe Anesthesia Group – First Amendment to Agreement for Exclusive Provision of Anesthesia and Related Services 2016

Item was heard before 7.1.1.

Judy Newland provided background on NTAG contract. Quality metrics were introduced into the agreement. For one year, transition year, work with anesthesia group will take place in early 2016 to discuss how it would look.

Organizational structure of North Tahoe Anesthesia Group remains the same.

Governance Committee recommends adding to full board agenda under consent calendar.

7.1.6. Sutton-Pado - Professional Services Agreement-MultiSpecialty Clinic 2016

Physician contract is drafted differently than other physician contracts. Contract is billed on an hourly rate, capped at 10 hours per day. Not common for Occupational Health doctors to be paid by WRVU. IVCH traditionally does not pay based on WRVU. Anticipated some of the days could be 10 hours per day and medical directorship duties are folded in.

Staff was directed to rephrase wording for total cost of contract on contract routing form.

Governance Committee recommends to full Board on consent agenda.

7.2. Board Compliance Education

Jim Hook of The Fox Group reviewed the compliance education presentation.

Director Sessler asked for The Fox Group to find examples of what other board are putting on their agendas regarding this topic.

Discussion took place as to how long the presentation should be.

Annual Compliance Plan will come to the full Board in January.

Evaluation of 2015 Compliance Program will be forthcoming. Goal of the survey is for the Board to reflect on last year's compliance program, give feedback, and evaluate whether or not needs were met.

7.3. OIG Work Plan Review

Jim Hook reviewed selected portions of the 2016 OIG Workplan with the Committee in preparation for developing the TFHD 2016 Corporate Compliance Workplan.

Every year look at what the OIG is doing and what is changing. General background information. Committee requested an executive summary of items that apply to TFHD to be included in the future.

Clerk of the Board directed to post OIG Workplan to Board's Resource Library once summary from The Fox Group is received.

7.4. Compliance Program – Physician Compensation

Committee reviewed an informational report from The Fox Group regarding a physician compensation audit.

Compliance audited physician payments in October and verified all payments were correct.

Invoices for November services were reviewed. Discrepancies were noted on two invoices and were corrected prior to payment.

Governance Committee recommends to provide to Full Board as an informational item under Governance Committee on agenda.

Jim Hook departed the meeting at 2:30 p.m.

7.5. Governance Committee Goals

Gayle McAmis departed the meeting at 2:52 p.m.

Ted Owens joined the meeting at 2:52 p.m.

Governance Committee reviewed their 2015 committee goals and provided updates to the dashboard.

7.6. Policy Review Update

Committee received an update on remaining policies to be reviewed. ABD-14, ABD-17 and ABD-19 need additional work with legal counsel.

Governance Committee would like policies that still need work to be changed in the interim for approval in January. Policies can be changed again when they are ready.

7.7. Board of Directors Retreat Update

Committee received an update from Ted Owens, Director of Governance, on Board of Directors Retreat scheduled for February 2016.

Retreat dates are February 1-2, 2016 at Cedar House Sport Hotel. Next step is to meet with CEO to design retreat agenda.

Compliance presentation will be added to agenda.

7.8. Board Meeting at North Tahoe Location

Committee received an update from Mr. Owens on a future Board Meeting to be held at an alternative North Lake Tahoe location.

Mr. Owens will circle back with TTUSD regarding a North Lake Tahoe location after January 1, 2016.

Clerk of the Board was directed to send out a reminder that the Board Meeting is in Eskridge Conference Room.

7.9. BoardEffect Web Portal

Committee received an update on the upgrade to the Board of Directors web portal.

The upgrade to BoardEffect was completed on Monday, December 14, 2015. The look of BoardEffect's website has been streamlined. BoardEffect app users will not see a difference until the app upgrade is rolled out sometime before the end of the year.

8. REVIEW FOLLOW UP ITEMS / BOARD MEETING RECOMMENDATIONS

-Discussion of how to provide feedback of compliance program.

9. NEXT MEETING DATE

The next Governance Committee Meeting is tentatively set for January 20, 2016 at 12:00 p.m.

10. ADJOURN

Meeting adjourned at 3:25 p.m.



Board Executive Summary

By: Jim Hook
Compliance Consultant
The Fox Group, LLC

DATE: January 11, 2016

ISSUE: 2016 Corporate Compliance Program Annual Work Plan

This document summarizes and schedules the components of the 2016 Corporate Compliance Annual Work Plan for TFHD. It outlines the objectives identified for focus in 2016 related to the elements of an effective compliance program, and references objectives identified in the **2016 OIG Work Plan** and risk areas identified by Tahoe Forest Health District.

BACKGROUND:

The Affordable Care Act of 2010 contained provisions requiring all providers or suppliers of health care services to enrollees of Medicare/Medicaid/CHIP programs to establish a compliance program. Skilled Nursing Facilities were required to establish programs by March 23, 2013, although regulations implementing the requirements for SNFs and other providers have never been issued by CMS. It is expected that the requirements for “core elements” of compliance plans will be similar, if not identical, to the guidance the OIG has issued in past years for compliance programs in various entities. These elements will almost certainly require Corporate Compliance Programs to monitor and address areas of risk of unlawful or unethical conduct in the business activities of the organization.

Policy AGOV-31 describes the Corporate Compliance Program of TFHD including specific risk areas.

1) Billing for items or services not actually rendered	2) Billing for discharge in lieu of transfer
3) Upcoding	4) Patients' freedom of choice
5) DRG Creep	6) Credit balances - failure to refund
7) Outpatient services rendered in connection with inpatient stays	8) Incentives that violate the anti-kickback statute or other similar federal or state statute or regulation
9) Duplicate billing	10) Joint Ventures
11) False Cost Reports	12) Financial arrangements between Health System and Health System-based physicians
13) Unbundling	14) Stark physician self-referral law

15)Patient dumping	16)Knowing failure to provide covered services or necessary care to members of a health maintenance organization
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ASSESSMENT

The 2016 Corporate Compliance Program Annual Work Plan describes the monitoring and auditing activities TFHD will undertake in 2016 in support of the Corporate Compliance Program at TFHD. The 2016 Corporate Compliance Program Annual Work Plan incorporates specific audits referenced in the 2016 Office of Inspector General (OIG) Work Plan for FY 2016. A copy of the portions of the OIG Work Plan for 2016 related to hospitals, nursing homes, hospices and home health services was previously made available to the Board of Directors for information.

The 2016 Corporate Compliance Program for TFHD has been approved by the Corporate Compliance Committee.

ACTION REQUESTED:

Approve the 2016 Corporate Compliance Program Annual Work Plan for TFHD.

Alternatives:

Request alternatives to the activities in the attached draft Annual Work Plan

**TAHOE FOREST HOSPITAL SYSTEM
CORPORATE COMPLIANCE PROGRAM
2016 TFHS WORK PLAN**

Tahoe Forest Hospital System is committed to full compliance with all applicable laws, rules and regulations, and to conduct itself with the highest level of business and community ethics and standards.

Objectives identified for focus in the current year relate to the elements of an effective compliance program as defined in the Federal Sentencing Guidelines, items identified in the OIG’s 2016 Work Plan, and risk areas identified by the Tahoe Forest Health System.

OBJECTIVE / ACTION	Assigned To	GOAL	ACTION COMPLETION TARGET				STATUS
			1 ST Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	
1. Policies & Procedures							
A. Identify, review and revise P&Ps related to Compliance 1. Code of Conduct/ Non-Retaliation policy 2. Refunds to Medicare within 60 days 3. Others	CHR/CFO/CC O	Policy approval	X				
2. High Level Oversight							
A. Corporate Compliance Officer provides annual compliance reports to the Governance Committee of the Board of Directors. Report forwarded to the Board. B. Board Evaluation of District Compliance Program	CEO/CCO	Annual report to Board/Evaluation of Compliance Program	X				
3. Education, Training, & Communication							
A. Education and Training to the Code of Conduct	CHR		X				
B. Review and revise employee orientation regarding the compliance program	CHR			X			
C. Review and revise Health Stream training content related to compliance and HIPAA	CHR			X			

**TAHOE FOREST HOSPITAL SYSTEM
CORPORATE COMPLIANCE PROGRAM
2016 TFHS WORK PLAN**

			ACTION COMPLETION TARGET				STATUS
OBJECTIVE / ACTION	Assigned To	GOAL	1 ST Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	
D. BOD compliance training program	CCO	Annual training at Board of Directors Retreat.	X				
E. Directors /Managers compliance training program	CCO		X				
F. Medical staff compliance orientation and compliance training	CEO			X			
G. Bi-monthly communication to staff using the pacesetter	CCO		X	X	X	X	
H. Quarterly communication to physician using the Medical Staff news letter	CCO		X	X	X	X	
4. Monitor and Audit		Audit and Monitoring Source					
		Internal Audit	External Audit	1ST Qtr	2nd Qtr	3rd Qtr	4th Qtr
A. Hospital: Patient admission Criteria/appropriate patient status (2 midnight rule) (OIG WP)	CNO	X				X	
B. Hospital: Patient inpatient admission Criteria Certification (CAHS Guidance from CMS)	CNO	X					X
C. Hospital: Physician credentialing	CEO		X				X
D. Audit Skilled Nursing Facility Admission/Continued Stay Certification and documentation requirements (OIG WP)	CNO	X				X	
E. Review billing for NPs and PAs for incident-to billing compliance.	CFO	X			X		

**TAHOE FOREST HOSPITAL SYSTEM
CORPORATE COMPLIANCE PROGRAM
2016 TFHS WORK PLAN**

			ACTION COMPLETION TARGET				STATUS
OBJECTIVE / ACTION	Assigned To	GOAL	1 ST Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	
4. Monitor and Audit (con't)		Audit and Monitoring Source					
		Internal Audit	External Audit	1ST Qtr	2nd Qtr	3rd Qtr	4th Qtr
F. Physician payment audit (Medical Director/Preceptor, MSC physicians, ED on call, Hospitalist)	CFO/CCO	X		X	X	X	X
G. Home Health documentation for PPS (OIG)	CNO	X				X	
H. Medical record documentation and CPT coding for prolonged E&M services.	CFO		X		X		
I. External Audit for Coding for ICD 10	CFO		X		X		X
J. Annual Compliance Health Stream training (100% staff complete annual system-wide compliance training in Health Stream)	CHR	X					Ongoing
K. Annual MSC E/M billing and medical records audit	CFO		X				
5. Response, Investigation, Corrective Action, Reporting							
A. Respond, investigate, and follow up all Hotline calls / complaints within 30 days.	CCO	100% within 30 days					Ongoing
B. HIPAA 2015 annual report of unauthorized disclosures to HHS	CFO	Timely Submission		X			Completed
6. Enforcement and Discipline							
A. Enforce Exclusion policy for employees, medical staff and vendors	CHR/CCO	100%					Ongoing

**TAHOE FOREST HOSPITAL SYSTEM
CORPORATE COMPLIANCE PROGRAM
2016 TFHS WORK PLAN**

OBJECTIVE / ACTION	Assigned To	GOAL	ACTION COMPLETION TARGET				STATUS
			1 ST Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	
7. Responding Promptly to Detected Offenses and Undertaking Corrective Action							
A. Respond, investigate, and report to State and Federal authorities for HIPAA and other Compliance issues	CCO/CFO	100% timely completion					Ongoing

DRAFT

7.4 Contracts

Contracts redacted.

Available for public viewing via a Public Records request.