

**UTMB Office of Institutional Compliance Departmental Policy**

Section C Subject C.S	Compliance Structure	Inst. Compliance-Author
<b>Policy C.S.1</b>	<b>Institutional Compliance Officer</b>	

## **Institutional Compliance Officer**

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### **Audience**

All UTMB employees.

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### **Purpose**

The purpose of this policy is to establish the position of the Institutional Compliance Officer (ICO), describe the place in the organizational structure of the institution, and the responsibilities of the ICO.

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### **Policy**

The ICO is appointed by the President of the institution. The ICO is responsible for developing a risk-based process that builds compliance consciousness into daily business processes, monitoring the effectiveness of those processes, and communicating instances of non-compliance to the Institutional Compliance Committee (ICC) for corrective, restorative, and/or disciplinary action. Moreover, the ICO is responsible for the plan, design, implementation, and maintenance of the institution's compliance program and policies related to all compliance areas. The ICO must be in a position to influence behavior and organization practices.

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### **Reporting Structure**

The ICO for The University of Texas Medical Branch reports directly to the President.

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### **Duties and Responsibilities**

The responsibilities of the ICO include the following:

Compliance Standards and Procedures:

- establish policies and procedures to help ensure UTMB's compliance with all state and federal laws and regulations, such as Affirmative Action, Americans with Disabilities Act, Medicare and Medicaid, and federal grants and contracts, etc.;
  - distribute the Code of Conduct and oversee related training;
  - develop and implement guidelines and procedures for monitoring of current departmental billing activities to
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promote compliance with applicable laws and regulations.

Organizational Leadership

- maintain current knowledge of laws and regulations, keeping abreast of recent changes that may affect the institution's policies, procedures and processes through personal research, seminars, peer contact, and bench-marking compliance monitoring practices and implementation strategies with other institutions;
- provide advice and direction to executive and senior management, staff, and employees to facilitate compliance with statutory, regulatory, and case law requirements;
- ensure no retaliation for good faith reporting;
- ensure employee evaluations include an ethics and compliance component;
- authorized to report to the UTMB President or the Chancellor of the UT System at any time;
- make periodic reports regarding compliance matters directly to the ICC.

Employee Screening

- ensure that the institution has a policy and procedure for regularly verifying that ineligible employees are not hired or retained by UTMB;
- ensure that the institution has a policy and procedure for regularly verifying that ineligible vendors, contractors, and agents are not utilized or paid by UTMB.

Training and Education

- develop an institutional compliance training program that includes general compliance training for all employees and

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specialized compliance training for specific employees;

- develop an institutional education program that educates staff of proper billing procedures, medical record documentation, and the importance of compliance (compliance awareness).

**Internal Monitoring and Review**

- develop guidelines and procedures for compliance monitoring in accordance with state and federal requirements;
- responsible for monitoring the day-to-day compliance activities of UTMB; specifically including professional fee billing, and HIPAA activities;
- develop, coordinate, and/or oversee internal and external audit procedures for the purpose of monitoring and detecting any misconduct or noncompliance. If any misconduct or noncompliance is detected, recommend a solution, and follow up to ensure that the recommendations have been implemented;
- reports to the President area that are out of compliance.

**Discipline and Incentives**

- works with ICC to develop appropriate compliance incentives for all employees;
- works with the ICC and/or management to ensure that appropriate consistent disciplinary action is taken regarding compliance violations.

**Response and Prevention (Corrective Action)**

- investigate and respond to all complaints and/or reports received regarding suspected non-compliance;
  - investigations may be performed in cooperation with other offices or departments within the institution as deemed
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appropriate by the ICO;

- participate in any external audit review process, resolve compliance issues, and respond to legal or administrative inquiries related to compliance issues or audits;
- responsible for any reporting activities related to any compliance related settlement agreement or Institutional Compliance Agreement;
- in conjunction with Legal Affairs, interface and, when appropriate, negotiate with external regulatory agencies.

Risk Assessment

- ensure that a compliance risk assessment is completed by the institution annually and that appropriate processes are implemented to control or manage the identified risks.

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**References**

The Health Care Compliance Professional's Manual, Commerce Clearing House, 2006  
U. T. System Guidance  
Office of Inspector General Compliance Guidance for Hospitals.

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