

COMPLIANCE AND BUSINESS INTEGRITY (CBI) PROGRAM ADMINISTRATION

1. **REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook provides procedures for the implementation of a Compliance and Business Integrity (CBI) Program.
2. **SUMMARY OF MAJOR CHANGES.** This is a new VHA Handbook outlining the processes for the CBI Program.
3. **RELATED DIRECTIVE.** VHA Directive 1030.
4. **RESPONSIBLE OFFICE.** The Compliance and Business Integrity Office is responsible for the contents of this Handbook. Questions may be referred to (202) 501-1831.
5. **RESCISSIONS.** None.
6. **RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before July 31, 2011.

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DISTRIBUTION: CO: E-mailed 8/2/06
FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mailed 8/2/06

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COMPLIANCE AND BUSINESS INTEGRITY (CBI) PROGRAM ADMINISTRATION

1. PURPOSE

This Veterans Health Administration (VHA) Handbook establishes procedures for the implementation of a Compliance and Business Integrity (CBI) Program at Department of Veterans Affairs (VA) Central Office, Veterans Integrated Service Networks (VISNs), Veterans Affairs Medical Centers, and operational units which consolidate business functions for more than one VISN, such as the Chief Business Office's (CBO) Consolidated Patient Account Center (CPAC).

2. BACKGROUND

a. **Changes in VHA Business Practices.** Prior to the 1990s, VHA was funded almost entirely by Congressional appropriations. During that decade, VHA received authority to recover the cost of care from most third-party health benefit plans, but not Medicare or Medicaid. VHA also received authority to recover the cost of care from certain veterans by co-payments for medical services and medications. VHA is not authorized to recover the cost of care which is solely related to service-connected illnesses or disabilities. The Veterans Millennium Health Care and Benefits Act of 1999 provided additional authority for VHA to purchase health care services from non-VA sources. VHA is responsible for processing claims for benefits from a wide variety of vendors with which it does not have formal business relationships.

b. **Changes in VHA Business Challenges.** These changes to VHA's business practices resulted in new challenges for VHA's business operations and health information practices. Many of these challenges have been addressed through restructuring and consolidating VHA's business and health information operations, adopting industry-standard practices, and focusing on performance metrics. VHA has identified opportunities for improvement in areas related to health care commerce, such as: timely and accurate identification of third-party health benefit coverage, adequacy of clinical documentation to support administrative and billing activities, accuracy of medical coding, billing accuracy, and business data integrity.

c. **High Standards of Business Integrity.** VHA has an expectation that its business operations will be known in government and in industry as consistently complying with its business practice standards and for achieving the highest levels of business integrity. The Under Secretary for Health established a formal compliance program for VHA in September 1999. This program has been instituted at all levels of VHA as a CBI Program.

d. **Significance of Business Transactions to VHA Financial and Management Reporting.** The operations of the VHA CBO and field business units generate transactions which are combined into material for VHA financial reporting. Revenues generated by first- and third-party billing activity comprise nearly 10 percent of the resources available for VHA operations. Payments to non-VA sources of health care are equivalent to nearly 15 percent of health care expenditures. It is essential that these transactions occur in operational environments which reliably and accurately initiate, authorize, record, process, and report transactional data to

ensure that management is able to prevent or detect errors in transactions, financial statements, and other significant management reports.

e. VHA officials reviewing and ensuring compliance with laws and regulations that govern VHA business activities must consult with attorneys in the Office of General Counsel to ensure that all applicable laws and regulations are considered.

3. DEFINITIONS

a. **Business Integrity.** Business integrity is more than just technical or minimal compliance with the laws and regulations which apply to a business activity or health information practice. It means actions which not just comply fully with the letter of a particular law or rule, but in addition can be characterized as the actions of an organization as above-board, ethical, and without the intent or effect of being false or misleading.

b. **Compliance.** Compliance is actual and meaningful adherence to the requirements of any law, regulation, or standard applicable to the business activity or health information practice in question.

c. **Control Deficiencies.** Control deficiencies exist when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect on a timely basis a non-compliant business activity or health information practice, or activity not consistent with business integrity.

d. **Design Deficiencies.** Design deficiencies exist when a control necessary to meet the control objective is missing or is not properly designed, so that even if the control operates as designed the control objective is not always met.

e. **Effective Control Environment.** An effective control environment means that systems and procedures are reasonably sufficient to prevent non-compliant business activity, health information practice, and activity not consistent with business integrity from occurring in the first instance; promptly detecting such activity when it occurs; and promptly and effectively correcting both the causes and effects of such activity.

f. **Health Information Practice.** Health information practice is the administrative management of VHA clinical health records as set forth in VHA Handbook 1907.1; it includes clinical coding.

g. **Internal Controls.** Internal controls are an integral component of management which provides reasonable assurance that the following objectives are being achieved:

- (1) Effectiveness and efficiency of operations;
- (2) Reliability of transactions affecting financial reporting and of the reports which result; and
- (3) Compliance with applicable laws and regulations.

h. **Knowing, Knowingly, and Knowledge.** Knowing, knowingly, and knowledge are words which mean actual knowledge. They also mean information which, in the exercise of reasonable diligence, should have been known.

i. **Material Weakness.** Material weakness is a reportable condition, or combination of reportable conditions, that result in more than a remote likelihood that a material misstatement of the financial statements, or other significant financial or management reports, will not be prevented or detected.

j. **Operational Deficiencies.** Operational deficiencies exist when a properly-designed control does not operate as designed or when the person performing the control is not qualified, or properly skilled, to perform the control effectively.

k. **Reasonable Expectations of Business Partners.** Reasonable expectations of business partners are expectations which are established by law, regulation, contract, industry standard, or course of dealing. *NOTE: A failure to incorporate and follow applicable industry practice, or the standards called for by any applicable governmental regulation, weighs against a finding of achieving compliance and business integrity.*

l. **Reportable Condition.** A reportable condition is a control deficiency, or combination of control deficiencies, which adversely affects VHA's ability to reliably initiate, authorize, record, process, or report financial data or transactions which affect financial data, so that there is more than a remote likelihood that non-consequential misstatements on financial statements, or other significant financial reports, will not be prevented or detected.

4. SCOPE

a. CBI Programs must be operated at all levels of the organization according to the provisions of this Handbook. The scope of the CBI Program is oversight of VHA business operations and health information practices.

b. The scope of the CBI Program does not include oversight of:

(1) Clinical aspects of care and matters related to the clinical quality of that care. *NOTE: The Office of Quality and Performance, the Office of Patient Safety, the Medical Inspector, the Office of Patient Care Services, the Office of Nursing, the Office of Clinical Logistics, and the National Center for Ethics in Health Care have primary program and oversight accountability for this function.*

(2) The clinical and educational aspects of graduate medical education and training of clinical professionals. *NOTE: The Office of Academic Affiliations has primary program and oversight accountability for this function.*

(3) The clinical aspects of human subject research. *NOTE: The Office of Research and Development has primary program accountability and as to which the Office of Research Oversight has oversight responsibility for this function.*

NOTE: It is recognized that in each of the preceding areas, there will be overlap between the management of these areas and the business operations and health information practices which result. In these instances of overlap, leadership of clinical, education, research, and CBI program offices must coordinate their activities to meet individual program office needs and to compliment each others' programs.

5. RESPONSIBILITIES OF THE UNDER SECRETARY FOR HEALTH

The Under Secretary for Health is responsible for:

- a. Encouraging an organizational culture which promotes: compliance with the laws, regulations and standards which govern VHA's business operations and health information practices; the reasonable expectations of VHA's business partners; and the highest standards of business integrity.
- b. Implementing standards of conduct and internal controls that are reasonably capable of preventing, detecting, and correcting non-compliant business practices or health information practices or activity not consistent with business integrity.
- c. Integrating compliance and business integrity into the fabric of operations.
- d. Establishing a national Compliance Advisory Board (CAB).
- e. Appointing a Chief Officer for CBI to provide oversight and direction to VHA's system-wide CBI Program.

6. RESPONSIBILITIES OF THE CHIEF CBI OFFICER

The Chief CBI Officer is responsible for:

- a. Reporting to the VHA Chief of Staff and providing periodic reports to the National Leadership Board.
- b. Receiving operational advice from VHA's CAB.
- c. Providing oversight and direction to VHA's system-wide CBI Program.
- d. Describing the CBI mission, objectives, and scope.
- e. Appointing and supervising CBI Officers accountable for CBI activities at any CPAC.
- f. Conducting a formal system-wide risk assessment process whereby the CBI risks to VHA are identified, and to the extent appropriate, quantified, and prioritized.
- g. Evaluating and assessing policies, procedures, systems and control environments established by the VHA CBO, the Health Informatics and Data Program, VISNs, and VA medical center business and health information operational units. This determines whether

effective operational control environments have been established and maintained, and whether VHA's business operations and health information practices comply with the laws, regulations, and standards which apply and the reasonable expectations of business partners. These evaluations must be conducted by a variety of methods, which must include at least:

(1) A review of policies and procedures against laws, regulations, VA and VHA policy documents, as well as the industry standards and other sources of expectations of business partners;

(2) A review of systems and control environments against standards and recommended practices, as established by Office of Management and Budget (OMB) Circular A-123 and related documents;

(3) Audits which measure accuracy and quality of business and health information output and management reports;

(4) Evaluations of organizational responses to detected errors and deficiencies; and

(5) An assessment of incentives and disincentives related to business operations and health information practices.

h. Conducting fact finding and reviews of CBI issues which have or may occur in VHA business operations and health information practices at any level of the organization, and making referrals and recommendations based on the results of such fact finding and reviews.

i. Reviewing business and health information quality measures to assess whether they are valid as measurement tools and properly deployed so as to provide credible information on which decisions can be based.

j. Developing, testing, and arranging for the deployment of new or replacement quality measures as needed.

k. Implementing educational and other training initiatives to enhance and sustain the skills required of CBI Officers, and collaborating with other program offices in the development and implementation of educational and other training initiatives necessary to ensure that organizational CBI standards are effectively communicated and that employees responsible for meeting such standards have the skill sets and knowledge to effectively do so.

l. Implementing and maintaining systems, including mechanisms that allow for anonymity or confidentiality, whereby VHA's employees and agents may report or seek guidance regarding potential or actual activity not consistent with CBI standards, without fear of retaliation.

m. Implementing and maintaining systems by which the VISNs, VA Medical Centers, and other operational units routinely and promptly report CBI issues and exceptions.

n. Monitoring reports received to identify significant CBI issues or trends.

o. Implementing and maintaining systems to evaluate and assess the effectiveness of compliance programs operated by organizations with which VHA does business as a partner or otherwise.

p. Evaluating and assessing the effectiveness of VHA's national CBI Program, the CBI Programs at VISNs and VA Medical Centers, and the activity conducted in furtherance of these programs.

q. Advising, based on the activities of the CBI Program, the Under Secretary of Health, the Chief of Staff, and the CAB whether VHA's business operations and health information practices are being conducted:

(1) Within effective operational control environments; and

(2) In continuing compliance with the laws, regulations and standards which govern those activities, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.

7. FUNCTIONS OF THE NATIONAL COMPLIANCE ADVISORY BOARD (CAB)

The CAB functions as follows:

a. The CAB serves in a threefold advisory role, to:

(1) The Chief Compliance and Business Integrity Officer chiefly as it relates to the operation of the program.

(2) The Executive Committee of the National Leadership Board chiefly as it relates to the effectiveness of the program.

(3) The Office of the Under Secretary for Health through the Chief of Staff as it relates to the governance of the program.

b. Specific CAB responsibilities and authorities include:

(1) Advising and supporting the Chief CBI Officer in:

(a) Achieving the role and mission of the CBI Program.

(b) The system-wide risk assessment process, and in the review and analysis, and in the responses to identified risk.

(c) Program support to field units in order to identify, correct, and prevent violations of CBI standards.

(d) Review of business quality measures to assess whether they are valid as measurement tools and properly deployed to provide credible information on which decisions can be based

(e) The closure of any issues reported which, because of their scope or complexity, defy normal protocols for closure.

(f) Preparing annual reports regarding the CBI Program to the Under Secretary for Health and the National Leadership Board.

(2) Advising and supporting the Chief CBI Officer, the CBO, the Office of Information (OI) Health Data and Informatics Program, and any other VHA operational elements which are responsible for business operations or health information practices, in:

(a) Establishing specific policies and procedures to implement and sustain an effective operational control environment in all VHA business and health information activities, so that design, control, and operational deficiencies do not exist, and that reportable and material weaknesses in business operations are minimized or eliminated.

(b) Effective communication of compliance and business integrity standards and expectations to all employees of the health system.

(3) Advising the Chief CBI Officer on:

(a) Business and strategic plans, and

(b) The resources dedicated to the CBI Program and assessing their adequacy at all levels.

(4) Developing, testing, and arranging for the deployment of new or replacement business quality measures as needed.

(5) Reviewing and advising the Chief Compliance and Business Integrity Officer on directives, policies, and memorandum that pertain to the CBI Program functions.

(6) Receiving and reviewing quarterly reports from the Chief Compliance and Business Integrity Officer on program implementation issues, operational issues at all levels, and instances or patterns of business activity which is not consistent with VHA's standards of compliance and business integrity.

c. **Membership.** The membership of the CAB consists of permanent members, and rotating members, and ex-officio members.

(1) **Permanent Members.** Permanent Members consist of the following:

(a) Assistant Deputy Under Secretary for Health for Operations and Management, or designee, (10N).

(b) Three VISN Directors (includes the Chairperson).

(c) Chief Officer, Quality and Performance (10Q).

- (d) Chief Patient Care Services Officer (11).
- (e) Chief Financial Officer (17).
- (f) Labor Organization Representative.
- (g) Chief Business Officer (16).
- (h) Chief, Health Data and Informatics, Office of Information (19F).
- (i) Chief of Staff (10B).
- (j) General Counsel (02).
- (k) Chief CBI Officer (10B3), who serves as Vice-chairperson.
- (l) Chief Officer, Policy and Planning (105).
- (m) Chief, Clinical Logistics and Prosthetics Officer (10F).

(2) **Rotating Members.** Each rotating member serves a 2-year term. At the end of each fiscal year, half of the rotating members are to be replaced through appointment by the VHA Chief of Staff. Rotating members consist of a:

- (a) Medical Center Director;
- (b) VISN Compliance Officer;
- (c) Medical Center CBI Officer; and
- (d) VISN Clinical Manager.

8. RESPONSIBILITIES OF THE CHIEF FINANCIAL OFFICER

The Chief Financial Officer (CFO) is responsible for:

a. Collaborating with the CBI, CBO, and the Director, Health Informatics and Data Program to design, implement, monitor, and assess the effectiveness of internal controls relating to transactions which affect financial statement and management reporting accuracy.

b. Implementing educational and other training initiatives necessary to ensure that organizational compliance and business integrity standards are effectively communicated to VA Central Office and field financial operations employees responsible for meeting those standards, and that financial operations employees have the skill sets and knowledge to effectively do so.

9. RESPONSIBILITIES OF THE CHIEF BUSINESS OFFICE

The CBO is responsible for:

a. Collaborating with the CBI Officer, CFO, and the Director, Health Informatics and Data Program, to establish specific policies and procedures to implement and sustain an effective control environment in all VHA business operations, so that design, control, and operational deficiencies do not exist and reportable and material weaknesses in business operations are minimized or eliminated.

b. Ensuring that all VHA business operations are being conducted in continuing compliance with the laws, regulations, and standards which govern those business operations, the reasonable expectations of VHA's business partners, and the highest standards of business integrity. This must include at least:

(1) The implementation of systems, developed in collaboration with the CBI Officer and CFO, to routinely and effectively monitor the accuracy and quality of business output. **NOTE:** *Monitoring systems can be considered effective if the data which results is sufficient to promptly identify the quality and accuracy of business output and any deficiencies in that output, and if monitoring data is confirmed via periodic audits conducted by CBI.*

(2) The prompt, thorough, and effective investigation of the causes for and effects of deficiencies in the accuracy or quality of business output, regardless of whether those deficiencies are identified by: internal monitoring and/or audits by CBI or others; claims payment or denial activity by veterans and third-party benefit plans; reports from the Office of Inspector General on matters pertaining to business activities; or other sources. **NOTE:** *Investigations and development of corrective action are expected to occur with a high degree of transparency. The prompt and candid self-reporting of deficiencies and corrective action to CBI Officers and to leadership is essential.*

(3) The prompt, thorough, and effective correction of both the causes and effects of deficiencies in the accuracy or quality of business output. **NOTE:** *Corrective action can be considered effective if the same or similar deficiencies do not recur.*

c. Collaborating with CBI Officer and other program offices to ensure that:

(1) The organization's incentive systems for business-related activity are designed to, and have the effect of, rewarding not just the quantity, but also the quality of business activity.

(2) All data regarding business and business-related activity is promptly and readily accessible.

d. Implementing educational and other training initiatives necessary to ensure that:

(1) Organizational compliance and business integrity standards are effectively communicated to VA Central Office;

(2) Facility business operations employees are responsible for meeting those standards; and

(3) Business operations employees have the skill sets and knowledge to effectively meet those standards.

10. RESPONSIBILITIES OF THE CHIEF, HEALTH DATA AND INFORMATICS, OFFICE OF INFORMATION (OI)

The Chief Health Data and Informatics is responsible for:

a. Collaborating with CBI Officer, CBO, and CFO to establish specific policies and procedures to implement and sustain an effective control environment in all health information practices, so that design, control, and operational deficiencies do not exist, and that reportable and material weaknesses in those practices are minimized or eliminated.

b. Ensuring that all VHA health information practices are being conducted in continuing compliance with the laws, regulations, and standards which govern those practices, the reasonable expectations of VHA's business partners, and the highest standards of business integrity. This must include at least:

(1) The implementation of systems, developed in collaboration with the CBI, to routinely and effectively monitor the accuracy and quality of health information output. **NOTE:** *Monitoring systems can be considered effective if the data which results is sufficient to promptly identify the quality and accuracy of business output and any deficiencies in that output, and if monitoring data is confirmed by periodic audits conducted by CBI.*

(2) The prompt, thorough, and effective investigation of the causes for and effects of deficiencies in the accuracy or quality of health information output, regardless of whether those deficiencies are identified via internal monitoring, audits by CBI or others, claims payment or denial activity by third-party benefit plans, reports from the Office of Inspector General on matters pertaining to health information and clinical coding activities, or other sources. **NOTE:** *Investigations and development of corrective action are expected to occur with a high degree of transparency. The prompt and candid self-reporting of deficiencies and corrective action to CBI Officers and to leadership is essential.*

(3) The prompt, thorough, and effective correction of both the causes and effects of deficiencies in the accuracy or quality of health information output. **NOTE:** *Corrective action can be considered effective if the same or similar deficiencies do not recur.*

c. Collaborating with the CBI Officer to ensure that the organization's incentive systems for health information practices are designed to, and have the effect of, rewarding not just the quantity, but also the quality of that activity.

d. Collaborating with the CBI Officer and other program offices to ensure that all data regarding health information and clinical coding practices is promptly and readily accessible.

e. Implementing educational and other training initiatives necessary to ensure that:

(1) Organizational compliance and business integrity standards are effectively communicated to VA Central Office and field employees responsible for meeting health information standards, and

(2) Health information employees have the skill sets and knowledge to effectively meet the health information standards.

11. RESPONSIBILITIES OF THE VISN DIRECTOR

The VISN Director, or designee, is responsible for:

a. Being knowledgeable about the content and operation of the CBI Program; and ensuring that all business operations and health information practices are being conducted in continuing compliance with the laws, regulations and standards which govern those activities, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.

b. Exercising reasonable oversight of the implementation of the program to ensure that it is effective by:

(1) Assigning primary responsibility for achieving compliance and business integrity goals to the operational units which engage in business operations and health information practices.

(a) Leadership must reward operational management by appropriate incentives when CBI goals are achieved. *NOTE: Any incentive systems for business operations, health information practices and coding-related activity are designed to and have the effect of rewarding not just the quantity but also the quality of business activity.*

(b) Appropriate disciplinary measures must be taken when CBI goals are not achieved or when operational management fails to take reasonable steps to prevent or detect behavior which is noncompliant or not consistent with high standards of business integrity.

(2) Designating and directly supervising a VISN CBI Officer, who will perform or supervise the day-to-day operational functions of the CBI Program.

(3) Providing adequate resources and appropriate authority to the CBI Officer to carry out operational responsibilities to include access to all documents or information necessary to conduct CBI activities, regardless of whether that information is confidential or non-disclosable to the public or VHA employees generally. *NOTE: CBI Officers who receive confidential or other non-disclosable information in the course of their work have the same privacy and confidentiality requirements as any other VHA employee.*

(4) Implementing the standards, policies, procedures, and internal controls developed by the CBI, CBO, and the Health Informatics and Data Program Office in the business operations and health information practices so that design, control, and operational deficiencies do not exist in

business operations and health information practices, and that reportable and material weaknesses in those programs are minimized or eliminated.

- c. Establishing a VISN-level CAB.

12. RESPONSIBILITIES OF THE VISN CBI OFFICER

The VISN CBI Officer is responsible for:

- a. Ensuring effectiveness and consistency in the CBI effort within the VISN and alignment of the VISN CBI Program with the VA Central Office CBI Program;
- b. Reporting directly to the VISN Director on matters pertaining to the compliance of VHA business operations and health information practices with the laws, regulations and standards which govern those activities, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.
- c. Advising the VISN Director and the VHA Chief CBI Officer whether the VISN's business operations and health information and clinical coding practices:
 - (1) Are being conducted within an effective control environment; and
 - (2) Are being conducted in continuing compliance with the laws, regulations and standards which govern those business operations and health information practices, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.
- d. Receiving operational guidance from an interdisciplinary, VISN-level CAB; and
- e. Providing a report, at least annually, to the VHA Chief CBI Officer.

13. RESPONSIBILITIES OF THE MEDICAL CENTER DIRECTOR

VHA Medical Center Director, or designee, is responsible for ensuring the effectiveness of the facility CBI Program by:

- a. Being knowledgeable about the content and operation of the CBI program; and ensuring that all business operations and health information practices are being conducted in continuing compliance with the laws, regulations and standards which govern those activities, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.
- b. Exercising reasonable oversight of the implementation of the program to ensure that it is effective by:
 - (1) Assigning primary responsibility for achieving compliance and business integrity goals to the operational units which engage in business operations and health information practices.

(a) Leadership must reward operational management by appropriate incentives when CBI goals are achieved. **NOTE:** *Any incentive systems for business operations, health information practices and coding-related activity are designed to and have the effect of rewarding not just the quantity but also the quality of business activity.*

(b) Appropriate disciplinary measures must be taken when CBI goals are not achieved or when operational management fails to take reasonable steps to prevent or detect behavior which is noncompliant or not consistent with high standards of business integrity.

(2) Designating and directly supervising a VA Medical Center CBI Officer, who will perform or supervise the day-to-day operational functions of the CBI program.

(3) Providing adequate resources and appropriate authority to the CBI Officer to carry out operational responsibilities to include access to all documents or information necessary to conduct CBI activities, regardless of whether that information is confidential or non-disclosable to the public or VHA employees generally. **NOTE:** *CBI Officers who receive confidential or other non-disclosable information in the course of their work have the same privacy and confidentiality requirements as any other VHA employee.*

(4) Implementing the standards, policies, procedures, and internal controls developed by the CBI, CBO, and the Health Informatics and Data Program Office in the business operations and health information practices so that design, control, and operational deficiencies do not exist in business operations and health information practices, and that reportable and material weaknesses in those programs are minimized or eliminated.

c. Establishing a local Compliance Committee.

14. RESPONSIBILITIES OF THE FACILITY CBI OFFICER

The facility CBI Officer is responsible for:

a. Ensuring effectiveness and consistency in the CBI effort within the facility, and alignment of the local program with the VA Central Office CBI Program.

b. Reporting directly to the VA Medical Center Director on matters pertaining to the compliance of VHA business operations and health information practices with the laws, regulations and standards which govern those activities, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.

c. Advising the VA Medical Center Director, the VISN CBI Officer, and the Chief CBI Officer whether the facility's business operations, health information and clinical coding practices are being conducted:

(1) Within an effective control environment; and

(2) In continuing compliance with the laws, regulations and standards which govern those activities, the reasonable expectations of VHA's business partners, and the highest standards of business integrity.

d. Receiving operational guidance from an interdisciplinary facility-level Compliance Committee.

e. Providing a report, at least annually, to the Chief CBI Officer.

15. REFERENCES

a. Office of Management and Budget: Circular A-123, Management's Responsibility for Internal Control.

b. Office of Management and Budget: Memorandum M-03-13, Improper Payments Information Act of 2002, Public Law 107-300.

c. United States Sentencing Commission, Federal Sentencing Guidelines, Chapter 8, Part B, Section 2: "Effective Compliance and Ethics Program."
http://www.usc.gov/2004guid/8b2_1.htm.

d. Title 18 U.S.C. Section 1035: False Statements Relating to Health Care Matters.

e. Title 18 U.S.C. Section 1347: Health Care Fraud.

f. VA Directive 0700, and VA Handbook 0700, Administrative Investigations.

g. VHA Handbook 1400.1, Resident Supervision.

h. VHA Handbook 1907.1, Health Information Management and Health Records.

i. Department of Health and Human Services (HHS) Office of Inspector General (OIG) "Compliance Program Guidance for Hospital," 63 Federal Register (FR) FR 8987 (February 23, 1998).

j. HHS OIG "Supplemental Compliance Program Guidance for Hospitals," 70 FR 4858 (January 31, 2005).

k. HHS OIG "Small Group Physician Practices Guidance," 65 FR 59432 (October 5, 2000).

l. HHS OIG "Compliance Program Guidance for Third-Party Medical Billing Companies," 63 FR 70138 (December 18, 1998).

m. HHS OIG "Provider Self-Disclosure Protocol," 63 FR 58399 (October 30, 1998).