Inspired Compliance Seminar

Building an Effective Compliance Program

Carmen Geerlings
MBA, R.T.(R)(ARRT), CPCO, CRA, FAHRA

NOVEMBER 14, 2026 | VIRTUAL



BEFORE WE BEGIN

Disclosures

Presenter

Employed by Wake Radiology but presenting in a personal capacity. All views expressed are my own and do not necessarily reflect those of my employer.

Financial Interest

No financial relationships to disclose.

Commercial Support

Reference to any specific products, vendors, or services is for educational purposes only and does not constitute endorsement.

AI Usage

Generative AI was used to assist with research, drafting, editing, or image creation. All sources were verified and final content was reviewed for accuracy.

TODAY

Session Objectives

01

Start with the “Why”

Connect compliance to patient trust and risk.

02

Fit the Program

Adapt to resources, complexity and risk.

03

Review the Elements

Turn OIG guidance into workable processes.

04

Test What Works

Choose evidence and a next step.

AGENCY ABBREVIATIONS

Key Agencies and Regulatory Bodies

DOJ

Department of Justice

Enforces the False Claims Act and pursues civil and criminal health care fraud.

OIG

Office of Inspector General

HHS watchdog that issues compliance guidance and can exclude providers from federal programs.

OCR

Office for Civil Rights

Enforces HIPAA privacy, security, and breach notification rules.

CMS

Centers for Medicare & Medicaid Services

Runs Medicare and Medicaid and sets payment and coverage rules.

MAKING THE CASE

Why Compliance Matters



Patient Trust

Clear standards help protect patients and their information.



Resources

Accurate billing helps protect funds for patient care.



Early Signals

Staff concerns reveal problems that policies alone can miss.

BY THE NUMBERS: FY 2025

The Financial Stakes

$5.7B+

Health care False Claims Act settlements and judgments

$28.8B

Medicare fee-for-service estimated improper payments

$23.7B

Medicare Advantage estimated improper payments

Sources:

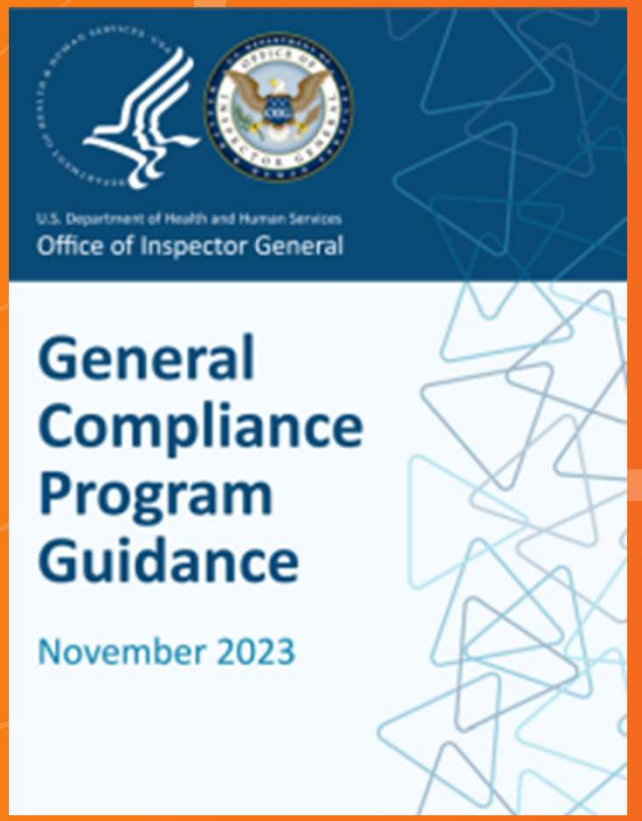
U.S. Department of Justice, False Claims Act Settlements and Judgments Exceed $6.8B in Fiscal Year 2025, January 16, 2026..
https://www.justice.gov/opa/pr/false-claims-act-settlements-and-judgments-exceed-68b-fiscal-year-2025

Health care subset corroborated by Healthcare Dive, January 21, 2026
https://www.healthcaredive.com/news/justice-department-recovered-record-57-billion-2025-healthcare-false-claims/810074/

CMS, Fiscal Year 2025 Improper Payments Fact Sheet, January 15, 2026.
https://www.cms.gov/newsroom/fact-sheets/fiscal-year-2025-improper-payments-fact-sheet

OIG Guidance

General Compliance Program Guidance
November 2023



Sources: HHS OIG, General Compliance Program Guidance (November 2023). https://oig.hhs.gov/compliance/general-compliance-program-guidance/ https://oig.hhs.gov/documents/compliance-guidance/1135/HHS-OIG-GCPG-2023.pdf

The GCPG is voluntary guidance that discusses general compliance risks and compliance programs. The GCPG is not binding on any individual or entity.

HHS OIG, General Compliance Program Guidance, User's Guide, 2023

PROGRAM DESIGN

Compliance Complexity

Organization size and structure shape the scope of compliance work.

01 Core Compliance Program

Compliance Program
Compliance Leadership & Oversight
Policies & Procedures
Auditing & Monitoring
Lines of Communication
Anonymous Reporting

02 Regulatory and Fraud & Abuse Laws

Stark Law
Physician Self-Referral Law
Anti-Kickback Statute
False Claims Act
Fraud, Waste & Abuse
21st Century Cures Act
No Surprises Act

03 HIPAA & Information Privacy

HIPAA
HITECH Act
Protecting PHI & ePHI
Security Rule
Administrative, Physical, and Technical Safeguards
Business Associates

04 Billing, Coding & Revenue Cycle

Billing & Revenue Cycle
Coding Accuracy
Medical Necessity
Medicare Guidelines
Credit Balances
CERT / TPE / RAC
Audits

05 Workforce & Organizational Compliance

Employees
Code of Conduct
Required Training
License Verification
LEIE Background Checks
Exit Interviews
Conflicts of Interest
OSHA

06 IT, Cybersecurity & Risk Management

IT Security
Encryption
Disaster Recovery
Penetration Testing
Vulnerability Testing
Security Risk Assessment
Password Management

PROGRAM DESIGN

Program Size and Complexity

- Match resources to complexity and risk.
- Small practice: a designated compliance contact.
- Larger group: coordinated oversight across sites.
- Service partner: clear reporting responsibilities.



All seven elements

Adapt how the program works while keeping accountability and follow-through.

Case Study: Tailoring Your Program

- **The setup:** a small to medium practice, where I reported directly to COO.
- **Hotline report:** an anonymous allegation of financial misconduct against two top executives, including the COO.
- **The plan anticipated it:** it defined escalation to a Professional Standards Committee and to hire an outside firm .
- **Larger organizations:** where compliance reports elsewhere, such as to a board committee, this conflict may not exist.
- **The lesson:** size, reporting structure, and how your plan is written determine what works for you.

SIZE MATTERS

The same concern calls for a different response depending on how your program is built.

Three things to tailor:

Organization size

Reporting structure

Compliance plan design

OIG's Seven Elements

A framework for building and improving a program

OIG'S SEVEN ELEMENTS

The framework at a glance

01
Written Policies and Procedures

Standards with clear owners and usable workflows.

02
Leadership and Oversight

Compliance leads; leaders own controls and fixes.

03
Training and Education

Role-based learning that improves decisions.

04
Effective Lines of Communication

Clear channels, follow-up and no retaliation.

05
Consequences and Incentives

Fair, consistent standards and accountability.

06
Risk, Auditing, and Monitoring

Find, test and track risk over time.

07
Response and Corrective Action

Fix the cause, then recheck.

ELEMENT 1

Written Policies and Procedures

- A code of conduct sets expectations.
- A policy defines the standard and owner.
- A workflow makes the standard usable.
- Reviews test whether staff follow it.



An operational test

Can staff show how they apply the policy to an actual claim or concern?

ELEMENT 2

Leadership and Oversight



Access and authority

Compliance should work independently but not in isolation. Independence is access, authority, and a path to action.

- Compliance leads and coordinates the program.
- Operations own controls and corrective actions.
- The board or owner oversees unresolved risk.
- Leaders provide authority and resources.

ELEMENT 3

Training and Education

Useful learning

- Use cases from the learner’s role
- Practice the actual workflow
- Check decisions after training

Warning signs

- Completion alone is defining success
- Repeat errors receive the same course
- Policy changes miss affected teams

ELEMENT 4

Effective Lines of Communication

- Staff can reach compliance through clear channels.
- An alternate route addresses conflicts.
- Policies prohibit retaliation.
- Each concern has an owner and follow-up.



Silence isn't success

Zero reports rarely means zero problems. It often signals fear, distrust, or unawareness.

ELEMENT 5

Consequences and Incentives

Credible standards

- Apply expectations consistently
- Recognize responsible behavior
- Protect good-faith reporting

Warning signs

- Exceptions for high performers
- Targets reward risky shortcuts
- Staff fear raising concerns

ELEMENT 6

Risk, Auditing, and Monitoring



Risk Review

Prioritize documentation, coding, billing and reporting risks.



Auditing

Set scope, criteria and a qualified reviewer. Record findings.

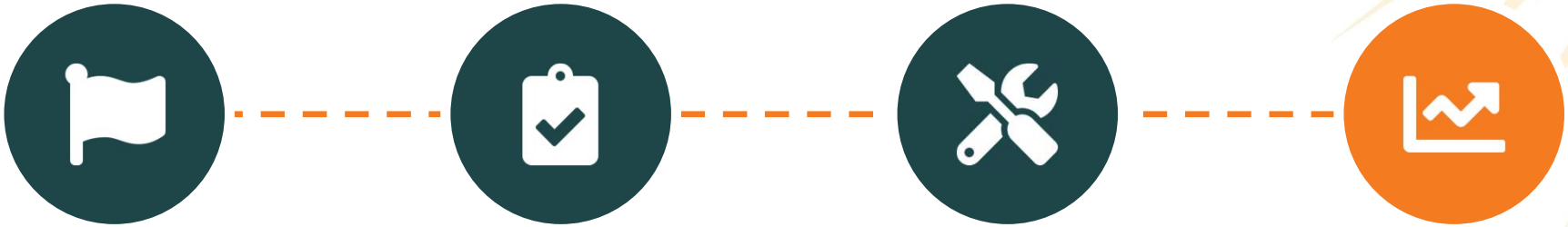


Monitoring

Track repeat errors, stalled actions and other warning signs.

ELEMENT 7

Response and Corrective Action



Assess

Triage the concern and preserve relevant facts.

Investigate

Use qualified reviewers to establish what happened.

Correct

Fix the cause and address applicable obligations.

Recheck

Test whether the change prevents recurrence.

Case Study: Privacy

You receive a report than an employee witnessed a coworker opening a neighbor's record out of curiosity. How do we address using an the seven elements of an effective compliance program?

Implementation

Measuring for Effectiveness

PROGRAM EFFECTIVENESS

Measures that support oversight

Knowledge versus repeated errors

Pair learning checks with error trends after training

Follow-up and overdue actions

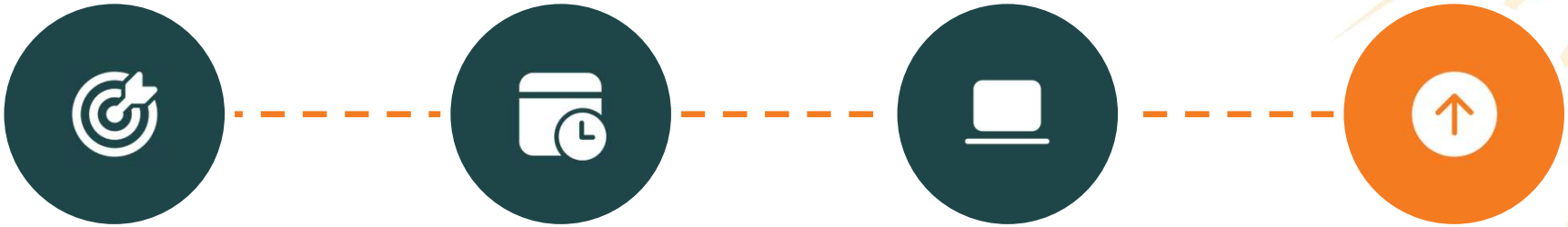
Track review timeliness, aging and stalled corrective actions

Retest results and unresolved risk

Show whether fixes last and where leaders need to act

IMPLEMENTATION WITH LIMITED RESOURCES

A manageable implementation plan



Prioritize

Choose a high-risk gap using available evidence.

Protect Time

Name an owner and secure time for the work.

Use Tools

Use existing systems to track actions securely.

Escalate

Show leaders the unresolved risk and decision needed.

KEY TAKEAWAYS

Effective Means It Works



Right-size it, don't skip it

All seven elements apply; adapt them to your size and structure.



Effective means it's used

Policies, training and hotlines count only when staff use them.



Measure results, not activity

Track outcomes, retest fixes, and bring unresolved risk to leaders.

Inspired Compliance Seminar

Questions

What could you apply in your role?