

Wednesday, June 11, 2025

11:00am - 1:00pm

The MetroHealth System Board Room K-107 or via YouTube Stream

Audit and Compliance Committee

Regular Meeting

AUDIT & COMPLIANCE COMMITTEE

DATE: Wednesday, June 11, 2025

TIME: 11:00am - 1:00pm

PLACE: MetroHealth Main Campus, Building K, Board Room (K107) or Virtual via

YouTube Stream https://www.youtube.com/@metrohealthCLE/streams

<u>AGENDA</u>

I. Approval of Minutes

Approval of Committee Meeting Minutes from March 26, 2025

II. Information Items

- A. Ethics & Compliance Update C. Briddell / S. Partington (5 min)
- B. Internal Audit Program Goals R. Barre / H. Oakes (Grant Thorton) (5 min)

III. Executive Session

Return to Open Meeting

IV. Recommendations / Approvals

A. Approval of the MetroHealth System Internal Audit Plan



AUDIT AND COMPLIANCE COMMITTEE

Wednesday, March 26, 2025 11:30 am – 1:00 pm MetroHealth Board Room K-107 and via Zoom

Meeting Minutes

Committee

Sharon Dumas-I, Artis Arnold-R, Dr. Adam Jacobs-R, John Moss-R

Members Present:

Other Trustees

John Corlett-I, Ronald Dziedzicki-I, Dolores (Lola) Garcia-R,

Present:

Michael Summers-I, E. Harry Walker, M.D.-I

Staff Present: Christine Alexander-Rager, M.D.-I, Robin Barre-I, Chris Briddell-I,

Nabil Chehade, M.D.-I, Kim Cunningham-R, David Fiser-I, Joseph Golob, M.D.-I, Derrick Hollings-I, William Lewis, M.D.-I, Christina Morales-I, Sarah Partington-I, Allison Poulios-R, Tamiyka Rose-I, Deborah Southerington-I, Ronald Walker-I, James Wellons-I

Invited Guests: Mauree Dee-I, Oliver Jurkovic-I (Plante Moran), Jordan Pace-I

(Plante Moran), Megan Warren-I (Plante Moran)

Other Guests: Guests not invited by the Board of Trustees are not listed as they

are considered members of the audience, and some were not

appropriately identified.

Ms. Dumas called the meeting to order at 11:35 am, in accordance with Section 339.02(K) of the Ohio Revised Code with a quorum present.

(The minutes are written in a format conforming to the printed meeting agenda for the convenience of correlation, recognizing that some of the items were discussed out of sequence.)

I. Approval of Minutes

The minutes of the November 20, 2024 Committee meeting were unanimously approved as submitted.

II. Information Items

A. Presentation of Annual Audit of System Financial Statements – J. Pace, M. Warren, O. Jurkovic – Plante Moran



Ms. Dumas introduced members of the external auditor team, Plante Moran, to discuss the findings of the audit of the system financial statements for fiscal year 2024. The auditors were engaged to examine the financial statements in accordance with generally accepted auditing standards. The auditors provided an unmodified opinion, which is the highest level of assurance, indicating the statements are fairly presented. The audit followed a risk-based approach, concentrating on areas most susceptible to error, such as revenue, receivables, pensions, and liabilities. No findings were noted in the financial audit, and only one minor issue arose in the federal compliance audit. Overall, the audit concluded with no findings on the financial statements.

Resolution for Acceptance of MetroHealth System Annual Audit
Ms. Dumas called for a motion for the approval of the resolution for acceptance
of the MetroHealth System Annual Audit, which was given, seconded, and the
resolution was unanimously approved to be presented to the Board of Trustees
for approval.

B. Ethics and Compliance Updates – C. Briddell, S. Partington

Chris Bridell, SVP Chief Ethics, Risk & Compliance Officer and Sarah Partington, Executive Director, Ethics & Compliance, provided an update on ethics and compliance activities, beginning with a review of the standard dashboard and key metrics. In 2024, the MetroHealth Ethics Line (MEL), a third-party managed hotline for reporting ethics and compliance concerns, maintained an average case resolution time of 22 days—below the national benchmark of 45 days. A highlighted feature of MEL's capabilities is the ability for reporters to follow up on their submissions, even if they reported anonymously. An anonymous reporter receives a password to log into the system, allowing them to submit additional information or respond to follow-up questions. Nineteen percent of anonymous reporters followed up on their cases, which generally took longer to resolve compared to those submitted by known reporters. Ms. Partington highlighted accomplishments from 2024, including a successful Compliance Week in December, which featured a live-streamed panel discussion titled "Leading with Integrity" with Maureen Dee, Dr. Alexander-Rager, Sharon Dumas, and Chris Briddell. Pop-up events were held across MetroHealth locations, with over 500 thank-you bags distributed to staff. The Ethics and Compliance team aligned its 2025 efforts around specific departmental goals. Each member has developed individual goals that contribute to these broader objectives.



Progress will be tracked and reported throughout the year based on completed activities related to these goals. As part of the Office of Inspector General's (OIG) compliance program guidance issued in November 2023, compliance teams are expected to report periodically to the Board and senior leadership. In response, the Compliance Committee holds quarterly meetings with representatives from 25 departments. The committee has recently updated its charter and is actively identifying and assessing high-risk compliance and regulatory risks across the organization.

III. Executive Session

Ms. Dumas asked for a motion to move into executive session to discuss hospital trade secrets as defined by ORC 1333.61. Mr. Dziedzicki made the motion and Dr. Walker seconded. Upon unanimous roll call vote, the Committee went into executive session to discuss such matters stated by Ms. Dumas. Members of the public were excused, and the Committee went into executive session to discuss the identified matters at 11:51 am.

Following the executive session, the meeting reconvened in open session at approximately 1:05 pm and welcomed back the public via Zoom and those members of the public who remained in-person.

IV. Recommendations / Voice Vote Approvals / Resolution Approvals

A. Approval of the MetroHealth System Compliance Work Plan Ms. Dumas called for a motion for a voice vote for the approval of the MetroHealth System Compliance Workplan, which was given, seconded, and approved. Mr. Dziedzicki was absent at time of voting.

B. Approval of the MetroHealth System Internal Audit Plan
Ms. Dumas called a motion for a voice vote for the approval of the recommended
additions to the 2025 Internal Audit Plan, which was given, seconded, and
approved. Mr. Dziedzicki was absent at time of voting.

There being no other business to bring before the Committee, the meeting was adjourned at approximately 1:07pm.

THE METROHEALTH SYSTEM

Chris Briddell, SVP, Chief Ethics Risk & Compliance Officer





Ethics and Compliance Program Activities

Audit and Compliance Committee of the Board of Trustees
June 11, 2025

Ethics and Compliance – By The Numbers

2025 Q1 MEL Data

KEY UPDATES

2025 Ethics and Compliance goals **WORK PLAN* 72% YTD**

POLICIES

MHS: 77% YTD EC: 83% YTD **METROHEALTH ETHICS LINE (MEL)**

Cases opened 179 (179) Cases closed 216 (216)

Inquiries 70 (70) Allegations 146 (146)

TRAININGS

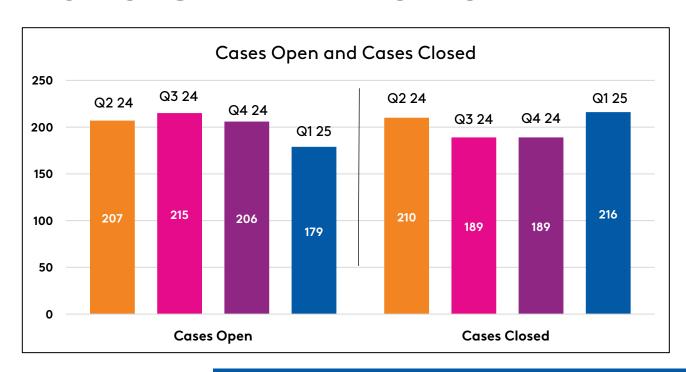
Targeted New Hire 46 YTD Specialized 56 YTD

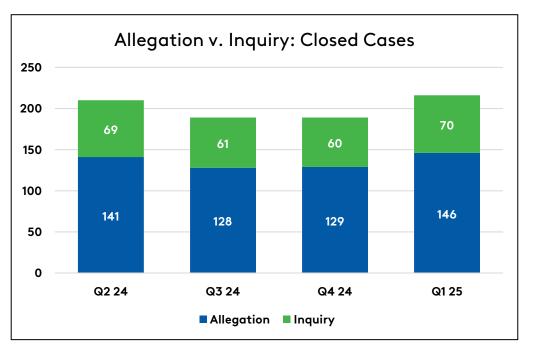
^{*} See Appendix for additional information

By The Numbers - Legend

Workplan	
Data	72% completion based on targets set for end of May
MetroHealth Ethics Line (MEL)	
All data	YTD (Q1)
Inquiries	MEL submission that does not allege wrongdoing; seeks guidance
Allegations	MEL report that involves an accusation of wrongdoing by an MHS workforce member (employee, vendor, etc.)
Policies	
Data	MHS: % MHS policies current with annual update through May 2025 EC: % EC policies current with annual update through May 2025
Training	
All data	YTD (through Q1)
Targeted New Hire	Trainings by Ethics and Compliance team beyond general orientation
Specialized	Trainings on specific topics (new regulations, billing and coding issues, etc.)

2025 Q1 MEL Review

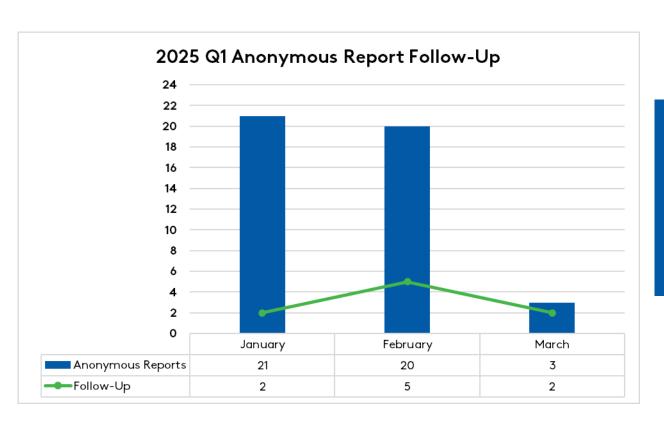




Key Takeaways

 Annual average open to close time was 38 days, compared to the national benchmark of 45 days

2025 Q1 MEL Review, cont.



Key Takeaways

- Follow-up rate for anonymous reporters: 20%
- Non-Anonymous report avg case closure time: 22 days
- Anonymous report average case closure: 90+ days

Ethics and Compliance 2025 Goals



Foster the integration of an ethical culture

- Updated Communications workplan
- Completed 2024 Hotline RFP
- Published new "Compliance Guidebook"



Provide continuous monitoring of regulatory changes and assess their impact on MetroHealth

- Coordinated MHS compliance with 1557 (Non-Discrimination Act)
- Revised Regulators process
- Developed tool to track Regulators activities to present to leadership/Board



Ensure safeguarding of information during campus transformation 2.0

- Preparing and delivering training/resources to safeguard PHI before move (in process)
- Participating in system-wide workgroups managing the move

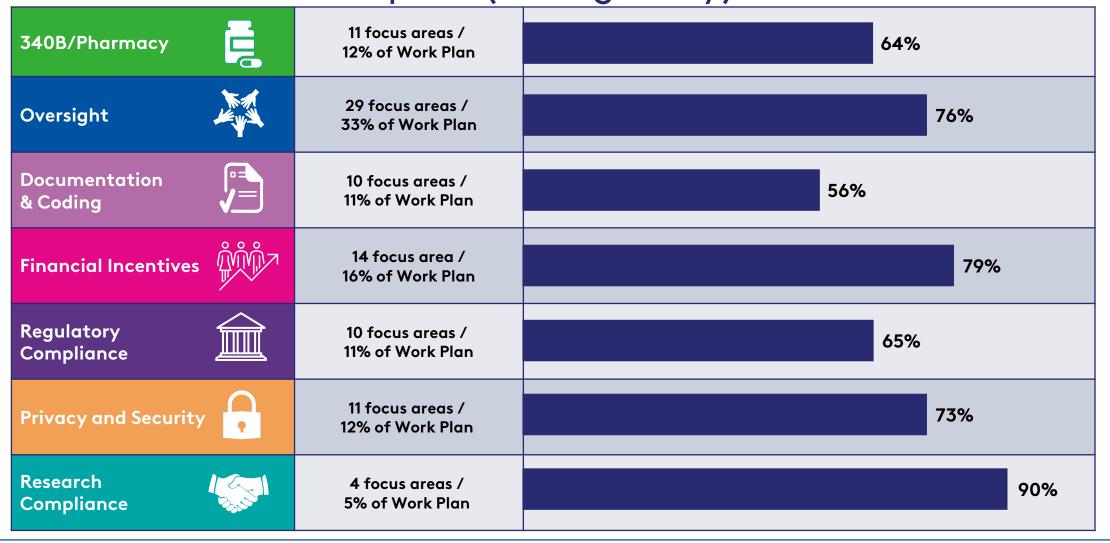


Maximize the effective use of data, technology, and external resources

- Reviewed Annual Training responses/effectiveness survey (2024)
- Revised General Ops dashboard to track and report out on audit activities
- Monitoring and investigating FairWarning alerts

Appendix

The 2025 Ethics and Compliance Work Plan consists of 89 focus areas and is 72% complete (through May).





Internal Audit Program Activities

Audit & Compliance Committee of the Board of Trustees June 11, 2025

Elevating the Internal Audit department with our 2025 department goals.



Stabilize and revitalize program



Complete Institute of Internal Auditors (IIA) new Global Internal Audit Standards gap assessment



Develop program strategy and roadmap



Develop quantifiable key performance indicators and measure performance



