



The MetroHealth System Board of Trustees Audit & Compliance Committee Meeting

The MetroHealth System

MetroHealth Board Room K107 - 2500 MetroHealth Dr., Cleveland, OH 44109

2026-09-16 11:30 - 13:00 EDT

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The MetroHealth System Board of Trustees

AUDIT & COMPLIANCE COMMITTEE

DATE: Wednesday, September 16, 2026
TIME: 11:30am – 1:00pm
PLACE: MetroHealth Main Campus, Building K, Board Room (K107) or YouTube Stream <https://www.youtube.com/@metrohealthCLE/streams>

AGENDA

- I. **Approval of Minutes**
Approval of Committee Meeting Minutes from June 24, 2026
- II. **Information Items**
 - A. Ethics and Compliance Update – S. Partington
- III. **Executive Session**

Return to Open Meeting

- IV. **Recommendations / Approvals**
 - A. Approval of the Proposed 2027 Internal Audit Department Budget and Resource Plan

The MetroHealth System Board of Trustees

AUDIT AND COMPLIANCE COMMITTEE

Wednesday, June 24, 2026

11:00 am – 1:00 pm

MetroHealth Main Campus, Building K, Board Room (K107) and Virtual Zoom

Meeting Minutes

Committee Members Present:	John Moss-I, E. Harry Walker, M.D.-I, Gail Long-I
Other Trustees Present:	James Campbell-I; Michael Summers-I
Staff Present:	Christine Alexander-Rager, M.D.-I; Robin Barre-I; Robert Bruce, M.D.-I; Nabil Chehade, M.D.-I; David Fiser-I; Joseph Golob, M.D.-I; Ashish Masih-I; Candace Mori-I; Sarah Partington-I; Amanda Roe-I; Jeff Rooney-I; Tamiyka Rose-I; Deborah Southerington-I; David Stepnick, M.D.-I; James Wellons-I; Patrick Woods-I
Invited Guests:	Hayley Oaks-R
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.

Mr. Moss called the meeting to order at 11:00 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 March 25, 2026 Committee meeting were approved as submitted by a majority vote with one abstention.

II. Information Items

A. Ethics and Compliance Update – S. Partington

Ms. Sarah Partington presented the Ethics and Compliance update, beginning with a review of the main dashboard. She reported that the work plan completion rate was 82 percent for projects scheduled through May, which she described as on target and consistent with prior years.

Ms. Partington reviewed policy management metrics, including Ethics and Compliance policies and systemwide policies updated within the last year. She stated that Ethics and Compliance is working with system owners whose policies are older to ensure the policies are revised and compliant in the coming months.

Ms. Partington also reviewed MetroHealth Ethics Line data and training data. She reported that MetroHealth launched a new Ethics Line with a new vendor and that the launch had gone well. She noted that end users had not experienced a significant impact and that, in connection with the new platform, the department revised materials and the reporting guide to help employees understand where to report concerns. She also referenced a refresh of the Speak Up campaign.

Ms. Partington provided a review of first-quarter Ethics Line data and advised that the data may vary by approximately ten cases because the quarter included the transition to the new platform and required data to be pulled from two systems. She noted that some cases were still being transferred and that the first-quarter data may differ when reported in the next quarterly update.

Ms. Partington stated that the department is continuing to monitor inquiries and other reporting data, noting that inquiries appeared low and that the variance may relate to the system transition. She further reported that the annual average open-to-close time was 32 days, which remained below the 45-day benchmark, although somewhat higher than typical due to year-end 2025 case closeout activity during the system transition. No questions were raised following the presentation.

III. Executive Session

Mr. Moss asked for a motion to move into executive session to discuss hospital trade secrets as defined by Ohio Revised Code Section 1333.61. Dr. Walker made the motion and Ms. Long seconded. Upon unanimous roll call vote, the Committee went into executive session to discuss such matters stated by Mr. Moss. Members of the public were excused, and the Committee went into executive session to discuss the identified matters at 11:04 am.

Following the executive session, the meeting reconvened in open session at approximately 12:14 pm and welcomed back the public virtually and those members of the public who remained in-person.

There being no further business to bring before the Committee the meeting was adjourned at approximately 12:14 pm.

THE METROHEALTH SYSTEM

John Moss,
Interim Chairperson, Audit & Compliance Committee



MetroHealth
Devoted to Hope, Health, and Humanity

Ethics and Compliance Program Activities

Audit and Compliance Committee of the Board of Trustees

September 16, 2026

Ethics and Compliance – By The Numbers

WORK PLAN*

Completion rate of planned Compliance projects based on targets due by the end of August 2026.

79% YTD

POLICIES

MHS: % MHS policies updated annually (as of August 2026)
EC: % EC policies updated annually (as of August 2026)

MHS: 76% YTD
EC: 92% YTD

METROHEALTH ETHICS LINE (MEL)

Inquiries: Reports that do not allege wrongdoing; seeks guidance
Allegations: Reports that involves an accusation of wrongdoing.

Q2 (YTD)

Cases opened	156 (283)	Inquiries	37 (56)
Cases closed	126 (262)	Allegations	89 (206)

TRAININGS

Targeted New Hire: Compliance training beyond general orientation
Specialized: trainings on specific topics (new regulations, billing and coding issues, etc.)

Q2 (YTD)

Targeted New Hire	28 (55)
Specialized	18 (38)

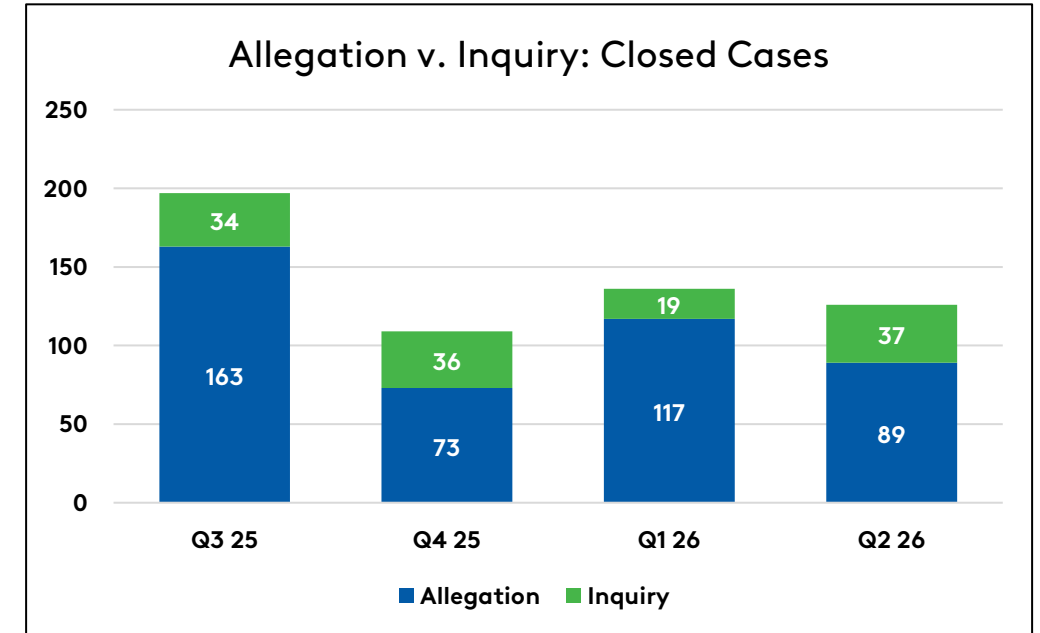
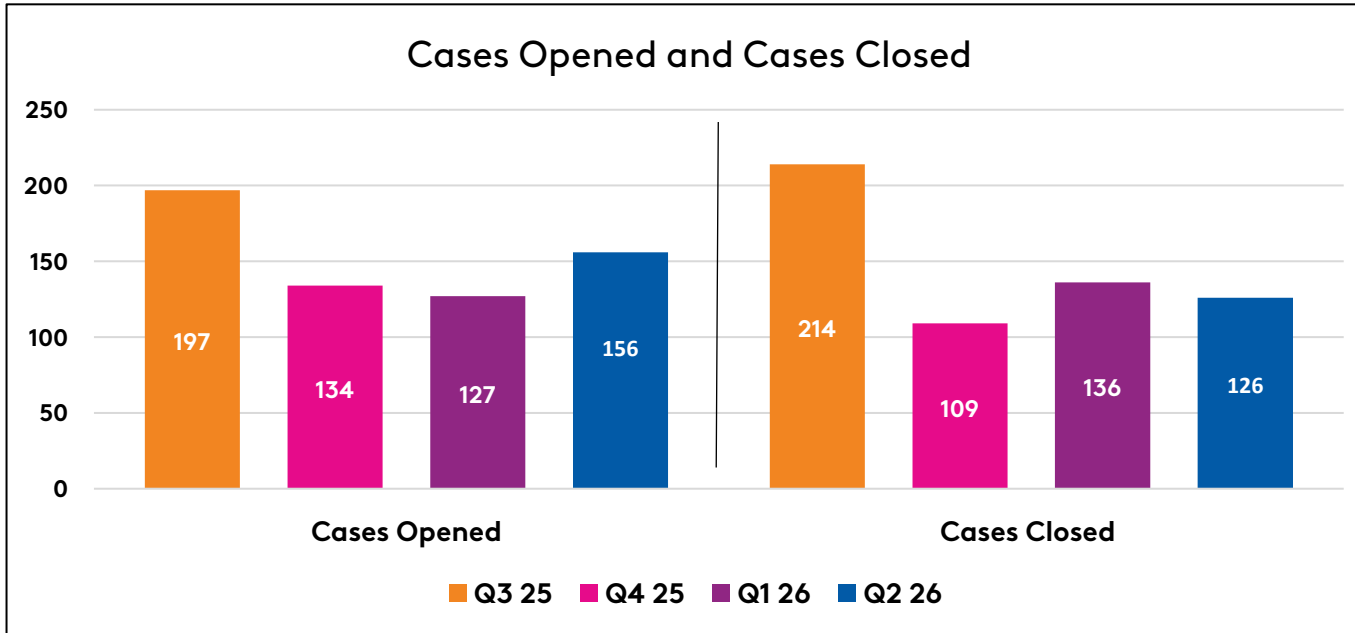
* See Appendix for additional information

Privacy Liaisons helped safeguard patient information during OPHC move.

- Led the post-move privacy walkthrough from the Outpatient Pavilion (OPP) to the Outpatient Health Center (OPHC)
- Delivered trainings to prepare teams ahead of the move
- Engaged 13 representatives across four departments
- Confirmed minimal PHI left behind at the former site



2026 Q2 MEL Review



Key Takeaways

- Annual average open to close time was 11 days, compared to the national benchmark of 42 days.
- Q2 26 volume rose to 156 cases opened against 126 closed, with allegations driving 71% of closures.

Appendix

Ethics and Compliance 2026 Goals



Foster the integration of an ethical culture

- Hosted *Conversations with Compliance – Speak Up* edition
- Updated Ethics and Compliance SharePoint page
- Developed a quarterly Ethics and Compliance newsletter



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

- Reviewed and revised workflows related to Medicare beneficiary notices
- Facilitated distribution and review of final CMS proposed prospective payment rules



Ensure safeguarding of information during campus transformation 2.0

- Refreshed the physical security walkthrough checklist
- Completed post-move security walkthroughs of the Outpatient Pavilion



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

- Released conflicts of interest to researchers
- Expanded monitoring to detect unauthorized employee access to family members' records

The 2026 Ethics and Compliance Work Plan consists of 156 focus areas and is 79% complete (through August).

340B/Pharmacy 	10 focus areas / 6% of Work Plan	90%
Oversight 	45 focus areas / 29% of Work Plan	80%
Documentation & Coding 	19 focus areas / 12% of Work Plan	91%
Financial Incentives 	14 focus areas / 9% of Work Plan	78%
Regulatory Compliance 	28 focus areas / 18% of Work Plan	70%
Privacy and Security 	18 focus areas / 12% of Work Plan	87%
Research Compliance 	7 focus areas / 4% of Work Plan	57%
TPRM 	15 focus areas / 10% of Work Plan	71%