

CONFLICT OF INTEREST POLICY

Effective Date: October 2012

The integrity and the credibility of Hospice Medical Director Certification Board (HMDCB), its certification program, and the activities it undertakes depend on the avoidance of conflict of interests, or even the appearance of such conflicts, by the individuals involved in those activities.

It is recognized, however, that elected and appointed leaders, as well as other individuals acting on its behalf, also have significant professional, business and personal interests and relationships and activities. Therefore, actual, potential or apparent conflicts of interest should be addressed initially through liberal disclosure of any relationship or interest that might be construed as resulting in such a conflict.

Individuals serving on the Board of Directors or any committee will be asked to execute a disclosure both at the time of their appointment and annually thereafter. In addition, individuals are expected to promptly disclose any relevant changes that develop over the course of their appointment. It is the responsibility of each individual to identify potential and actual conflicts of interest and to comply with the established policy described below.

Financial Interests

Financial interests relate to relationships present today or at any time within the past 12 months. They do not apply to the individual's principal employment. Individuals will be asked to disclose whether any of the following exist for themselves or their spouse/partner:

1. Ownership interests (including stock, options or similar interest) in a company, having a commercial interest in an activity or matter that may give rise to an actual, potential or perceived conflict with HMDCB's activities
2. Employment, full or part-time, with a company that may give rise to an actual, potential or perceived conflict with HMDCB's activities
3. Current or proposed consultancy arrangements, as well as consulting performed
4. Receipt of honoraria or other reasonable payments for seminar presentations, speeches, or appearances
5. Any leadership role in, or other relationship with, another organization or entity (e.g., board member, committee member, advisor) directly or indirectly related to HMDCB or within the field of hospice and palliative medicine

In most instances, disclosure of the conflicting or potentially conflicting interest will itself suffice to protect HMDCB's interests. In other words, once such a conflict is fully disclosed to the relevant parties, they generally will be able to evaluate the possible influence of the disclosed interest. In situations where such disclosure does not adequately deal with actual or potential problems, however, additional action, including denial of participation in the affected activity or consideration of the matter, may be necessary.

In order to facilitate implementation of the Conflict of Interest Policy, the Board or its designee(s) shall determine, based on the appropriate disclosure form and other relevant information, when an individual engaged in, or about to engage in, an activity or other matter under consideration has an actual, potential, or perceived conflict of interest requiring some response by the Board. Specifically, subject to the procedures set forth here, the Board or its designee(s) may require any action they deem appropriate,

including, but not limited to, the following:

1. Disclosure of the interest to the other participants in the decision- or policy-making body (e.g., board, committee).
2. Recusal from voting on a matter and limitation of the individual's participation providing factual information of benefit to the group discussion.
3. Complete recusal from a portion of a meeting or from other consideration of the subject matter.
4. Replacement of the individual in the affected position or activity.

Academic Interests

Protecting the integrity and credibility of HMDCB's certification program is essential to its success. Involvement of Board or committee members in some types of educational programs could create the perception of unfair advantage to program participants, specifically educational activities designed to prepare individuals to take the HMDCB examination.

The following guidelines apply to all Board and committee members who have significant knowledge about questions on the certification examination and remain in effect for two years after completion of their volunteer activity.

1. Individuals must not participate in educational activities that are designed and/or advertised to prepare for certification or recertification examinations. This includes teaching, developing course outline or enduring materials.
2. Individuals must use careful judgment when considering involvement in broad-based comprehensive educational activities in hospice and palliative medicine that are not specifically advertised as preparation for certification or recertification examinations:
 - ✓ If the curriculum and timing of a course suggest that it will be seen as exam preparation, members must refrain from involvement
 - ✓ Individuals shall not serve as course chair or personally organize such a course to avoid the perception that the curriculum reflects the content of the examination
 - ✓ Individuals may teach in courses that focus on recent advances or updates in the field, as such courses do not include material viewed as appropriate for examination
3. Individuals must not participate in the preparation of self-assessment products for organizations other than HMDCB
4. Individuals must not allow use of their HMDCB affiliation for promotion of programs, products or publications. They must, however, always identify their role when participating in activities permitted under this policy.

These guidelines are not meant to restrict normal activities associated with the individual's professional responsibilities, including education and research except where there is an explicit or implied indication that the material covered is designed to help pass the HMDCB examination.

Individuals who violate HMDCB Conflict of Interest policy may be removed from their affected position or activity as deemed appropriate by the Board of Directors.

If uncertain about these policies, individuals are urged to seek the advice of the Board President or Executive Director.

Confidentiality

Each member of the HMDCB's Board of Directors or committees must agree to treat all confidential and proprietary information owned, possessed or used by the Board or its committees as highly confidential and must not divulge the information to any party outside of the Board or committee he/she serves on. If the member does not agree with these provisions, he/she will not participate in the development process.

Introduction

All organizations face negative situations within their industry, profession or organization itself. Having a crisis management policy, coupled with a set of procedures that define what to do in specific circumstances, not only helps maintain the organization's image but also assists staff and volunteers in fulfilling their roles. It is important in crisis situations that an organization speaks with one voice.

It is inherent in certification organizations that negative responses to eligibility decisions, examination content, and scoring results will be expressed. Having psychometrically sound and legally defensible programs assure the integrity of the process and certification decisions. Accessible descriptions of the development of the certification program may often be sufficient in responding to concerns.

Objectives of a Plan

- Present and maintain a positive image of the organization
- Deliver timely, accurate, and current information to interested parties
- Remain accessible to key constituents
- Monitor channels of communication to identify and address messages that are inaccurate or misleading
- Maintain the support of key constituent audiences

Phase I - Before the Crisis

The first phase of crisis management is to plan for potential crises. By identifying probable crises for the organization, developing appropriate responses or messages to those crises, deciding on a spokesperson(s), determining critical publics and vehicles for communicating a response to a crisis, and informing staff and volunteers of procedural steps constitutes the planning phase.

Potential Crises for HMDCB

Some possible crises to affect HMDCB have been identified as follows:

- Natural disaster affecting availability of assessment centers
- General criticism of assessment center quality
- Security breach of client data through testing partner's computer systems
- Security breach of testing data by candidates sharing information
- Criticism of examination content by candidates or pass rates for initial examination
- Claims alleging that HMDCB was negligent in granting certification and should be liable for medical care delivered by a certificant that fell below the standard of care

Do's & Don'ts in Crisis Communication

There are several guidelines for effective crisis communication. It is suggested that organizations do:

- Select one spokesperson
- Get all the facts before forming a response
- Be proactive in contacting the press
- Issue responses in writing if possible
- Monitor media coverage and correct erroneous statements immediately
- Express regret for the situation
- Admit when information is not known; commit to finding it out
- Provide the same information to everyone

It is suggested that organizations don't:

- Say "no comment"
- Guess or speculate on issues
- Ever comment "off the record"
- Mislead, cover up or lie
- Place blame somewhere else
- Repeat negative or inaccurate statements in answering questions

Draft Responses/Messaging

NOTE: Messages in response to the above identified crisis will be drafted for the Board's review in May.

Spokesperson(s)

One individual should be designated as the primary spokesperson, make official statements and answer media questions throughout the crisis. This is often the Executive Director (ED) or the Chief Elected Officer. Depending upon the nature of the crisis, the ED and Chief Elected Officer should determine the most appropriate designee.

Critical Publics and Communication Vehicles

Potential publics to reach following a crisis may include:

- Certificants
- HMDCB Prospects
- HMDCB Volunteers
- Hospice Physicians
- National associations in the field (e.g., AAHPM, NHPCO, HPNA, CAPC, Hospice Analytics, etc.)
- State hospice organizations/SOER
- Hospice and palliative care clinicians
- Hospice Administrators
- Testing Partners
- Public

Vehicles to communicate a response during a crisis:

- Social Media
- Email
- Direct Mail
- AMC Member Services
- Phone

- Website
- Through established AAHPM communication vehicles

Staff should become familiar with industry media such as journals, newsletters, blogs, etc. and obtain the contact information for each.

Procedural Steps

Once the crisis management plan has been approved by the Board of Directors, all staff should receive a copy and be aware of procedural steps. Staff or organizational volunteers who believe a crisis is occurring should immediately notify the Executive Director at HMDCB's national office.

Phase II – The Crisis

When a potential crisis occurs the essential steps are to define the crisis, access the crisis plan and respond professionally and promptly.

Defining the crisis includes assembling all known facts, determining who is affected (both internal and external customers), the reach of the crisis, what other associations, industries or professions are involved, and are legal issues involved.

After the crisis has been defined and the crisis management plan has been accessed, the following steps should be conducted to prepare the response.

- Prepare a fact sheet about the crisis with all information verified and ensure information is in sync with website
- Review and edit prepared response for crisis
- Determine the appropriate spokesperson, audiences and communication vehicles, and distribute appropriate response to all concerned publics and fact sheet to internal staff and appropriate volunteers
- Monitor both traditional and social media
- Document all aspects of the crisis while in progress, including incoming calls/emails, statements, fact sheets, legal reviews, interviews, media coverage, public responses and final resolution if available

Phase III – Post Crisis

A review of the organization's crisis performance is helpful in preparing for future scenarios. An organization should evaluate the crisis management plan, response and outcome.

Questions to be asked include:

- Did the crisis management plan address all potential needs or are there changes or additions to be made?
- Did the spokesperson(s) perform effectively, is training necessary?
- Was the organization surprised/unprepared by any aspect of the crisis?

HMDCB should use the information and experience gained during the process to build an even more effective response procedure for the next occurrence.

Purpose

The Examination Committee (Exam Committee) is responsible for using psychometrically sound practices to develop and maintain the certification examination and ensure that it reflects the content blueprint as determined by the most recent practice analysis.

Appointment and Qualifications

The Exam Committee shall consist of at least 8 but no more than 10 individuals, including a Committee Chair and one member selected from the members of the Board of Directors, for staggered two-year terms.

Once the program is established, it is expected that all committee members are certified hospice medical directors. In addition, it is recommended that committee members:

- currently hold the position of hospice medical director and have served in this role for a minimum of 8 years
- represent the diversity of the field in geographic location, practice setting (e.g., tax status, size, location and academic affiliation), and training and certification
- are subject matter experts in the content areas of the examination blueprint, with the ability to think broadly about the multi-faceted field
- have previous experience teaching or planning formal education for hospice medical directors
- demonstrate good oral and written communication skills, and
- have proven ability to work effectively in a team environment as well as independently.

Expectations

Responsible for oversight of the development and maintenance of the certification exam, the Exam Committee:

- provides content expertise and maintains the confidentiality and integrity of the exam
- reviews the psychometrics of test items and examinations with the expert guidance of the testing company
- ensures an adequate pool of exam items for potential inclusion in the exam, and if necessary revise or write items providing item references or rationales
- reviews all test items for accuracy and relevance, and approves, rejects, and retires as appropriate
- categorizes questions by content domain, and
- determines the passing score.

Participation in item writing training is strongly recommended. Attendance at Exam Committee meetings, either in person or by other means is required for all members. In addition, members may be asked independently to review items and the examination form.

Terms

Each member of the Exam Committee shall be appointed to a two year term. Terms will be staggered, with approximately one-third expiring each term. Individuals may serve no more than three consecutive full terms.

Certification of Committee Members

Members of the 2013-2014 Exam Committee are not eligible to take any form of the certification examination during their term or for two (2) years following the completion of their term. Committee members may be considered to have met the requirements for certification and receive the designation for certification under the following terms:

1. met all other eligibility requirements for certification
2. attended all committee meetings and contributed to the advancement of the certification program during their term
3. adhered to the HMDCB Conflict of Interest Policy during their term, and
4. received approval for certification from the HMDCB.

To maintain the credential, Exam Committee members who are granted certification through this grandfathering process are expected to satisfy all of the requirements that apply to other certificants.

Should an examination committee member's certification expire during their term on the Examination Committee, they may not renew certification by taking the maintenance of certification examination, but must renew by completing all other applicable requirements for renewal of certification (e.g., practice hours, continuing education, etc).

Charges

The Nominating Committee will solicit nominations for those Directors whose terms will expire at the next Annual Meeting of the Board and will submit to the Board a list of qualified candidates to succeed those Directors. In addition, the Committee will develop a slate of officers for the Board of Directors to approve.

Composition

The Nominating Committee is chaired by the Immediate Past President and is comprised of three (3) additional members, two (2) who are former Directors of HMDCB and one (1) who is the HMDCB public member. Members of the Nominating Committee are not eligible for elected office or other elected Board position. In the event the Past President is unable or unwilling to serve, the President will submit to the board a Chairperson for approval.

Note: Until there are former directors, current directors would serve in this capacity.

Appointment and Term

The remaining Committee members will be recommended by the President and approved by a majority of the Board. Each member will serve a one-year term.

AAHPM Liaison

For the AAHPM Liaison position, a list of three HMDCB certified physicians will be requested from the AAHPM Board of Directors prior to submitting a recommended candidate to the Board.

Operating Guidelines

HMDCB is committed to diversity in its Board composition. HMDCB will solicit nominations from the field. HMDCB will assess candidates on a combination of professional accomplishments and expertise as well as leadership skills.

Director Candidate Guidelines

- *Competence:* Currently HMDCB certified in good standing
- *Leadership skills:*
 - a) Volunteer experience on a national association board, committee, or task force in the field of hospice and palliative medicine
 - b) Leadership experience in professional or community organization(s)
- *Work experience:* Demonstrate significant practice experience as a hospice medical director/hospice physician

Officer Candidate Guidelines

- Completed a minimum of one (1) year experience as a HMDCB director during the previous 5 years

Policy

HMDCB has a voting director on its board of directors whose purpose is to represent the interests of consumers of hospice services. This position is voluntary and the qualifications and responsibilities are consistent with those described in the NCCA Standards for the Accreditation of Certification Programs for the public member.

Qualifications

The public member is knowledgeable about the issues facing hospice patients and families and is able to represent their interests. Whenever possible, the public member has been or is potentially a direct or indirect consumer of the skills and services provided by certified hospice medical directors.

The public member is not a practicing professional or employer in the field of hospice and palliative care, a member of a related profession that provides complimentary services, an immediate relative of a hospice medical director, or an employee of a certification organization.

The public member may not have credentials similar to those held by HMDCB certificants or, in any of the five years preceding appointment or while on the board, derive more than 5% of total income from the provision of products or services to HMDCB or the field of hospice.

Responsibilities

HMDCB expects that the public member will

- represent the interests of hospice patients and their families
- fulfill all responsibilities as outlined in the HMDCB bylaws
- respond promptly to communications about HMDCB business
- comply with board policies and maintain strict confidentiality about any examination or certification renewal information discussed during board meetings
- participate on committees and work groups as appropriate
- complete and sign a conflict of interest form on an annual basis

Term

As a voting member of the HMDCB, the public member will serve a term of two (2) years and may be reappointed for two (2) more consecutive full terms.

Policy

It is the policy of the Hospice Medical Director Certification Board (HMDCB) that its records be retained only so long as they are: (a) necessary to the current conduct of HMDCB's business, (b) required to be retained by statute or government regulation, or (c) relevant to pending or foreseeable investigations or litigation. In furtherance of this policy, HMDCB has adopted the attached Record Retention Schedule and the following principles and procedures for its Record Management Program (Program), which shall be strictly observed by HMDCB, its officers, directors and staff.

1. All HMDCB records shall be retained in a manner consistent with this Policy and the Records Retention Schedule.
2. HMDCB retains management services from Association Management Center, Inc (AMC) and therefore the responsibility for administering the Program in accordance with this Policy is delegated to the HMDCB Executive Director who will work with designated staff within AMC. All staff affiliated with HMDCB shall comply with AMC's Record Retention Schedule and Document Destruction Policy.
3. The HMDCB Executive Director shall be responsible for an annual review of the Program.
4. Destruction of specific records shall be carried out only in accordance with the authority and approval of both the HMDCB Executive Director and designated staff of AMC.
5. All records, including those maintained on electronic data processing storage media, shall be covered by this Policy Statement. HMDCB records include all records maintained by HMDCB and for HMDCB by AMC as well as those developed by independent contractors.
6. Regardless of the retention period specified in the Record Retention Schedule, all records shall be retained for at least the minimum period as stated in applicable state or federal laws, rules or regulations.
7. The destruction of documents shall be suspended immediately upon receipt of legal process or other notice of pending or foreseeable investigations or litigation. In addition, upon such notice, all HMDCB records shall be secured immediately in order to prevent the deliberate alteration, destruction, mutilation, concealment, cover-up or falsification of documents. No such suspension of the Program shall be lifted except upon the written authorization of legal counsel.
8. Requests for exemptions from the Program should be submitted to the HMDCB Executive Director and legal counsel. Exemptions will be given only in accordance with the basic objectives of this Policy Statement.
9. The HMDCB Executive Director and AMC designee shall be responsible for interpreting this Policy Statement for application to specific situations.

HMDCB Name Policy

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All records administered and maintained by designated staff affiliated with HMDCB comply with AMC's Record Retention and Document Destruction Policy. See attached for AMC timeline and schedule.

General Travel Expense Policies

When authorized, travel expenses will be reimbursed as follows:

- Approval: Reimbursement will not be issued without prior approval from the HMDCB President, Treasurer, or Executive Director. Individuals will be informed in advance if, and which, expenses will be reimbursed.
- Expense Report: A written expense report must be submitted to the national office for reimbursement within 30 days of the date incurred. Use of the HMDCB expense report is encouraged. Receipts must be attached for airfare, hotel, meals and any other charges in excess of \$10. Individual expenses of less than \$10 may be itemized in lieu of receipts, when receipts are not available. A reimbursement check should be received within one month following submission of the expense form and any required written report.
- Airfare: Travel arrangements will be made through the approved HMDCB travel agent or directly by the individual in the most cost effective and reasonable manner. The coach-class airfare arranged 21 days prior to travel and most direct route shall be employed for air travel. Fares exceeding \$450 roundtrip must have prior approval from the Executive Director and if appropriate, one stopover may be required. HMDCB will reimburse the cost of checking one bag per flight. Exceptions to any of the above must be pre-approved by the Executive Director.
- Ground transportation (mileage, airport parking, cab fare) directly to and from the airport will be reimbursed. This does not include car rental without prior approval from the Executive Director. Travel by private car will be reimbursed at the government published rate per mile at the time of the travel and is not to exceed coach airfare for the same distance.
- Hotel: HMDCB will reserve a block of rooms at a designated meeting hotel that will charge the room expense and applicable taxes for a single “regular” room directly to an HMDCB master account. Individuals should not contact the hotel directly to make their own reservations. Individuals will be asked to present a credit card to guarantee incidental personal expenses which are not reimbursable, or for lodging for additional nights not related to HMDCB business.
- Per diem: Food and incidental out-of-pocket expenses will be reimbursed up to the per diem rate of \$60 when corresponding receipts are provided along with an expense report.

Expense Reimbursement Eligibility

Board and Committee Members

- Board and committee members are reimbursed for travel, hotel, and per diem for the length of meetings, as approved and budgeted.
- When asked to attend other board, committee, or outside meetings to represent the Board, members are reimbursed for travel, hotel and per diem. Prior approval from the President and notification of the Executive Director is required, and reimbursement will follow submission of the required written report.

Policy

HMDCB maintains an Internet website, www.HMDCB.org presenting information about the organization and its certification program, as well as resources for visitors interested in hospice medical director certification. Consistent with its mission, the website strives to promote the excellence and professional competency of hospice medical directors and physicians who provide hospice care.

HMDCB will consider requests for links to educational activities on external websites with the specific goal to provide resources and assist visitors in finding related educational material to aid in their preparation for the certification program. Educational activities are defined as educational events or products in or related to the field of hospice and palliative medicine including but not limited to:

- Independent courses or conferences
- Self-study programs, e.g., monographs, audio or video programs
- Webinar or e-learning programs or resources
- Select enduring educational products

The HMDCB Board of Directors will evaluate requests based on the following criteria:

- Consistency with the mission and goals of HMDCB
- Relatedness of the educational activities to competencies outlined in the HMDCB content blueprint
- Potential value to eligible HMDCB certification candidates
- Extent of meaningful participation by physicians who have earned their HMDC credential in the development and/or presentation of the program
- Absence of bias, advertisements or promotional materials
- Educational activity is not in competition with HMDCB certification program or timing of examination window(s)
- Sponsoring organizations' agreement to support HMDCB activities through reverse link or distribution of promotional materials

Disclaimer

Linkages will be accessed through a dedicated section of the Web site, which will include a disclaimer on the Web page that includes at least the following statement:

“HMDCB neither sponsors nor endorses educational activities including review courses for the HMDCB examination. A link from this page is not an endorsement by HMDCB of any product, service or agency. HMDCB assumes no responsibility for the content of these Websites. “

Periodic Review of Links

A periodic review of the appropriateness and functionality of Website links will occur at least semi-annually.

Procedure

1. Inquiring organization's request must be made in writing to HMDCB and include
 - a. Name of the site, the URL and the name of the sponsoring institution or association
 - b. Educational objectives
 - c. Curriculum
 - d. Course or activity outline including dates and location
 - e. Course or activity faculty with credentials
 - f. Source of all Continuing Education Credit approvals, if any
2. The HMDCB Board of Directors will review the request within 30 days of submission to ensure the appropriateness of the educational activity
3. Once approved, HMDCB will list inquiring organization's educational activity at www.HMDCB.org to aid individuals in their preparation for the HMDCB certification program.

Policy

The Hospice Medical Director Certification Board (HMDCB) is committed to preventing reprisals against HMDCB volunteers and staff members who report activity undertaken by HMDCB volunteers and/or staff in connection with: (i) the performance of official HMDCB activity that may be in violation of state or federal law or (ii) questionable corporate accounting practices, internal controls, or audit matters (collectively referred to as “Protected Disclosure”). A whistleblower as defined by this policy is an HMDCB volunteer or staff member who reports an activity that he/she considers to be illegal or dishonest to one or more of the parties specified in this Policy.

HMDCB, and any individual associated with the HMDCB, will not:

- Take any retaliatory action against an HMDCB volunteer or staff member who has made a Protected Disclosure or who has refused to obey an illegal or unethical request, including interference with their lawful employment or livelihood; or
- Directly or indirectly use or attempt to use the official authority or influence of their position for the purpose of interfering with the right of a volunteer or staff member to make a Protected Disclosure to HMDCB leadership.

Reporting Violations

All reports of suspected illegal, unethical or otherwise fraudulent conduct should provide as much specific information as possible including names, places, and events that took place, etc. Reports are encouraged to be made in writing but oral communication will also be accepted. The whistleblower is not responsible for investigating the activity or for determining fault or corrective measures.

Compliance Officer

HMDCB’s Compliance Officer is the President of the Board of Directors. The Compliance Officer is responsible for investigating and resolving all reported complaints and allegations concerning Protected Disclosures within a reasonable period of time and, depending on the nature of the complaint (as set forth below), advising the Executive Director and/or the President-Elect. In matters involving the President of the Board of Directors, the Immediate Past President will serve as the designated Compliance Officer.

Directors and Volunteers

HMDCB has an open door policy and suggests that directors and volunteers share their questions, concerns, suggestions or complaints with someone who can address them properly. If they choose to do so, in most cases they should contact the HMDCB Compliance Officer directly.

Employees and Independent Contractors

Any staff member affiliated with the HMDCB and directly employed by Association Management Center, Inc. (AMC) should follow the steps outlined in the AMC Whistleblower Policy. Independent contractors should direct questions, concerns, suggestions or complaints to the HMDCB Executive Director. In matters involving the Executive Director, the HMDCB Compliance Officer or an AMC Principal may be consulted.

The Compliance Officer shall immediately notify the Board of Directors of all reported concerns or complaints concerning Protected Disclosures. The Compliance Officer shall refer all other issues to the Executive Director, and may also engage HMDCB's designated legal counsel as the Compliance Officer deems appropriate.

Accounting and Auditing Matters

The Secretary/Treasurer shall address all reported concerns or complaints involving financial wrongdoing, corporate accounting practices, internal controls, or auditing. The Compliance Officer shall work with the Secretary/Treasurer until such matters are resolved. HMDCB's designated legal counsel may also be engaged if necessary.

Confidentiality

Protected Disclosures may be submitted on a confidential basis by the complainant or may be submitted anonymously. Reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation and to provide accused individuals their legal rights of defense.

Handling of Reported Violations

The Compliance Officer will promptly notify the sender and acknowledge receipt of a Protected Disclosure (unless such report was submitted anonymously). All reports will be investigated promptly and appropriate corrective action will be taken if warranted by the investigation. Reports and copies of Protected Disclosures shall be retained by the HMDCB in accordance with applicable record retention policies. HMDCB's designated legal counsel may also be engaged if necessary.

Accommodation of Candidates with Disabilities for Examination

Policy:

Hospice Medical Director Certification Board (HMDCB) complies with the provisions of the Americans with Disabilities Act in providing reasonable accommodations to eligible candidates. Reasonable accommodations provide candidates with disabilities a fair and equal opportunity to demonstrate their knowledge and skill in the essential functions being measured by the examination. Reasonable accommodations are approved or denied based upon the individual's specific request, disability, documentation submitted, and appropriateness of the request. Reasonable accommodations do not include steps that fundamentally alter the purpose or nature of the examination, influence the examination results, or result in an undue burden. Nothing in this policy shall be interpreted to conflict with the requirements of applicable law.

Procedure:

Verification of the disability and a statement of the specific type of assistance needed must be made in writing to HMDCB at least 45 calendar days prior to a candidate's desired examination date. Candidates must complete the Request for Special Examination Accommodations form and submit it along with documentation from an appropriate, licensed professional on the professional's letterhead. The documentation must include the candidate's name; the diagnosis of the disability; and specific recommendations for accommodation. HMDCB and Applied Measurement Professionals, Inc. (AMP) will review the submitted forms and contact the candidate regarding the decision for accommodations.

Candidates requesting special accommodations must call AMP at 888-519-9901 to schedule their examination. Wheelchair access is available at all established AMP Assessment Centers. Candidates must advise AMP at the time of scheduling that wheelchair access is necessary. Candidates with visual, sensory, physical or learning disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements which will be reviewed by AMP.

Policy

To verify the accuracy of information submitted by candidates for certification or recertification and to maintain the integrity of the certification/recertification process, HMDCB will audit 10% of randomly selected applications received for certification and 20% for recertification each year. Other applications may be audited at the discretion of HMDCB. Candidates whose applications are selected for audit will be notified via email and required to provide documentation requested. The candidate's signature on his or her Examination Application duly authorizes HMDCB to conduct such independent verification.

Candidates who fail the audit, fail to respond satisfactorily to the receipt of an audit notification, or refuse to submit to an audit will forfeit their examination fee and are subject to disciplinary action in accordance with the Misconduct Policy.

If the staff is unable to verify that the candidate meets the eligibility criteria for the examination or does verify that the candidate does not meet the eligibility criteria before the scheduled examination date, the candidate will be notified that he or she will not be allowed to take the examination.

If the staff is unable to complete the audit prior to the examination date, the candidate will be allowed to take the examination but the results will not be considered final until the audit is complete.

If the staff verifies that a candidate did not in fact meet the eligibility criteria until after the candidate has taken the examination and passed, the candidate will be notified that his or her certification has been revoked.

The staff will provide prompt notification of the results of the audit and, as appropriate, the right to reconsideration by a traceable mailing service.

REQUIREMENTS FOR CONTINUING CERTIFICATION PROGRAM POLICY

Effective: October 2017

All candidates wishing to renew their certification must meet published eligibility requirements for the Continuing Certification Program (CCP). Candidates will be considered to have met the requirements for renewal under the following terms:

1. Continuously hold a current, active, and unrestricted license to practice medicine in the United States or its territories or any province of Canada
2. Complete the HMDCB self-reflection exercise, recommended in the third year
3. At the time of application demonstrate at least 480 hours of broad hospice related activities* during the CCP period
4. Obtain 75 points of continuous learning every three (3) years; a total of 150 during the CCP period. Points may be earned through Continuing Medical Education (CME) and Professional Activities. Certificants must obtain a minimum of 54 points through CME and up to 21 points through Professional Activities every three years.
5. Conform to HMDCBs code of ethics
6. Successfully pass the hospice medical director certification CCP examination

*Hospice-related activities are defined as activities within the hospice setting as outlined in the content blueprint (eg, engagement in IDG, patient care, certification process, medication management, participating in performance improvement, and administrative activities).

It is the responsibility of the certificant to apply for renewal of certification by the required application date. HMDCB shall attempt to provide renewal notices to all HMDCB certificants prior to the expiration date of the current credentials. Failure to receive a renewal notice does not relieve the certificant of the responsibility to apply for renewal prior to the application deadline date.

All continuing medical education that links to the HMDCB Content Blueprint is accepted.

Each renewal cycle is 6 years in length, beginning the year the certification or CCP examination is completed. The cycle ends November 30 of the sixth year. During each 3-year cycle, 75 points of continuous learning are required.

Examination Fees

Certification examination and recertification fees are set by the Hospice Medical Director Certification Board (HMDCB) Board of Directors annually and are reflected in the Candidate Handbook and online application.

Payment of the examination fee may be made by credit card or check, payable to Hospice Medical Director Certification Board, and must accompany the examination application. Until complete payment has been received by HMDCB, the application will not be processed and the examination cannot be scheduled.

Rescheduling

Applicants who wish to change assessment center locations or reschedule their exam date to a different date or time within the testing window may do so once at no charge by contacting Applied Measurement Professionals at least two business days prior to the scheduled appointment.

Transfer

Examination fees may not be transferred.

Missed Appointments / No-shows / Invalid Identification

Candidates failing to appear for the scheduled appointment or who arrive more than fifteen (15) minutes late will be denied entrance to the examination and all fees will be forfeited.

Without acceptable forms of identification, candidates will not be allowed to test and will forfeit the examination fee. AMP reserves the right to deny a candidate from taking the exam if there is a question in regards to the validity of the ID(s).

Failed Audit or Determination of Ineligibility

A candidate's application will be denied and they will forfeit all fees if their application documentation does not meet the requirements, if they fail to provide requested documentation for an audit or if the candidate is deemed ineligible.

Withdrawal

Candidates who wish to withdraw from the examination must contact the HMDCB office in writing. Telephone requests will not be honored. Exam withdrawals received by the HMDCB office at least 30 days prior to the examination window will receive a refund of their application fee minus a \$250 administrative fee. Exam withdrawals received by the office less than 30 days prior to the exam receive no refund. Refunds will be issued directly to the party who paid the fee.

Requirements for Initial Certification

All candidates for certification must meet published eligibility requirements for certification.

Candidates will be considered to have met the requirements for certification and receive the designation for initial certification under the following terms:

1. Hold a current, unrestricted license to practice medicine in the United States, its Territories or Canada
2. At the time of application demonstrate at least 400 hours of hospice related activities* during the previous five (5) years
3. Two (2) years work experience in a hospice setting during the previous five (5) years

OR

Current, valid board certification in hospice and palliative medicine through the American Board of Hospice and Palliative Medicine, the American Board of Medical Specialties or the American Osteopathic Association (AOA),

OR

Successful completion of a 12 month clinical hospice and palliative medicine training program accredited by Accreditation Council for Graduate Medical Education or AOA.

4. Conform to HMDCBs code of ethics
5. Successfully pass the hospice medical director certification examination

Hospice related activities include activities within the hospice setting as outlined in the content blueprint (e.g. engagement in IDG, patient care, certification process, medication management, participating in performance improvement, and administrative activities).

Grandfathering

In the exceptional case of members of the 2013 Exam Development Committee (EC), the Board of Directors will consider granting certification as defined here.

Because of their access to the examination forms, members of the EC are not eligible to take any form of the certification examination for certification during their term and for two (2) years following completion of their term.

Members of the EC may be considered to have met the requirements for certification and receive the designation for initial certification under the following terms:

1. Be considered committee members in good standing by attending all committee meetings during their term and contributing to the advancement of the committees' charges
2. Adhere to the HMDCB Conflict of Interest Policy during their term on the committee

3. Meet all other eligibility requirements for certification
4. Receive approval by the Board of Directors

If granted the credential by the grandfathering process, members of the EC must successfully complete recertification in order to maintain their certification on the schedule required for all other certificants.

This section should be reviewed following the launch of the initial examination or 2014.

Policy

In the interest of protecting the integrity of the Hospice Medical Director Certification Board (HMDCB) and its certification credential, the HMDCB may investigate any allegation of one or more of the following and may take whatever action is appropriate, including but not limited to denial of eligibility to take the certification examination or renew certification or revocation of certification:

- a. Revocation, suspension, probation, voluntary surrender, or other limitation imposed on the individual's medical license by the jurisdiction's licensing authority.
- b. Misrepresentation of HMDCB certification or other unauthorized use of the HMDC™ credential. Unauthorized use is defined as the use of the HMDC™ credential by a non-certified individual in a way that would lead a third party to believe that the individual is certified.
- c. Failure to respond satisfactorily to an audit or falsification of an application for the examination or for renewal of certification or any other material information requested by the HMDCB.
- d. Failure to fulfill the requirements for renewal of certification before the specified deadline.
- e. The giving or receiving of assistance in the examination, as evidenced by observation and/or statistical analysis of an applicant's answers, or any irregular behavior during the examination process or violation of testing procedures.
- f. The unauthorized possession, reproduction, or disclosure of any HMDCB examination-related materials before, during, or after the examination.
- g. Any violation of the Code of Professional Conduct by a HMDC™ applicant or certificant.

Reconsideration and appeal procedures are available to individuals who wish to contest an adverse decision on the part of the HMDCB as outlined in the Reconsideration and Appeals Policy.

Procedure

The HMDCB may act upon any credible evidence of misconduct. Complaints of misconduct are accepted only if signed and submitted in writing. Upon receipt of sufficient evidence, the HMDCB will determine whether disciplinary action against the subject individual is warranted.

- If after investigation the HMDCB determines that disciplinary action is not warranted, the matter will be dismissed and a record of the dismissal, along with the reason, will be retained in accordance with the section on Records below.

- If a non-certified individual is found to be using the HMDCTM credential, he or she will be ordered to cease and desist at once and provide evidence that he or she is no longer using the credential and has provided notice of such to all third parties to whom the individual may have provided false information regarding his or her certification status. The HMDCB may take appropriate action which may include the following:
 1. Notify the medical board(s) in the jurisdiction(s) where the individual is licensed or claims licensure.
 2. Notify the appropriate authority(s) in the jurisdiction(s) in which the incident(s) occurred.
 3. Notify any third parties of whom the board may be aware and to whom the individual may have provided false information.
- If after investigation the HMDCB determines that disciplinary action against a certificant or applicant appears to be warranted, the HMDCB will send written notice to the individual by traceable mailing service not less than 30 days prior to the meeting of the HMDCB, by telephone conference call or in person, at which the matter will be considered. Such notice will:
 - a. set forth the date, time, and place of the meeting;
 - b. inform the individual that the HMDCB will consider possible disciplinary action against him or her at the meeting and include a statement regarding the basis for the action; and
 - c. invite the individual to submit written evidence regarding the matter being considered and to attend the meeting or conference call in person or by representative to set forth why disciplinary action against him or her should not be taken.

The HMDCB President will preside at a hearing of the HMDCB. Both the individual and the HMDCB shall have the right to be represented by counsel at such meeting. After the hearing, the HMDCB Board of Directors may take disciplinary action with the approval of a majority of its members for any of the causes set forth above. The HMDCB shall send prompt notification by traceable mailing service of such disciplinary action and the reason(s) for the decision and the right to reconsideration.

Records

The HMDCB shall keep a record of the disposition of all disciplinary actions initiated and the reasons for the greater of 7 years following the date on which the final disposition occurred or the period during which the individual is not certified.

Confidentiality

The complainant will be required to authorize the disclosure of all information reasonably related to the complaint to the party accused of misconduct. No information about the proceedings or outcome will be shared with the complainant.

All information considered in disciplinary proceedings, regardless of whether such proceedings result in disciplinary action, shall be confidential except as required by due process or process of law.

Waiting Period

The HMDCB may impose a waiting period of up to and including 5 years after which an individual who has engaged in unauthorized use of the credential or against whom disciplinary action was taken may submit a new application for certification.

Policy

Any aggrieved individual may appeal a decision by the Hospice Medical Director Certification Board (HMDCB) to deny eligibility to take the certification examination or renew certification or to revoke certification, but not challenge the requirements themselves. Failure of an examination is not grounds for appeal. The HMDCB reconsideration and appeal procedures are not available for challenges to the content specifications of the examination, the methodology used to establish the scores reported to the candidate, or the methodology used to establish or apply minimum passing standard for the examination.

Process

The first step in the appeals process is a reconsideration of the decision by the HMDCB. If an adverse decision is reaffirmed in the reconsideration process, or the issue is not otherwise resolved to the satisfaction of the aggrieved individual, he or she may file an appeal.

The second step in the appeals process is handled by an Appeals Committee that is appointed by the President of the HMDCB for this purpose. The committee is composed of three (3) individuals. The Appeals Committee shall elect a Chair from among its members. No member of this committee may have any current or prior relationship with the appellant or any other conflict of interest.

Reconsideration Procedure

A request for reconsideration may be filed by an aggrieved individual within thirty (30) days of HMDCB's decision by submitting a written request to the HMDCB Executive Director by a traceable mailing service. Requests for reconsideration must include the reasons that the action or decision is alleged to be improper, inappropriate, or erroneous; copies of all relevant material supporting the reconsideration request; and a description of the corrective action sought. Failure to request reconsideration within 30 days nullifies the right to reconsideration or appeal.

The HMDCB Board of Directors shall confirm, modify, or reverse its previous decision by a simple majority vote. The HMDCB shall send prompt notification by a traceable mailing service of its decision and the reason(s) for the decision and the right to appeal.

Appeals Procedure

An appeal may be filed by an aggrieved individual within thirty (30) days of receipt of HMDCB's reconsideration decision by submitting a written request by traceable mailing service to the HMDCB Executive Director. Requests for appeal must include a description of the action or decision being appealed and specific reasons supporting the appeal. No new evidence may be presented by the appellant or heard by the Appeals

Committee unless the appellant shows good cause why such evidence was not previously submitted. Failure to request appeal within 30 days nullifies the right to appeal.

The Appeals Committee will consider the request for review and appeal. The Appeals Committee will send written notice to the appellant by traceable mailing service not less than 30 days prior to the meeting of the Appeals Committee. Such notice will set forth the date, time, and place of the meeting. The Appeals Committee may meet by telephone conference call or in person, at which the matter will be considered.

The appellant shall have the opportunity to present oral testimony in his or her defense to the Appeals Committee at their scheduled meeting or conference call. The President of the HMDCB Board of Directors or his or her designee shall have the opportunity to respond to the appeal petition by presenting an oral or written statement to the HMDCB Appeals Committee. Both the appellant and the Appeals Committee shall have the right to be represented by counsel at such meeting.

The HMDCB Appeals Committee shall consider the appellant's petition and any statement of the HMDCB Board of Directors, and may confirm, modify, or reverse the HMDCB's decision to take disciplinary action by a simple majority vote.

The Appeals Committee Chair shall send prompt notification of the Appeals Committee's decision, including the reason(s) for the decision, in writing by traceable mailing service to the appellant, with a copy to the President of the HMDCB Board of Directors.

The decision of the Appeals Committee is final and is not subject to reconsideration or reversal.

Every five years, the HMDCB will evaluate perceived changes in the field and determine whether a practice analysis should be conducted or delayed by one year. Once determined, the HMDCB will appoint a task force to conduct a practice analysis or use an equivalent methodology to ensure that the examination reflects current practice. The task force will represent the diversity of the field in geographic location, practice setting (e.g., tax status, size, location and academic affiliation), and training and certification.

At least one year in advance of a practice analysis, HMDCB will initiate communication with the testing company to review current testing standards, determine the appropriate scope and methodology to be used to establish exam content validity, and negotiate a contract for service.

Reporting of Examination Results

Effective: July, 2013
Revised: February, 2014

All HMDCB examinations are scored by the contracted testing agency. After the testing agency and HMDCB have completed all scoring and validation processes, candidates will be notified of their results in writing only via mail sent to their designated address.

Candidates who pass the examination will receive a certificate. HMDCB will provide all candidates their score in scaled score units compared to the passing score and an analysis of performance according to major content areas on the examination. This is intended to help the candidate prepare for subsequent attempts to complete the certification process or recertification.

Examination results will not be provided over the telephone, facsimile or electronic mail by the testing agency or HMDCB under any circumstances.

Results are never released to anyone but the candidate unless express written consent has been given.

Retesting Policy

Effective: September, 2013

Candidates who fail the HMDCB examination may retake it upon submission of a new application, along with payment of exam fees in effect at that time. Eligible candidates may test one time per calendar year.

Hospice Medical Director Certified (HMDC™) is the professional designation granted by the HMDCB. The HMDC™ credential signifies that an individual has completed the requirements for certification or renewal of certification. The HMDCB grants limited permission to individuals who have met all of the certification or renewal of certification requirements and received such notification from the HMDCB to use the HMDC™ designation that has been granted to them. Use of the HMDC™ credential by individuals who have not been granted certification or renewal of certification, or who have failed to properly maintain certification in good standing is prohibited. Improper use of the credential may result in disciplinary action.