[Policy Number]: CORPORATE COMPLIANCE PLAN - Overview

Category: Corporate Compliance
Department: XXXXXXXXXXXXXXXXX
Effective Date: XXXXXXXX
Last Revision Date(s): 5/10/2019

POLICY STATEMENT

As a not-for-profit health and human resources organization dedicated to improving the everyday lives of people with developmental disabilities, the [Chapter] is committed to complying with the rules and regulations of federal, state and local government, including but not limited to those promulgated by the U.S. Centers for Medicare and Medicaid Services (“CMS”), Office of the Medicaid Inspector General (“OMIG”) and the New York State Office for People with Developmental Disabilities (“OPWDD”). The [Chapter] seeks to provide a work environment where high standards of ethical and legal behavior are recognized and practiced.

Because Medicaid funding makes up a significant portion of the [Chapter’s] operating budget, we are under ongoing scrutiny to ensure that our services are appropriate, timely and properly reimbursed. As Medicaid providers, we are subject to the federal and state laws that govern this program.

In developing this Corporate Compliance Plan, we have relied upon a number of resources including The Arc New York’s Corporate Compliance Plan and numerous government issuances. In summary, in order to demonstrate that we have developed an effective compliance program, we must demonstrate that we have (1) developed standards and procedures in order to reduce the prospect of improper conduct; (2) designated a high-level individual to oversee compliance; (3) not delegated authority to individuals who have exhibited a propensity for misconduct; (4) taken steps to communicate the standards to our employees and agents; (5) engaged in auditory and monetary compliance and established a reporting system in which employees can report potential misconduct confidentially and/or anonymously, without fear of retribution; (6) taken appropriate disciplinary measures against individuals found to have violated the Corporate Compliance Plan or related policies and procedures; and (7) taken reasonable steps to respond and prevent future violations.
The Corporate Compliance Plan was instituted by the Board of Directors on [insert date Corporate Compliance Plan was adopted]. Our Corporate Compliance Plan also supports and complies with the NYSARC Board of Governors’ policy requiring that each chapter of NYSARC implement an effective Corporate Compliance Plan.

The [Chapter] developed this Corporate Compliance Plan, including our Code of Conduct and a wide array of policies and procedures that address key risk areas, to guide our best efforts to operate under ethical and legal standards. The [Chapter] expects that all aspects of consumer care and business conduct will be performed in compliance with this Corporate Compliance Plan, professional standards and applicable governmental laws, rules and regulations.

PROCEDURE

Element I: Corporate Compliance Plan - Policies and Procedures

Our compliance philosophy is expressed within this Corporate Compliance Plan and related documents, including our Code of Conduct, our policies and procedures related to compliance, clinical operations, human resources and fiscal management. Collectively, these documents establish standards and procedures that must be followed by the [Chapter] employees, volunteers and, as applicable, independent contractors and the Board. Understanding and following these standards will reduce the prospect of unethical, illegal and criminal conduct.

A. Code of Conduct

The purpose of the [Chapter’s] Code of Conduct is to describe compliance expectations and provide guidance to all employees, independent contractors and the Board to assist in carrying out the day-to-day responsibilities within legal and ethical standards.
The [Chapter] Code of Conduct is a set of guiding principles that are more completely developed in the Corporate Compliance Plan and its related policies and procedures. Our Code of Conduct, which reflects our tradition of caring, provides guidance to ensure our work is done in an ethical, legal manner. Our Code of Conduct emphasizes the shared common values and culture we seek to cultivate that guides our actions each day.

The [Chapter] requires that each employee, independent contractor and Board member sign a written acknowledgment that he or she understands and will follow the [Chapter] Code of Conduct.

B. Policies and Procedures

The [Chapter] has developed and will continue to develop policies and procedures to implement the Corporate Compliance Plan. These policies and procedures establish the activities and processes that the [Chapter] will undertake to operate in conformance with all applicable laws and regulations. The [Chapter] will review, revise and develop new policies and procedures, as necessary, to ensure that the [Chapter’s] operations are conducted with “best practices.” The policies and procedures of not only the health regulatory components of the [Chapter], but also those related to human resources, environmental health and safety and financial operations shall apply broadly to each employee through this Corporate Compliance Plan.

Element II: Compliance Program Structure and Oversight Responsibilities

The [Chapter] is committed to the operation of an effective compliance program and has assigned compliance oversight responsibilities to individuals at the management level. Individuals with day-to-day compliance oversight authority occupy high levels in the [Chapter’s] organizational structure, including a Compliance Officer, and are
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empowered to implement the Corporate Compliance Plan, investigate compliance concerns, report compliance concerns directly to those in higher positions of authority, up to and including, the [President], the [Chapter] Board of Directors and the [Executive Director]. The person vested with this responsibility should not hold a position in [the Chapter]’s legal or financial departments and receives annual performance evaluations that assess the duties the CCO is to perform.

We have established a Corporate Compliance Committee comprised of key management and operations staff and [Chapter] leadership with responsibility to meet regularly to advise the Compliance Officer, to identify and resolve compliance concerns and to continue to improve and refine the [Chapter’s] overall compliance activities. The [Chapter] Board of Directors will be an integral part of the Corporate Compliance Plan and will be knowledgeable about the content and operation of the [Chapter’s] Corporate Compliance Plan and will exercise oversight with respect to the implementation and effectiveness of the Corporate Compliance Plan.

Element III: Education and Training

The Board of Directors, all employees and, as applicable, independent contractors, must be informed about regulatory requirements and [Chapter] policies and procedures that implement these requirements, as they apply to each individual. Therefore, the [Chapter] will adequately train the Board, high-level personnel, substantial authority personnel, employees and independent contractors on the organization’s standards and procedures. The [Chapter] will continuously identify training topics, including those arising as a result of self-monitoring, audits by regulatory agencies and regulatory developments. The [Chapter] will provide refresher training for employees on, at minimum, an annual basis.

New employees will receive training in the [Chapter] Code of Conduct, this Corporate Compliance Plan and those policies and procedures relevant to their job duties as part of an orientation program. The [Chapter] will tailor its training based on the roles
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and responsibilities of each group of individuals and in a manner that the individual can understand.

Element IV: Communication to the Compliance Officer

Employees, volunteers and, as applicable, independent contractors have a responsibility to report through our compliance processes any activity by any colleague, clinician, independent contractor or client that appears to violate applicable laws, rules, regulations, accreditation standards, standards of medical practice or the Corporate Compliance Plan. We encourage a culture in which all parties responsible to report compliance issues feel free to report behaviors or actions which they believe should be reported. Therefore, the effectiveness of our Corporate Compliance Plan depends on the willingness and commitment of the parties in all parts and at all levels of the [Chapter] to step forward, in good faith with questions and concerns. Likewise, we are committed to making every effort to maintain, within the limits of the law, the confidentiality of the identity of any individual who reports a concern in good faith. The [Chapter] will ensure that there is at least one anonymous and confidential method of communicating a compliance concern.

It is an expected good practice, when one is comfortable with it and thinks it is appropriate under the circumstances, for concerns to be raised first with a supervisor. If this is not comfortable or not a viable option, then parties are encouraged to contact the Corporate Compliance Hotline at [insert number] where reports may be made confidentially.

Any party who intentionally makes a false accusation with the purpose of harming or retaliating against a colleague will be subject to appropriate disciplinary action.
Element V: Disciplinary Policy and Procedures

Failure of employees to comply with the Corporate Compliance Plan, the Code of Conduct, the Medicaid program and/or laws and regulations applicable to the [Chapter] and our operations may result in disciplinary action. Retraining of staff will occur if misconduct is based on a lack of awareness or understanding of a regulatory obligation, policy or procedure. Resolution of disciplinary issues will be determined through the Corporate Compliance Plan structure in direct cooperation with the appropriate manager and the Compliance Officer and, as appropriate, the Executive Director of the [Chapter]. The degree of discipline may range from counseling, verbal warnings, written warnings, recommended change or discontinuation of privileges, termination of a contract, termination of employment or removal from a particular position or function - and the Chapter will endeavor to be consistent in its approach to discipline with the same disciplinary action for similar offenses. The [Chapter] will also seek to reward employees who foster a culture of compliance.

Element VI: Identification of Risk Areas

The [Chapter] is committed to fostering our culture of compliance through the implementation of a system or method for the routine identification of compliance risk areas in order to detect, correct and prevent non-compliance behaviors. Through the process of our corporate compliance reporting structure and the articulation of compliance-related roles and responsibilities at every level of the [Chapter's] operations, detection and correction of problems is expedited. If an internal investigation substantiates a reported violation, then it is our policy to engage in a two-fold process: (1) to initiate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary; and (2)
implementing systemic changes to prevent a similar violation from recurring in the future.

The [Chapter] is committed to routinely conducting internal audits of concerns that have regulatory or compliance implications. Appropriate individuals in key management positions will be responsible for engaging in self-monitoring processes conducted within specific departments/divisions. We believe that a combination of various compliance reviews will permit us to maintain a consistent conformity to relevant laws and regulations, while fulfilling a commitment to identify and share best practices.

**Element VII: A System for Responding to Compliance Issues**

The [Chapter] maintains a system for responding to compliance issues in order to ensure appropriate response to compliance issues, appropriate investigation of compliance issues, appropriate resolutions of compliance issues, and evidence of the proper reporting of compliance issues. This system includes the implementation of procedures, policies, and systems as necessary to reduce the potential for recurrence. The [Chapter] also maintains a system that reports compliance issues in a manner consistent with applicable laws and regulatory requirements.

**Element VIII: A Policy of Non-Intimidation and Non-Retaliation**

The [Chapter]'s commitment to good-faith participation in the compliance program is indicated through written non-intimidation and non-retaliation policies. These policies are in accordance with NYS Labor Law sections 740 and 741 in connection with non-intimidation and non-retaliation expectations.