



29 British American Boulevard, 2<sup>nd</sup> Floor  
Latham, NY 12110  
518-439-8311  
thearcny.org

## [Policy Number]: Documentation of Compliance Activities

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Category: Corporate Compliance      Effective Date: XXXXXXXX  
Department: XXXXXXXXXXXXXXXXXXXXXXXX      Last Revision Date(s): 7/6/2020

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### POLICY STATEMENT

Documentation of actions taken under the [Chapter's] Corporate Compliance Plan is a key factor in the effectiveness of the Plan. The [Chapter] must be able to demonstrate that actions that are taken throughout the development and implementation of the Compliance Plan are reasonable in the event that the [Chapter] is investigated by outside regulatory bodies, such as the state of New York Medicaid program, the Office for People with Developmental Disabilities ("OPWDD"), the Attorney General's Office, the federal Centers for Medicare and Medicaid Services ("CMS") or the Office of the Inspector General ("OIG").

This policy shall apply to all documentation referenced under each policy and procedure of the Corporate Compliance Plan and other [Chapter] policies, as described in detail in this policy.

### PROCEDURE

#### A. Maintenance and Handling Procedures for Documents

1. The Compliance Officer will create and maintain, or oversee the maintenance of, all documentation of the Corporate Compliance Plan, including the Corporate Compliance Plan Policies and Procedures, the date on which these policies were adopted and updated, if applicable. The Compliance Officer will follow the [Corporate Compliance Policy on Policy Development] in developing, maintaining and disseminating policies and procedures.
2. The Compliance Officer will maintain a log of all compliance-related complaints of which he or she is aware. Each version of the Compliance Log



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should be dated and updated as the complaint resolution process progresses. The Compliance Log will be presented to the Board of Directors at scheduled board meetings and will be made available upon request of the Executive Director, any member of the Board of Directors or any member of the Corporate Compliance Committee. A sample Compliance Officer Log is attached to this Policy as **Exhibit A**.

3. Activities related to the Corporate Compliance Plan may result in the creation or receipt of documents that are of a confidential nature. These may include business documents, investigation materials, or patient records that must be protected from general disclosure or distribution. The Compliance Officer, in consultation with Inside Counsel or Outside Counsel, where necessary, will determine which documents should be designated and maintained as confidential documents. Each page of these documents will be labeled CONFIDENTIAL/DO NOT DUPLICATE. If a legend is used, then the legend should be placed away from the margins where it could be lost in the duplication process.
4. Many of the records that will be generated by the Compliance Officer or obtained in the course of [Chapter] business will be of a confidential nature as the result of a communication with legal counsel. Those documents will be marked on each page: "CONFIDENTIAL ATTORNEY-CLIENT PRIVILEGED COMMUNICATION - NOT FOR REDISCLOSURE." The legend will be placed away from margins where it could be lost in the duplication process.
5. All efforts will be made to refrain from duplicating documents that are Confidential and/or Attorney-Client Privileged.
6. All documents that are Confidential and/or Attorney-Client Privileged will be maintained separately in secured file cabinets. The Compliance Officer will create and maintain a list of which Chapter employees may access the Confidential and Attorney-Client Privileged documents.



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### B. Documents to be Maintained/Indexed

The Compliance Officer and other [Chapter] staff with compliance-related responsibilities will maintain the following types of compliance documents. The following list of compliance documents is illustrative only and is not an exhaustive list:

#### 1. Program Development

- a. Board Resolution(s) and/or minutes establishing the Corporate Compliance Plan, the selection of the Compliance Officer and the Corporate Compliance Committee, and the ongoing operation of the Corporate Compliance Plan.
- b. Corporate Compliance Plan implementation schedules/work plans.
- c. Results of compliance risk assessment, if any.

#### 2. Written Policies and Procedures/Standards of Conduct

- a. Past and current versions, including dates reviewed, revision dates and responsible parties of all Corporate Compliance Plan Policies and Procedures.
- b. The [Chapter] Code/Standards of Conduct.

#### 3. Corporate Compliance Officer and Corporate Compliance Committee

- a. Names, titles, and backgrounds for all members of the Corporate Compliance Committee, including the Compliance Officer.
- b. Job descriptions for the Corporate Compliance Officer and any compliance staff.



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- c. Agendas and records/minutes of Corporate Compliance Committee meetings.
- d. Copies of reports made to the Board and/or [Executive Director] by the Corporate Compliance Officer and the Corporate Compliance Committee.
- e. Copies of all workplans.

#### 4. Human Resources

- a. Human Resource and Corporate Compliance Policies and Procedures regarding the hiring of new personnel.
- b. Documentation evidencing each individual's background check, including documentation reflecting individuals refused employment based upon background check findings.
- c. The signed acknowledgement forms of the Code of Conduct for each employee and any signed acknowledgement of specific policies and procedures, when applicable.
- d. Information collected during exit interviews regarding compliance issues.

#### 5. Compliance Training

- a. Information regarding the development and roll-out of the training program on the Corporate Compliance Plan.
- b. Information regarding the development and implementation of specialized training for certain groups of personnel.
- c. Information regarding attendance at training sessions (e.g., sign-in sheets).



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- d. Agendas and contents of training, including length of session and instructor.
  - e. Copies of all training handout materials and instructor guides.
  - f. Copies of sample quizzes or tests administered.
6. Dissemination of Compliance-Related Materials
- a. Copies of all notices sent to the Board, employees, independent contractors, agents and vendors regarding the [Chapter] Corporate Compliance Plan and other compliance-related topics.
  - b. Copies of all newsletters and other company publications that address the Corporate Compliance Plan.
7. Monitoring and Auditing
- a. Information regarding the number and frequency of audits of claims and documentation requirements.
  - b. Information regarding any risk assessments or benchmarks and progress made on these assessments.
  - c. Information regarding the credentials of individuals and entities who perform audits on behalf of the [Chapter], if outsourced.
  - d. Information (e.g., job titles, other credentials) regarding the individuals that make up the audit team, if audits are conducted internally.



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### 8. Disciplinary Actions

- a. Copies of all disciplinary and/or corrective action policies and procedures
- b. Records of all compliance-related disciplinary actions taken, including any individuals terminated for violations of company policy

### 9. Response to and Prevention of Detected Offenses

- a. Reports on the investigations conducted into areas of potential non-compliance
- b. Information regarding voluntary self-disclosures and overpayment returns.

### 10. Contacts with the Government and Payors

- a. Log of all contacts made between the [Chapter] and any government authority including, but not limited to, NY Medicaid, OPWDD, CMS and the OIG. The log will include the name, title, and agency of the person spoken to, the date of the call, the matter referenced, and the response received from the individual along with information regarding the source of the response. Additional details are provided in the [Corporate Compliance Policy on Responding to Government Investigations].
- b. All compliance correspondence to/from a government authority.
- c. Documentation of any response to a request from a government authority for documents, including a summary of any investigation conducted by the [Chapter] prior to responding to the government authority.



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### 11. Contracts with Independent Contractors, Agents and Vendors

- a. Copies of all written agreements.
- b. The signed acknowledgement forms of the Code of Conduct for each agent or vendor and of specific policies and procedures, when applicable.



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Exhibit A

**[CHAPTER] CORPORATE COMPLIANCE OFFICER LOG**

*Confidential – Do Not Duplicate \* Confidential – Do Not Duplicate*

Date of Complaint/ Report	Case ID	Type of Contact (e.g., Direct, Compliance Hotline, Manager)	Follow-Up Investigation	Forward to Outside Counsel Yes/No (Date, if Applicable)	Corrective Action Taken