

COPPER COUNTRY MENTAL HEALTH SERVICES BOARD

POLICY AND PROCEDURE

DATE: May 29, 2019 Corporate Compliance.P4

RESCINDS: May 25, 2016

CATEGORY: Administration (Corporate Compliance)

SUBJECT: Corporate Compliance

POLICY: Copper Country Mental Health Services Board (CCMHS) is dedicated to the delivery of behavioral health care in an environment characterized by strict conformance with the highest standards of accountability for administration, clinical, business, marketing and financial management. CCMHS' leadership is fully committed to the need to prevent and detect illegal or unethical activity and/or fraud, waste and abuse and therefore, to the development of a formal corporate compliance program to ensure ongoing monitoring and conformance with all legal and regulatory requirements. Further, CCMHS is committed to the establishment, implementation and maintenance of a corporate compliance program that emphasizes:

- A. Prevention of wrong-doing - whether intentional or unintentional,
- B. Immediate reporting and investigation of questionable activities and practices without consequences to the reporting party, and
- C. Timely correction of any situation, which puts the organization, its leadership or staff, funding sources or consumers at risk.

PURPOSE: The purpose of this policy is to:

- A. Articulate CCMHS' commitment to a process that meets the Federal Sentencing Guidelines, including the recommendations and standards promulgated by the Health and Human Services (HHS) Office of Inspector General (OIG) for identifying and mitigating risk including but not limited to, fraud, waste, or abuse and improving internal controls; and,
- B. To effectively prevent and detect criminal conduct and to reduce the likelihood of being found to have

recklessly disregarded or deliberately violated the law; and

- C. Ensure compliance with all applicable Federal and State Laws, Guidelines, Rules and Regulations including NorthCare Network's Compliance policies and procedures.

#### DEFINITIONS

Abuse - means provider practices that are inconsistent with sound fiscal, business, or clinical practices, and result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards of care. It also includes beneficiary practices that result in unnecessary cost to the Medicaid program. (42 CFR § 455.2)

Corporate Compliance - Corporate compliance is defined as following the law and the organization's policies and procedures. The purpose of corporate compliance activity is to prevent fraud, abuse, waste and unethical conduct.

Ethical Conduct - Ethical conduct is defined as working in a manner that is honest, legal and respectful of others. Ethical conduct also describes behavior that falls within the boundaries established by the organization's mission, vision and values statements.

Fraud (Federal False Claims Act) - means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to him/herself or some other person. It includes any act that constitutes fraud under applicable Federal or State law including but not limited to the Federal False Claims Act and the Michigan False Claims Act. (42 CFR § 455.2)

Waste - means overutilization of services, or other practices that result in unnecessary costs. Generally, not considered caused by criminally negligent actions but rather the misuse of resources.

#### PROCEDURE:

- I. By formal resolution, the Board of Directors has delegated overall responsibility for the Corporate Compliance Program to the Executive Director. The Executive Director will formally designate a Corporate Compliance Officer and Compliance Committee, monitor CCMHS's corporate compliance program and provide periodic and regular reports to the Board of Directors on matters pertaining to the program.
- II. The Corporate Compliance Officer (CCO) shall:

- A. Chair the organization's Corporate Compliance Team and serve as CCMHS's primary point of contact for all corporate compliance issues, including scheduling team meetings, reporting on team activities and making recommendations to the Executive Director and/or Board of Directors as required;
- B. Develop, implement and monitor - on a regular and consistent basis- CCMHS's Corporate Compliance Plan, including all internal and external monitoring, auditing, investigative and reporting processes, procedures and systems;
- C. Prepare, submit and present periodic reports to the Executive Director and/or Board of Directors as may be required to provide clear communication to the organization's leadership for corporate compliance oversight;
- D. Identify and review periodic reports to ensure overall compliance of the organization;
- E. Implement and publicize a reporting process that encourages employees and contract providers to report compliance-related concerns;
- F. Maintain a system to document and track reported compliance issues and inquiries;
- G. Objectively, uniformly, and consistently coordinate and/or complete review and/or investigations of suspected fraud, waste, and abuse or reported violations of applicable law, regulations, guidelines and policy;
- H. Ensure documentation of all actions taken in response to a compliance issue report, including any steps taken to address identified improper conduct, if any;
- I. Inform complainant of expectations of a timely response, confidentiality, non-retaliation, and progress reports regarding where in the process the review/investigation is;
- J. Ensure proper follow-up on resolution of compliance issues and concerns; and
- K. Ensure, in all situations where it is appropriate, that CCMHS initiates voluntary disclosure or reporting of violations of civil, criminal, or administrative law to appropriate third-party law enforcement or regulatory agencies. Self-Disclosure must follow the Office of Inspector General's Provider Self-Disclosure Protocol (42 USC 1320a-7b(f)) and the requirements of the Federal False Claims Act, (31 USC 3729-3733).

- III. If a confirmed compliance issue is determined and, if after consultation with legal counsel, it is determined a violation of a civil or criminal, federal or state law has occurred, the violation will be reported to the appropriate government agency as soon as possible.
  
- IV. The CCO shall submit an annual report to the Quality Improvement Committee, the Executive Director and Board of Directors. Annual reports will, include at a minimum:
  - A. A summary of all allegations, investigations and/or complaints processed in the preceding 12 months in conjunction with the corporate compliance program;
  - B. A complete description of all corrective action(s) taken;
  - C. Any recommendations for changes to the organization's policies and/or procedures; and
  - D. Evaluation of the effectiveness of the Corporate Compliance Plan.
  
- V. In the performance of his/her duties, the CCO shall have direct and unimpeded access to the Executive Director, Board of Directors and the organization's accounting firm and/or legal counsel for matters pertaining to corporate compliance.

CROSS REFERENCE: Board of Directors Corporate Compliance Resolution  
CCMHS Policy - No-Reprisal System for Reporting Suspicious Activities  
CCMHS Policy - Compliance Committee  
CCMHS Policy - Deficit Reduction Plan  
CCMHS Policy - Corporate Compliance Investigations  
CCMHS Corporate Compliance Plan  
NorthCare Network Compliance Policies and Procedures