



North Country Home Services
Corporate Compliance
Policy/Procedure

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Compliance Program – Overview

PURPOSE

This policy and procedure describe North Country Home Services' (NCHS) Compliance Program. NCHS developed this policy and procedure, including our Standards of Conduct, to provide a framework of effective internal controls that promote adherence to applicable federal, state, and local statutes, rules, regulations and Medicaid Program requirements, as well as private health plans and New York State Department of Health Licensed Home Care Services Agency (LHCSA) Regulations.

POLICY

NCHS' Board of Directors adopted the Compliance Program in the year 2006 and reviews and approves all policy updates, additions and revisions annually.

NCHS has developed a mission statement and philosophy articulating a commitment to high ethical standards. (Policy 1001 Mission Statement, Policy 1002 Philosophy, Policy 1003 Code of Conduct). NCHS is committed to complying with the statutes, rules, and regulations of the federal, state, and local governments, including but not limited to those promulgated by the U.S. Centers for Medicare and Medicaid (CMS) , Office of Medicaid Inspector General (OMIG) and the New York State LHCSA regulations.

NCHS supports a work environment where high standards of ethical and legal behavior are recognized and practiced. NCHS expects that all aspects of business activity will be performed in compliance with this policy and procedure, professional standards and applicable statutes, rules and regulations. To achieve these standards and expectations, it is the policy of NCHS to adopt and implement a compliance program.

SCOPE

This policy and procedure are applicable and made available/ accessible to all affected individuals a specific exemption is noted within this policy.



REFERENCES

NCHS is governed by several federal, state, and local statutes, rules, and regulations, however, the focus of this policy is on those pertaining to participation in and compliance with the Medical Assistance Program (Medicaid and Medicare) and New York State Licensed Home Health Care Regulations (Part 765 of Title 10 and Article 36 of Public Health Law). Applicable statutes, rules and regulations used to design this policy include, New York State Social Services Law (SOS) 363-d and New York State Title 18 regulations, specifically those under Part 521 that establishes requirements to adopt and implement programs designed to detect and prevent fraud, waste , and abuse in the Medicaid Assistance program.

DEFINITIONS

Affected Individuals: all persons who are affected by the required provider's risk areas including the required provider's employees, the chief executive and other senior administrators, managers, contractors, agents, subcontractors, independent contractors, and governing body and corporate officers. (N.Y. Comp. Codes R & Regs. Title. 18, 521- 1).

RESPONSIBILITIES

This policy and procedure are overseen by NCHS' designated Compliance Officer (CO) and Corporate Compliance Committee CCC). The CO and CCC are responsible for monitoring implementation of the Corporate Compliance policy and procedure, reviewing and revising as necessary; but no less frequently than annually.

PROCEDURES

NCHS fulfills our policy of adopting and implementing a compliance program, structured around the following principles:

- (1) Written policies, procedures, and standards of conduct.
- (2) Designation of a CO who is versed with the day-to-day activities of the compliance program and establishment of an active CCC consisting of senior managers.
- (3) Establishment and implementation of an effective compliance training and education program for all affected individuals;
- (4) Establishment and implementation of effective lines of communication for all affected individuals to report compliance concerns and/or potential violations confidentially and /or anonymously, without fear of intimidation or retaliation.



- (5) Establishment of disciplinary standards to address potential compliance violations and encourage good faith participation in the compliance program.
- (6) Engaging in routine auditing and monitoring of compliance risks to NCHS
- (7) Establishing and implementing procedures and systems for promptly responding to compliance issues, including any issues identified in the course of an internal or external audit.

Written Policies, Procedures, and Standards of Conduct

At a minimum NCHS maintains written policies and procedures outlining the operation of the Compliance Program inclusive of the aforementioned principles, confidentiality practices, and a commitment to an environment of non-intimidation and non-retaliation. NCHS reviews, revises, and develops, as appropriate, new compliance program policies and procedures, annually and as necessary, to ensure the NCHS' Compliance Program activities are conducted effectively and consistent with applicable statutes, rules and regulations.

Standards of Conduct

NCHS' compliance expectations are embodied within written Standards of Conduct (Policy 7441 Standards of Conduct). At a minimum, the Standards of Conduct reaffirm our commitment to conducting business in an ethical and legal manner. NCHS expects that all affected individuals act in accordance with the Standards of Conduct including refusal to participate in unethical or illegal conduct, and a commitment to report any unethical or illegal conduct to the CO. Failure to adhere to the Standards of Conduct will result in escalating disciplinary actions as described in the written policy on disciplinary standards. Conduct that is intentional or reckless may result in more severe disciplinary action.

NCHS requires that all affected individuals sign a written acknowledgment that they have read and understand and will follow NCHS' Standards of Conduct at the time of their orientation to the agency as a new employee and each time new standards of conduct are issued. (Form F7442 Certificate of Adherence). The signed statements, along with any compliance training records, are retained in the employee personnel file.

Compliance Officer and Compliance Committee

NCHS is committed to the operation of an effective compliance program and has assigned compliance responsibilities to individuals at all levels of clinical and administrative duties. Individuals with day- to – day compliance oversight authority occupy management level



positions in the organizational structure, including a Compliance Officer (CO), and are empowered to implement the Compliance Program, investigate compliance concerns, report compliance concerns directly to those in higher positions of authority, up to the Chief Executive officer and/or the Board of Directors. The CO is accountable to the CEO or their designated person who must be a senior manager. The CO does not hold a position in NCHS' financial department. The CO receives annual performance evaluations that assess the duties they are to perform. An annual assessment determining whether the CO is allocated sufficient resources to satisfactorily perform their responsibilities for the day-to-day operation of the compliance program is also completed and documented. This assessment is conducted as part of a broader compliance program effectiveness review.

NCHS maintains a Corporate Compliance Committee (CCC). The CCC reports directly to the CEO and Board of Directors while coordinating committee activities with the CO.

A key task of NCHS' CCC is to ensure that all affected individuals have received corporate compliance training both through orientation and annually. This task will be accomplished through coordination with the CO.

Membership of the CCC will consist of senior and middle management of services (operations), finance, compliance and human resources.

The CCC /CO issues reports to the CEO and Board of Directors at least quarterly.

The CCC will hold meetings no less than quarterly.

Compliance Training and Education Program

NCHS conducts a detailed compliance training and education program for all affected individuals to the extent that they are affected by NCHS' risk areas. NCHS' training program includes a training plan that outlines compliance subjects or topics required for all affected individuals, timing and frequency of the trainings, which affected individuals are required to attend specific trainings, how attendance for each training is recorded, and how periodic evaluation of training effectiveness is completed. NCHS continuously identifies training topics, including those arising as a result of self-monitoring, audits by regulatory agencies and regulatory developments. NCHS provides refresher training for affected individuals on, at a minimum, an annual basis.

New employees receive training in NCHS' Standards of Conduct, this policy and procedure and those policies and procedures relevant to their job duties as part of an orientation program. NCHS tailors the training based on the roles and responsibilities of each group of individuals



and in a manner that the individual can understand. NCHS does not lean on self-study programs based ONLY on written policy distribution as the means of training affected parties. All formal compliance training is documented in the employee personnel file. (Policy 7442 Compliance Training).

Communication

NCHS makes available lines of communication to all affected individuals for the purpose of supporting anonymous confidential reporting of an asking question about compliance concerns to the CO. NCHS makes available telephone, email, interoffice mail, face to face interaction, drop box, hot line as methods of reporting compliance concerns to the CO.

Affected individuals have a responsibility to report through available reporting methods any activity by anyone that appears to violate applicable laws, rules, regulations, or NCHS Policy and procedure. NCHS is committed to making every effort to maintain the confidentiality of the identity of any individual who reports a concern in good faith, NCHS ensures that there is an anonymous method of communicating a compliance concern. NCHS works to ensure that the confidentiality of persons reporting shall be maintained consistent with regulations at Part 512 – 1.4. All persons who report compliance issues, including Medicaid recipients for service, are protected under NCHS' written non-intimidation and non-retaliation policies.

It is expected to be good practice, when one is comfortable with it and thinks it is appropriate under the circumstances, for compliance concerns to be raised first with a supervisor. The supervisor then makes the CO aware of compliance concerns. If this is not comfortable or not a viable option, then parties are encouraged to contact the Compliance Hotline where all reports are confidential and can be made anonymously. Additionally, affected individuals may contact the CO directly as a means of confidential reporting,

Any party who intentionally makes a false accusation with the purpose of harming or retaliating against anyone will be subject to appropriate disciplinary action.

North Country Home Services Compliance Hotline: 518.523.6453

Disciplinary Standards

NCHS maintains written disciplinary policies and procedures pertaining to violation of the Compliance Program that are published and disseminated to all affected individuals.



Failure of affected individuals to comply with this Compliance policy and procedures, standards of conduct, the Medicaid program and/or statutes, rules, and regulations applicable to NCHS may be subject to disciplinary action. Conduct that is intentional or reckless may result in more severe disciplinary actions.

NCHS strives to enforce disciplinary standards fairly and consistently with the same disciplinary action applied to all levels of personnel.

Retraining of affected individuals is a key corrective action if violations are based on a lack of awareness or understanding of an obligation, policy or procedure.

Resolution of disciplinary issues will be determined through direct cooperation with the appropriate manager, Human Resources, and the CO and, as appropriate, the CEO. 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.

Auditing and Monitoring

NCHS is committed to fostering a culture of compliance through the implementation of a system for the routing identification of compliance risk areas to detect, correct and prevent non-compliance behaviors. Through the process of our corporate compliance reporting structure, the articulation of compliance-related roles and responsibilities at every level of NCHS operations. and through the utilization of our organizational experience, detection and correction of problems is expedited. If an internal investigation substantiates a reported violation, then it is our policy to engage 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.
- 3) NCHS is committed to routinely conducting internal audits of compliance risk areas. Results of internal and external audits are shared at minimum with the CCC and NCHS Board of Directors. NCHS also conducts annual reviews of the compliance program to determine and evaluate the program's effectiveness and any need for correction or revision. The results of annual compliance program reviews are shared at minimum with the CEO, senior management, the CCC, and the Board of Directors.



NCHS maintains a compliance workplan that at a minimum describes in detail the plan for reviewing, auditing and monitoring, and compliance program review activities. This workplan is drafted and /or developed by the CO and shared with the CCC for feedback. Revisions are made to the workplan as risk areas change and based on the outcomes of the auditing and monitoring activities.

Responding to Compliance Issues

NCHS maintains a system to prevent, detect, investigate, and correct non-compliance with Medicaid Program requirements. This system is designed to ensure appropriate response, investigation, resolution, and proper reporting of compliance issues. This system includes the implementation of procedures, policies, and systems as necessary to reduce the potential for recurrence. NCHS also maintains a system that ensures prompt reporting of compliance issues in a manner consistent with applicable statutes, rules, and regulations. If a compliance issue required reporting and returning overpayment, this will be completed in accordance with the appropriate Self -Disclosure Program requirements.

Prior Revisions

03/01/07

10/30/07

12/16/08

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