

CORPORATE COMPLIANCE

Overview & General Requirements

What Is This Training?

• Annual mandatory training covering our compliance program, False Claims Act education, and our compliance "hotline".

 It is all required because our agency accepts Medicaid funds. We certify our compliance program annually to OMIG (Office of Medicaid Inspector General- NYS).

All employees are required under NYS to participate in this training due to our compliance agreement with NYS DOH, NYSED, & OMIG.



<u>Our Commitment to</u> <u>Quality & Compliance</u>



 Our success with delivering services reflects who we are and value our clients and their rights to receiving the quality care we provide.

Our success with compliance reflects how we value the long-term success of CR by making every effort to prevent fraud, waste, and misuse.



 This act requires annual training on the components of fraud to raise awareness.

• In doing so, it is important to raise questions to your managers/supervisors if you have concerns about documentation that may be wrong or fraudulent claims of services.

- It is both a State and Federal crime to submit or cause to be submitted, any false or misleading claim for government payment.
 - False Claims Act covers fraud against the government and fraud against our consumers (the children and adults we serve) as well as their families.
 - Civil and Criminal Penalties, as well as a violation of CR Policy.

Fraud Against the Government

Fraud

- Intentionally submitting false claims for the purpose of obtaining funds we are not entitled to.
- i.e. billing for services that were not performed, identity theft, performing unnecessary procedures.
- Abuse/Misuse
 - Intentionally submitting false claims for the purpose of obtaining funds that we are partially entitled to.

• <u>Waste</u>

- Unintentional, accidental errors that are a product of billing complexity and lack of training and awareness.
- i.e. duplicate claims, insufficient or inaccurate information
 - *It's key to understand that "fraud is in the eye of the beholder" and OMIG's eyes are suspicious and their goal is to recoup funds for the NYS DOH*

<u>4 Elements of Fraud</u>

- 1. A material (significant) false statement is made by an individual
- 2. The statement is made knowing that it is false
- 3. The victim believes it
- 4. Damages result to the victim as a result



How Does Fraud Happen?



Failure of internal controls create opportunities for fraud.

Some warning signs:

Failure to follow policies & procedures
Weak or ineffective internal controls
Circumventing of procedures
Bending or breaking rules
Overriding required reviews & approvals (paper logging)



- Every employee and contractor has the **<u>obligation</u>** to report fraud, waste & misuse.
- Failure to report may lead to **<u>discipline</u>**.
- No one may retaliate against you for reporting, in good faith. (See Whistleblower Policy)
- Reports may be made to the <u>Compliance Officer</u>, your <u>Supervisor</u>, or <u>Human Resources</u>.
- <u>Anonymous</u> reporting mechanisms are set up (see next slide).



Compliance Hotline:

Email:

917-831-6250

Compliance@cr-si.org



Plans of Care

Our respective plans of care need to be viewed as the "prescription" for required services.

• Life plans, Staff Action Plans, IFSPs, and IEPs.

- It is your responsibility to ensure that all Plans of Care are timely, accurate, complete and signed.
- CR must be listed as provider and only the Valued Outcomes listed in the plans of care (or scripts) may be used for billing.
- If there are any problems with the Plan of Care you must request an addendum immediately.
- Individual prescriptions are also required for delivery of physical, occupational, and speech therapy.

Service Documentation

- By initialing on your documentation of services, you and your staff are stating that the service was actually provided, on that day, by you.
- All staff initials must be made by the end of your shift, or if using electronic billing, all services must be electronically signed each time a service is delivered.
- All supervisors, managers & directors need to review documentation regularly to ensure that all services and initials are contemporaneous. (As per policy-within 72 hours)
- Our general policy is that if a service is not initialed on your documentation, it was not provided and does not support our right to payment for the service.
- Initialing or electronically signing for a service not provided is fraud.



Errors

Any errors on service documentation must be corrected properly & promptly. (As per policy-within 72 hours)

- Staff may not correct errors without getting proper instructions from management.
- Staff may only correct their own errors (except with supervisor approval).
- Corrections of errors must be striked out (one line), corrected and initialed/dated.

Identity Theft: Fraud Against Our Individuals

 As part of the Corporate Compliance Program, we are also trying to combat identity theft by complying with policies and procedures that help us to detect / prevent identity theft.

 We need to be aware of patterns, practices, or specific activities that indicates the possible existence of identity theft. Your detailed, department-level trainings should already have common-sense protections against identity theft.



To Combat Fraud, Waste, and Abuse



Community Resources Staten Island has instituted this Corporate Compliance Program. And participation is mandatory!

Compliance Ownership

Every staff member must:



- Acknowledge receipt of Compliance Training.
- Read these documents and agree to conduct yourself <u>"in</u> <u>conformity with all of the requirements, to adhere to the</u> <u>spirit and letter of our Code of Ethics, and to cooperate</u> <u>with management in carrying out the objectives of our</u> <u>compliance program.</u>"
- Agree to report any conduct by any Agency personnel that may constitute a violation of any law, rule, regulation or professional practice applicable to CR.

Acknowledgement of Your Compliance Responsibilities

• Attend Compliance Training <u>Annually</u>

- Read the given <u>Code of Ethics</u>, <u>Conflict of Interest Policy</u> & <u>Whistleblower Protection Policy</u>
- After attending & reading, sign acknowledgement receipts, and return them to the <u>Compliance Officer/Training</u> <u>Department</u>
- This is our best <u>evidence</u> that you are aware of your compliance responsibilities

For our Compliance Program to be effective, please:

- Become familiar with the 8 elements of our Corporate Compliance Program.
- Recognize that **knowledge is power**.
- Use your **power to combat fraud, waste, and abuse**.
- You will then be ensuring the continuing success of our agency in providing quality services to our students, residents and other individuals.

Element #1 Written Code and Standards



Written Code & Standards include:

- Compliance Expectations (Code of Ethics)
- Compliance Standards (Policies & Procedures)
- False Claims Act Policy

Code of Ethics: <u>Six Simple Guidelines</u>

- Perform your duties in a professional, courteous manner towards co-workers, service recipients, and others who deal with CR.
- 2. Create a safe and secure work environment.
- ^{3.} Be a good custodian of CR Property.
- 4. Maintain privacy and confidentiality for those people we serve (and their families).
- 5. Maintain privacy and confidentiality for the agency, its services and methods.
- 6. Support open and prompt communication.

Compliance Standards: <u>Billing & Documentation</u>

- Billing is considered a high-risk activity for CR because of the potential of receiving "improper payments" or in other words, receiving money for which we are *not legally entitled*.
- Billing and coding must be done 100% correctly. There is no room for error.
- That means that there must be **checks and balances** in place to assure that no billing request is forwarded to Fiscal that does not have all the requirements for billing in place. This includes a service rendered in accordance with Federal and state regulations with supporting documentation in the form of assessments, treatment plans, progress notes, etc.
 - We must suspend billing if for any reason it does not comply with the program and payment standards in regulation.



What does that mean to each of you - Commit to be careful!

- The only obstacle to billing correctly is for the service provider, program management, and Fiscal to be careless in their duties.
- Please commit to do your work completely, accurately and timely.
- Report problems quickly and completely!





- Business practices cover business transactions, business records, cost reports, purchasing, conflicts of interest, payments, gifts and hospitality.
- Follow Agency policies related to these topics:
 - Do not alter records without supervisory approval.
 - Never back-date records.
 - Record retention regulations.
 - HIPAA & FERPA privacy and security standards.

Compliance Standards <u>Consequences & Enforcement</u>

- Failure to comply with the False Claims Act(s) and Whistleblower Protection Policy are violations of both state and federal law.
- Providing false information to state and federal government is a crime.
 Violations are enforceable against both CR and its staff.
- CR expects complete truthfulness and transparency when dealing with state and federal governmental agencies.

Element #2

Conducting Effective Compliance Training & Education

- When you sign your acknowledgements today, you are attesting to your understanding of / consent to your compliance responsibilities.
- This training is only effective if you feel like you have learned enough about compliance to act if necessary.



Element # 3 Designation of Compliance Oversight

CRSI Compliance Officer: Denise Gibson-Phipps Hotline: 917-831-6250 | Email: compliance@cr-si.org is committed to ensuring compliance agency wide

- Duties:
 - Conduct the compliance training/ educate staff on Corporate Compliance
 - Oversee the implementation & day-to-day operation of our Corporate Compliance Program.
 - Supervise the compliance "hotline" and address individual concerns, as they are raised.
 - Work with senior management to ensure that we are up-to-date on relevant regulatory changes.
 - Report to our Executive Director and our Board of Directors.

Reviews agency compliance with laws and regulations impacting service delivery and billing standards.

Element # 4 Development of Effective Lines of Communication

Open Communication

- Our Compliance Program encourages all staff to actively participate in our compliance efforts.
- All staff are encouraged to bring their compliance concerns and questions to their supervisor, Chief Compliance Officer, or the Compliance Committee.





Confidential & Anonymous Reporting

- Through direct, confidential contact with the Compliance Officer, your Supervisor, or HR
- Through our dedicated "Compliance Hotline" report it

Element # 5 **Compliance Enforcement** (Disciplinary Policies & Sanctions)



Staff who commit substantiated violations of our Code of Ethics or who are deemed to be non-compliant with relevant laws, regulations, and CR policies will be subject to discipline, up to and including termination.

Element # 6 **Risk Assessment** (Auditing & Monitoring)

- CR must ensure that we are compliant by continually doing self-audits and monitoring. Do you check your own work?
- This includes a system to routinely identify compliance risk areas.



Element # 7 **Responding to Detected Offenses** *System of Investigations & Corrective Actions*

- Violations related to fraud, waste, abuse, financial matters, and confidentiality must be reported to the Compliance Officer.
- Violations of our Employee Handbook must be reported to Human Resources.
- We must never allow a detected offense to go uncorrected.



Element # 8 Non-Retaliation Policy *"Whistleblower" Protection*

• Our Compliance Program prohibits retaliation and intimidation in any form, against any staff who, in good faith, reports possible unethical or illegal conduct.

• Anyone found to participate in such retaliation will be subject to discipline up to and including termination.



Element # 8 Non-Retaliation Policy

- Beware! Even subtle changes in behavior can be perceived as retaliation.
- Staff can be held personally liable and subject to fines and criminal penalties including prison.
- We must take action or staff will not report because "nothing ever changes".
- Do <u>**not</u>** investigate on your own.</u>
- Those who bring issues to management's attention should be commended.

What to do if you find something?

Please contact the Compliance Officer, your Supervisor, and/or Human Resources as soon as there is even a suspicion that something may be wrong.

Do not investigate on your own.



Congratulations & Thank You for being part of the solution!

To receive credit for this Corporate Compliance training,

please make sure to sign and acknowledge:

COMPLIANCE TRAINING DOCUMENTS

- 1. Compliance Training Policy & Acknowledgement
 - 2. Code of Ethics Policy & Acknowledgement
 - 3. Conflict of Interest Policy & Acknowledgement

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