

ESSEX COUNTY MENTAL HEALTH

CORPORATE COMPLIANCE PLAN

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ESSEX COUNTY MENTAL HEALTH CORPORATE COMPLIANCE POLICY

I. Policy Statement

Essex County Mental Health (ECMH) is dedicated to ensuring a culture of compliance, honesty, and integrity. New York State Social Services Law 363-d requires providers that operate under a license issued by OMH pursuant to Article 31 of the Mental Hygiene Law, or providers which order, provide, bill or claim \$1,000,000 from Medicaid in a 12-month period, to have an effective compliance program. An “effective compliance program” is one that satisfies all the mandatory elements of SSL 363-d as supplemented by regulations as 18 NYCRR Part 521 and complies with DRA requirements (42 U.S.C 1396 (a) (68)).

The required elements of an effective Compliance Program include:

- Implementing written standards, policies, and procedures.
- Designating a Corporate Compliance Officer and Compliance Committee or contact.
- Conducting appropriate compliance training and education.
- Developing open lines of communication.
- Responding appropriately to detected violations and developing corrective actions.
- Conducting internal monitoring and auditing.
- Enforcing disciplinary standards through well-publicized guidance.
- Creating and enforcing a policy of non-intimidation and non-retaliation for good faith participation in the compliance program.

II. Purpose

The purpose of this Corporate Compliance Program is to maintain the integrity of ECMH, including its Medicaid billing process to prevent, detect, and correct non-compliance with Medicaid program requirements, including fraudulent abuse, and wasteful practices within ECMH’s risk areas and organizational experience. It is the policy of ECMH to comply with all applicable payer requirements and federal, state, and local laws and regulations. It is also ECMH’s policy to adhere to the Essex County Code of Ethics. The Corporate Compliance Program, as set forth in this written document, is applicable to all individuals employed, contracted, interning, and others who are associated with clinical, service delivery, documentation, or fiscal/billing responsibilities for ECMH. Additionally, those who are affected by ECMH’s risk areas include agents, sub-contractors, independent contractors, governing bodies and government offices are subject to the Corporate Compliance Program.

III. Commitment

ECMH staff is committed to conducting business with integrity based on sound ethical and moral standards. ECMH employees, contractors, interns, and other affected individuals are held to the same standards.

ECMH is committed to maintaining and measuring the effectiveness of the Corporate Compliance Program through monitoring and auditing systems designed to detect noncompliance by employees, contractors, interns, and other affected individuals. ECMH requires regular, periodic compliance audits by internal and/or external auditors who have expertise in federal and state health care statutes, regulations,

and health care program requirements.

IV. Responsibility

The policies and procedures that comprise the Corporate Compliance Program apply to all ECMH employees, contractors, interns, and other affected individuals whose conduct is under the control of ECMH. All employees, contractors, interns, and other affected individuals shall acknowledge that it is their responsibility to report any instances of suspected or known noncompliance to their immediate supervisor, ECMH Administration or Corporate Compliance Officer. Reports may be made anonymously without fear of retaliation or retribution. Failure to report known noncompliance or making reports which are not in good faith will be grounds for disciplinary action, up to and including termination.

Issues related to corporate compliance, such as harassment or other workplace-oriented issues, will be referred to ECMH Administration and Essex County Personnel Department.

V. Policies and Procedures

ECMH will communicate its corporate compliance standards and policies through required training initiatives to all employees, contractors, interns, and other affected individuals. ECMH is committed to these efforts through distribution of this document which defines the Corporate Compliance Program, Code of Ethics, and Philosophy.

VI. Enforcement

The Corporate Compliance Program will be consistently enforced through appropriate disciplinary mechanisms in accordance with Essex County Employee and the Civil Service Employee Association (CSEA) standards, as authorized by Essex County's governing collective bargaining agreement and pursuant to New York State and Federal Laws, including, if appropriate, discipline of individuals responsible for failure to detect and/or report noncompliance.

VII. Agency Response

Detected noncompliance, through any mechanism, i.e., corporate compliance auditing procedures, confidential reporting, will be responded to in an expedient manner. ECMH is dedicated to the resolution of such matters and will take all reasonable steps to prevent further similar violations, including any necessary modifications to the Corporate Compliance Program.

VIII. Due Diligence

ECMH will, at all times, exercise due diligence with regard to background and professional license investigations for all prospective employees, contractors, interns, and other affected individuals. ECMH will coordinate new employee New York State Justice Center/Office of Mental Health required fingerprinting, New York State Child Abuse State Central Registry clearance, reference checks and confirmation of licensing documentation prior to hiring.

IX. Whistleblower Provisions and Protections

Protected disclosures are those that assert ECMH is in violation of a law that creates a substantial and specific danger to public health and safety or asserts health care fraud under the law. Good faith reporting of an employee's belief that improper quality of patient care is occurring is also a protected disclosure. ECMH provides secure suggestion boxes on site for client and staff comments. ECMH will

not take any retaliatory action against an employee, contractor, intern, or other affected individual who in good faith discloses information about ECMH's policies, practices, or activities to a regulatory, law enforcement, or other similar agency or public official.

ESSEX COUNTY MENTAL HEALTH VISION, MISSION, CODE OF ETHICS

I. Vision

Essex County Mental Health's vision is to be a trusted leader in mental health well-being by collaborating with an array of community partners to strengthen, heal and empower our community members.

II. Mission

As the local government unit defined by New York State Mental Hygiene Law, Essex County Mental Health exists to ensure appropriate supports and services are available to meet the needs of people, and their families, with Mental Illness, Substance Use Disorder, Developmental Disability, or any combination thereof. This is accomplished through collaboration with other county departments, community and state agencies, schools, peers, self-advocates and families.

The mission of Essex County Mental Health Services is to provide community members with opportunities to improve their emotional, behavioral, and psychological well-being through therapeutic partnerships with mental health professionals.

The provision and delivery of direct services will be delivered in a cost-effective manner, as governed by the Federal Deficit Reduction Act (42 USC 1396(a) (68)), Federal False Claims Act (31 USC 3729-3733 et seq.), and Article 14 of the Mental Hygiene Law of New York State, and within the rules, regulations, policies and procedures of the licensing authority of the appropriate State Offices.

III. Compliance Expectations/Code of Ethics

It is the expectation of ECMH that all aspects of client care and business conduct be performed in compliance with the ECMH mission, vision, policies, procedures, professional standards, applicable governmental laws, rules and regulations and payer standards. ECMH expects employees, contractors, interns and other affected individuals to adhere to the highest ethical standards and to promote ethical behavior.

Employees may not engage in any conduct that conflicts, or is perceived to conflict, with the best interest of ECMH as set forth in the Essex County Code of Ethics established by Local Law No.2 of 1994 and Essex County Ethics and Disclosure Law as established by Local Law No.2 of 2017, which includes but is not limited to: employees must disclose any circumstances where the employee or his or her immediate family member is an employee, consultant, owner, contractor or investor in any entity that (i) engages in any business or maintains any relationship with ECMH; (ii) provides to, or receives from, ECMH any client referrals; and (iii) Employees may not accept a gift exceeding the estimated value of seventy-five dollars (\$75) and must comply with standards of the Essex County employee ethics law.

In addition to the Statutory Code of Ethics Established by Local Law No.2 of 1994 (see Appendix A) and the Essex County Ethics and Disclosure Law as established by Local Law No.2 of 2017, employees/contractors shall:

- a) Exercise diligence, care and integrity when submitting claims, including Medicaid claims, for services rendered;
- b) Maintain honest, fair and accurate billing practices;
- c) Report allegations of suspected fraud, waste, or abuse in a timely fashion;
- d) Comply with applicable current policies, procedures, administrative memoranda, laws, regulations accounting rules, procurement rules and internal controls;
- e) Refrain from filing any false, fictitious, or fraudulent statements or documents in connection with the delivery of, or payment for, health care benefits, items or services;
- f) Refrain from participating in, or encouraging, directing, facilitating, or permitting non-compliant behavior;
- g) Document the provision of all services and transactions in an accurate honest and timely manner (see below).

Employees, contractors, interns, and other affected individuals are expected to maintain complete, accurate and contemporaneous records as required by ECMH. The term “records” includes all documents, both written and electronic, that relate to the provision of ECMH services or provide support for the billing of ECMH services. Records must reflect the actual service provided. Records, to be appropriately altered, must reflect the date of the alteration, the name, signature, and title of the person altering the document and the reason for the alteration if not apparent.

No person shall ever sign the name of another person on any document. Signature stamps shall not be used. Backdating and predating documents is unacceptable and shall lead to employee discipline and constitute grounds for termination of contractors, interns, and other affected individuals.

An employee, contractor, intern, or other affected individual who knows, or reasonably suspects, the expectations above have not been met, are required to report this information to his or her immediate supervisor(s), the ECMH Corporate Compliance Officer and/or the Director/Director of Community Services (D/DOCS). Prompt reporting through appropriate channels allows for appropriate investigation and corrective action. Employees, contractors, interns and affected individuals who have knowledge of violations of law, agency policy, operating procedures, or conduct, which might reasonably constitute fraud, waste, abuse, corruption, or misconduct must report as soon as possible, to either their supervisor or the ECMH Corporate Compliance Officer. Administrators, supervisors, and managers have an obligation to report known or suspected compliance issues to the Corporate Compliance Officer, who may be reached at (518) 873-3670. Employees, contractors, interns and affected individuals also have an obligation to assist in the resolution of compliance issues.

Neither ECMH, nor any employee, contractor, intern or other affective individual shall intimidate, threaten, coerce, discriminate against, or take other retaliatory action against any individual who repots a compliance complaint or concern or for participating in any compliance related review, investigation, proceeding, or hearing, or for engaging in reasonable opposition to any act or practice that the individual in good faith believes to be unlawful or in violation of the Corporate Compliance Program.

Failure to comply with the Corporate Compliance Program or any ensuing investigations may result in disciplinary action commensurate with the severity of the violation(s) committed. Employees will be subject to disciplinary action pursuant to Section 75 of NYS Civil Service Law and the Essex County collective bargaining unit (CSEA) agreement up to and including termination. Contractors, consultants, professional service providers, and contract agencies will be subject to disciplinary action up to and including termination pursuant to the termination provisions of their respective contracts with Essex County.

THE ROLE OF THE CORPORATE COMPLIANCE OFFICER

I. Corporate Compliance Officer

The County Executive approves the ECMH Commissioner's designee, Administrative Assistant, as ECMH Corporate Compliance Officer. The Corporate Compliance Officer has direct lines of communication to the office of the County Executive, ECMH Director/ Director of Community Services (D/DCS), and the County Attorney's Office.

- a) The Compliance Officer is to report directly and be accountable to the D/DCS and/or other leadership staff.
- b) Compliance responsibilities may or may not be the Compliance Officer's sole duties.
- c) Providers must ensure the Compliance Officer is allocated sufficient staff and resources to satisfactorily perform their responsibilities based on the required providers risk areas and organizational experience.
- d) The Compliance Officer and appropriate compliance personnel must have access to all records, documents, information, facilities, and affected individuals related to carrying out their responsibilities.

II. Job Duties

The Corporate Compliance Officer is obligated to monitor the ECMH Corporate Compliance Program. The Corporate Compliance Officer serves the best interests of the ECMH clients, employees, contractors, interns and affected individuals by ensuring adherence to the Corporate Compliance Program. Responsibilities of the Corporate Compliance Officer include, but are not limited to:

- a) Developing and implementing Corporate Compliance Policies and Procedures;
- b) Overseeing and monitoring the implementation of the Corporate Compliance Program;
- c) Conducting and/or directing ECMH internal audits to monitor effectiveness of Corporate Compliance Program;
- d) Providing guidance for all employees, contractors, interns and affected individuals as defined by the Office of the Medicaid Inspector General regarding policies and procedures, laws, rules and regulations;
- e) Updating, periodically, the Corporate Compliance Program as changes occur within ECMH, and/or in the law, regulations and /or governmental and third-party payors;
- f) Overseeing efforts to communicate awareness of the existence and contents of the Corporate Compliance Program;
- g) Coordinating, developing and participating in the educational and training program;
- h) Assuring all employees, contractors, interns and other affected individuals have acknowledged receipt of the requirements of the ECMH Corporate Compliance Program;
- i) Actively seeking up-to-date materials, new releases, and information regarding regulatory, (New York State Mental Hygiene Law Part 587, 588, 599 and/or other governing laws).
- j) Maintaining a reporting system to assure expedient response to concerns, complaints and questions related to the Corporate Compliance Program;
- k) Coordinating internal investigations of alleged fraud, waste and abuse and implementing corrective action or referring matters to other parties as appropriate, both in collaboration with Essex County Corporate Compliance Officer and independently;
- l) Coordinating activities for the required certifications to the Office of the Medicaid Inspector General;
- m) Providing quarterly report to Essex County Corporate Compliance Officer, D/DCS and Corporate Compliance Committee.
- n) Assisting in improving efficiency, quality of services and reduction of fraud, waste, and abuse;
- o) Evaluating the effectiveness of the Corporate Compliance Program's activities.

ECMH shall ensure that the ECMH Corporate Compliance Officer has sufficient resources, including access to information necessary to carry out his or her responsibilities, based on ECMH's risk areas and organizational experience. The ECMH Corporate Compliance Officer shall conduct an annual self-assessment of his or her performance. In addition, the effectiveness of the ECMH Corporate Compliance Officer shall be assessed as part of the annual performance evaluation procedure.

STRUCTURE, DUTIES, AND ROLE OF THE ECMH CORPORATE COMPLIANCE COMMITTEE

I. Reporting Structure and Purpose

ECMH Corporate Compliance Committee members are appointed by the ECMH Commissioner and participation within the committee structure is voluntary. Corporate Compliance issues shall be reported by the ECMH Corporate Compliance Committee to the ECMH D/DCS and Corporate Compliance Officer. The Compliance Committee's purpose is to advise and assist the ECMH Corporate Compliance Officer and ECMH Leadership Team with implementation of the Corporate Compliance Program.

II. Function / Charter

The role of the ECMH Corporate Compliance Committee includes:

- a) Analysis of the environment where ECMH does business, including legal requirements with which the ECMH must comply;
- b) Providers must designate a Compliance Committee responsible for coordinating with the Compliance Officer to ensure it is conducting business in an ethical and responsible manner, consistent with its Compliance Program.
- c) Compliance Committee Charter is required, which outlines duties and responsibilities, memberships, designation of chair, and frequency of meetings.
- d) The Compliance Committee is responsible for advocating that the Compliance Officer is allocated sufficient funding, resources, and staff to fully perform their duties.
- e) Review and assessment of existing policies and procedures to address risk areas for possible incorporation into the Corporate Compliance Program;
- f) Guide the development of standards, policies and procedures to address specific risk areas and encourage corporate compliance according to legal and ethical requirements;
- g) Guide the development of internal systems and controls to carry out corporate compliance standards and policies;
- h) Review of internal and external audit results and development of an action plan to address potential non-compliance;
- i) Implementation of corrective and preventive action plans;
- j) Development of a process to evaluate and respond to complaints and problems;
- k) Meets quarterly and prepares reports to Essex County Corporate Compliance Officer and ECMH D/DCS.
- l) Compliance Committee reports to chief executive and governing body.

DELEGATION OF SUBSTANTIAL DISCRETIONARY AUTHORITY

I. Requirements

Any employee, prospective employee, contractor, intern, or other affected individual who holds, or intends to hold, a position with substantial discretionary authority for ECMH, is required to disclose any name changes, and any involvement in non-compliant activities, including but not limited to health care related violations and crimes. In addition, ECMH performs reasonable inquiries into the background of such applicants, contractors, interns, and other affected individuals.

II. Queries

The following organizations may be queried with respect to potential employees, contractors, interns, and other affected individuals and members of the Community Services Advisory Board;

- a) The System for Award Management (SAM): Search for entity registration and exclusion records. The URL address is <https://www.sam.gov/portal/SAM/>
- b) HHS/OIG cumulative sanction report. The URL address is <https://exclusions.oig.hhs.gov/>
- c) NYS Medicaid Fraud Database. The URL address is <http://www.health.state.ny.us/nysdoh/medicaid/dqprvpg.htm>.
- d) Licensure and disciplinary record with NYS Office of Professional Medical Conduct (Physicians, Physician Assistants) (the URL address is <http://www.health.state.ny.us/nysdoh/opmc/main.htm>) and/or New York State Department of Education (other licensed professionals) (the URL address is <http://www.op.nysed.gov/home.html>)

EDUCATION AND TRAINING

I. Expectations

Education and training are critical elements of the Corporate Compliance Program. Every employee, contractor, intern, and other affected individual is expected to be familiar and knowledgeable about the ECMH Corporate Compliance Program and have a solid working knowledge of his or her responsibilities under the program. A copy of the Corporate Compliance Program will be distributed to all employees, contractors, interns, and other affected individuals will acknowledge receipt of the Corporate Compliance Program upon hire and annually thereafter by signing an attestation form stating intent to adhere to the Corporate Compliance Program (see Appendix B).

II. Training Topics – General

All personnel shall participate in training on corporate compliance topics to obtain a functional understanding of operational and reimbursement regulations and guidelines. Topics may include but are not limited to:

- a) Government and private payer reimbursement principles;
- b) Government initiatives;
- c) History and background of Corporate Compliance;
- d) Legal principles regarding Corporate Compliance;
- e) General prohibitions on paying or receiving remuneration to induce referrals and the importance of the fair market value of services provided;
- f) Prohibitions against submitting a claim for services rendered when documentation of the service does not exist to the extent required;
- g) Prohibitions against signing for the work of another individual;
- h) Prohibitions against alterations to medical records and appropriate methods of alteration;
- i) Prohibitions against rendering services without a treatment plan signed by the psychiatrist and therapist;
- j) Proper documentation of services rendered, and;

- k) Duty to report misconduct.

III. Orientation

In addition to the above, targeted training will be provided to all individuals whose job responsibilities include activities related to compliance topics. ECMH Leadership Team Administrators, managers, and supervisors shall assist the ECMH Corporate Compliance Officer in identifying areas that require specific training. The ECMH Corporate Compliance Officer and the administrators, managers and supervisors are responsible for distribution of the terms of this Corporate Compliance Program to all employees, contractors, interns, and other affected individuals doing business with ECMH.

As part of their orientation, each ECMH employee, contractor, intern, and other affected individual shall receive a written copy of the Corporate Compliance Program, policies, procedures, Essex County Ethics and New York State standards of conduct.

IV. Attendance

Participation in Corporate Compliance training is mandatory and is a condition of ongoing employment. All education and training relating to the Corporate Compliance Program will be verified by attendance and a signed acknowledgement of receipt of the Corporate Compliance Program.

EFFECTIVE CONFIDENTIAL COMMUNICATION

I. Expectations

Open lines of communication between the ECMH Corporate Compliance Officer and every employee, contractor, intern and affected individual subject to this program is essential to the success of the Corporate Compliance Program. All employees, contractors, interns and affected individuals shall report any wrongdoing according to the procedure listed below. The ECMH Corporate Compliance Officer shall provide an open door, confidential, non-retribution assurance to all employees, contractors, interns and affected individuals to encourage good faith reporting. No employee, contractor, intern or affected individual shall participate in any wrongful course of action and shall further report wrongdoing.

II. Reporting Procedure

If an employee, contractor, intern or other affected individual, witnesses, learns of, or is asked to participate in potential non-compliant activities, in violation of the Corporate Compliance Program, he or she must contact the ECMH Corporate Compliance Officer, his or her immediate supervisor or the ECMH D/DCS.

Suspected misconduct may be reported in the following ways:

1. Discuss the question or concern with the direct supervisor, who in turn can seek assistance from the ECMH Corporate Compliance Officer;
2. Report in person to the ECMH Corporate Compliance Officer at Essex County Mental Health, 7513 Court Street, Elizabethtown, NY 12932;
3. Report via phone by calling the Corporate Compliance Officer at (518) 873-3670;
4. Report through the U.S. Mail to: Corporate Compliance Officer, Essex County Mental Health, P.O. Box 8 - 7513 Court Street, Elizabethtown, NY 12932;
5. Report by dropping it in the confidential Corporate Compliance drop box located at each site;
6. Suspected Medicaid misconduct may also be reported to;
 - a) The Office of the Medicaid Inspector General at 1-877-873-7283 or www.omig.ny.gov

- b) The Office of the Inspector General at 1-800-367-4448 or inspector.general@ig.ny.gov <https://ig.ny.gov/content/on-ine-complaint-form>
- c) NYS Attorney General's Medicaid Fraud Control Unit at 1-800-771-7755

Upon receipt of a question or concern, any supervisor, officer, or director shall document the issue at hand and report to the ECMH Corporate Compliance Officer. Any questions or concerns relating to potential non-compliance by the ECMH Corporate Compliance Officer should be reported immediately to the ECMH D/DCS.

The ECMH Corporate Compliance Officer or designee shall record the information necessary to conduct an appropriate investigation of all complaints. If the employee, contractor, intern, or other affected individual or complainant wants information regarding the Corporate Compliance Program, the ECMH Corporate Compliance Officer or designee shall record the facts of the call, the nature of the information sought and respond as appropriate. ECMH shall, as much as is possible, and permissible by law, protect the identity of individuals who report any complaint or question.

III. Protections

The identity of reporters will be fully safeguarded if possible and will be protected against retribution. Reporting of any suspected violation of the Corporate Compliance Program by following the above shall not result in retribution. Any threat of reprisal against a person who acts in good faith pursuant to his or her responsibilities herein is acting against the ECMH Corporate Compliance Program. Discipline, up to and including termination of employment, and for contractors, termination of contract may result, if such reprisal is proven.

IV. Guidance

Any individual may seek guidance with respect to the Corporate Compliance Program or Code of Ethics at any time, without fear of reprisal, by contacting his or her direct supervisor or the ECMH Corporate Compliance Officer.

ENFORCEMENT OF CORPORATE COMPLIANCE STANDARDS

I. Background Investigations

For all employees, contractors, interns, or other affected individuals who have authority to make decisions that may involve Corporate Compliance issues, ECMH will conduct a reasonable and prudent background investigation, including a reference check, as part of every employment application.

II. Disciplinary Action - General

Employees, contractors, interns, or other affected individuals who fail to comply with the ECMH Corporate Compliance Program, or who have engaged in conduct that has the potential of impairing the ECMH status as a reliable, honest, and trustworthy service provider will be subject to disciplinary action, as permitted by New York State Law and the collective bargaining agreement. Any discipline will be appropriately documented in the personnel file, along with a written statement of reason(s) for imposing such discipline. The ECMH Corporate Compliance Officer shall maintain a record of all disciplinary actions involving the Corporate Compliance Program and report at least quarterly to the ECMH D/DCS regarding such actions.

III. Performance Evaluation - Supervisory

The Corporate Compliance Program requires that the promotion of, and adherence to, the elements of Corporate Compliance be a factor in evaluating the performance of ECMH employees, contractors, interns, and other affected individuals. Employees, contractors, interns, and other affected individuals will be periodically trained in new compliance policies and procedures. In addition, all administrators, supervisors, and managers shall:

- a. Discuss with all supervised employees, contractors, interns, or other affected individuals the Corporate Compliance policies and legal requirements applicable to their function.
- b. Inform all supervised individuals that compliance with these policies and requirements is a condition of employment.
- c. Disclose to all supervised individuals that ECMH will take disciplinary action up to and including termination or revocation of privileges for violation of these policies and requirements.

IV. Disciplinary Action - Supervisory

The ECMH Leadership Team will be subject to discipline for failure to adequately instruct their subordinates, or for failure to detect noncompliance with applicable policies and legal requirements, where reasonable diligence on the part of the supervisor or manager would have led to the earlier discovery of problems or violations and would have provided ECMH with the opportunity to correct them.

AUDITING AND MONITORING OF CORPORATE COMPLIANCE ACTIVITIES

I. Internal Audits

Ongoing evaluation is critical in detecting non-compliance and will help ensure the success of the ECMH Corporate Compliance Program. An ongoing auditing and monitoring system, implemented by the ECMH Corporate Compliance Officer, in consultation with the ECMH Corporate Compliance Committee, is an integral component of our auditing and monitoring systems. This ongoing evaluation shall include the following:

- a) Review of relationships with third-party contractors, specifically those with substantive exposure to government enforcement actions.
- b) Corporate Compliance audits of Corporate Compliance policies and standards.
- c) Review of documentation and billing relating to claims made to federal, state, and private payers for reimbursement, performed internally or by an external consultant as determined by the ECMH Corporate Compliance Officer and Corporate Compliance Committee.

The audits and reviews will examine ECMH's compliance with specific rules and policies through on-site visits, interviews, general questionnaires (submitted to employees, contractors, interns, and other affected individuals), and client chart reviews.

II. Program Integrity

Additional steps to ensure the integrity of the Corporate Compliance Program shall include:

- a) Annual review with legal counsel of all records of communications and reports by all employees, contractors, interns, and other affected individuals kept in accordance with this Corporate Compliance Program.
- b) The ECMH Corporate Compliance Officer will be notified immediately in the event of any visits, audits, investigations, or surveys by any federal or state agency or authority and shall immediately receive a photocopy of any correspondence from any regulatory agency charged with licensing and/or administering a federally or state-funded program or county-funded program with which ECMH participates.
- c) Establishment of a process detailing ongoing notification by the ECMH Corporate Compliance Officer to all appropriate individuals of any changes in laws, regulations, or policies as well as appropriate training to assure continuous compliance with the Corporate Compliance Program.

DETECTION AND RESPONSE

I. Violation Detection

The ECMH Director D/DCS and/or Deputy Director D/DAS, Corporate Compliance Officer, and the Corporate Compliance Committee shall determine whether there is any basis to suspect that a violation of the Corporate Compliance Program has occurred.

If it is determined that a violation may have occurred, the matter shall be referred to legal counsel, who, with the assistance of the ECMH Corporate Compliance Officer, shall conduct a more detailed investigation. This investigation may include, but is not limited to, the following:

- Interviews with individuals having knowledge of the facts alleged,
- A review of documents, and
- Legal research and contact with governmental agencies for the purpose of clarification.

If advice is sought from a governmental agency, the request and any written or oral response shall be fully documented and maintained as part of the corporate compliance program records.

II. Reporting

At the conclusion of an investigation involving legal counsel, a report shall be issued to the ECMH Director D/DCS, Corporate Compliance Officer, and Corporate Compliance Committee summarizing findings, conclusions and recommendations and will render an opinion as to whether a violation of the law has occurred.

The report will be reviewed with legal counsel in attendance. Any additional action will be on the advice of counsel.

The ECMH Corporate Compliance Officer shall report to the Corporate Compliance Committee regarding each investigation conducted.

III. Rectification

It is ECMH's policy to not retain funds received as a result of overpayments. If the ECMH identifies that an overpayment was received, those funds are to be immediately returned. If necessary, the appropriate regulatory and/or enforcement authority shall be notified with the advice and assistance of counsel.

In instances where it appears an affirmative fraud may have occurred; the County Attorney's Office will be immediately contacted and will provide consultation. With the advice and approval of counsel, the appropriate regulatory and/or prosecutorial authorities will be notified.

V. Record Keeping

Regardless of whether a complaint is reported to a governmental agency, the ECMH Corporate Compliance Officer shall maintain a record of the investigation, including copies of all pertinent documentation. This record will be considered confidential and privileged and will not be released without the approval of the ECMH D/DCS and Corporate Compliance Officer or otherwise mandated by law.

ESSEX COUNTY MENTAL HEALTH CORPORATE COMPLIANCE COMMITTEE MEMBERS

Director of Essex County Mental Health

Director of Clinical Services

Corporate Compliance Officer of Essex County Mental Health

Billing Specialist

Deputy Director of Administrative Services

Nursing Department Staff Member

Supervising Psychiatric Social Worker

Supervising Psychiatric Social Worker