

COMPLIANCE POLICIES AND PROCEDURES

HHUNY, Inc. (“HHUNY”) is a tax-exempt not-for-profit corporation devoted to supporting development and operation of person-centered services for people diagnosed with serious mental illness, addictions, and co-occurring physical illnesses. HHUNY provides a neutral forum, training and technical assistance to enable government agencies, philanthropic organizations, providers and consumers of mental health or substance abuse services to share information, analyze data, share resources, and work collaboratively.

It is the policy of HHUNY to conduct its business affairs with honesty, integrity and respect for one another and the people we serve. We will comply with all Federal, State, and local laws and regulations applicable to programs operated or managed by HHUNY, and will support compliance by our business partners.

The Compliance Policies and Procedures that follow apply to HHUNY and any subsidiary organization. All officers, directors, employees, agents, and contractors are expected to adhere to these policies.

There are eight parts to these policies, as follows:

1. Code of Conduct
2. Compliance Program Management and Oversight
3. Education and Training
4. Reporting Compliance Violations
5. Enforcement of Compliance Standards
6. Compliance Risk Areas; Auditing and Monitoring
7. Detection and Response to Compliance Violations
8. Non-Intimidation and Non-Retaliation

Questions about these policies may be addressed to the HHUNY Compliance Officer.

CODE OF CONDUCT

INTENT

This is the Code of Conduct (sometimes referred to as “the Code”) for HHUNY.

It is the policy of HHUNY, Inc. to observe all laws and regulations applicable to its business and to conduct business with the highest degree of integrity. HHUNY is committed to prevention of unethical, unlawful, or non-compliant actions, investigation of reports of known or suspected non-compliance with legal and ethical standards, prompt implementation of correcting measures, and full cooperation with regulatory authorities.

All HHUNY directors, officers, employees and independent contractors (collectively referred to hereafter as “Employees”) are required to adhere to the standards and practices of this Code of Conduct.

This Code of Conduct does not replace other HHUNY program policies and procedures, including its corporate compliance program (the “Compliance Program”). Employees are expected to comply with all HHUNY policies and procedures.

COMPLIANCE RESPONSIBILITIES

All Employees are expected to perform their work for HHUNY with honesty, integrity, and respect for HHUNY, co-workers, business associates, providers, and individuals who receive services from HHUNY or an affiliated organization.

Employees are expected to comply with all HHUNY policies and procedures, including this Code of Conduct. If there is any confusion about compliance responsibilities, Employees should seek direction from their supervisor, HHUNY management, or the HHUNY Compliance Officer.

Employees are required to participate in HHUNY compliance training programs.

All Employees are required to report possible violations of this Code of Conduct, HHUNY policies and procedures, or legal requirements as soon as possible after discovery of the violation. Reports should be submitted to supervisors and/or the HHUNY Compliance Officer. There will be no reprisal of any kind against Employees who make good faith reports of possible violations or wrongdoing. Employees that fail to report known

compliance violations may be disciplined, with penalties up to and including termination of employment or independent contracts.

All Employees are required to cooperate fully with HHUNY management, HHUNY compliance personnel, and government authorities in any investigation of allegations of wrongdoing.

CONFLICTS OF INTEREST

All Employees are required to act in good faith for the best interests of HHUNY and its customers.

Employees may not take personal advantage of business opportunities presented to HHUNY or discovered in the course of work on behalf of HHUNY.

Employees may not engage in outside business activities during the time that they are working for HHUNY. Employees may not use HHUNY equipment and resources to conduct an outside business.

Employees must avoid any situation where a conflict exists, or might appear to exist, between their personal interests or the personal interests of family members and the interests of HHUNY. If an employee believes that he or she has or might have a conflict of interest, he or she must inform his/her supervisor, the Compliance Officer, or the Executive Director

Please see HHUNY Conflict of Interest Policies and Procedures for guidance about reporting possible conflicts of interest and abstaining from HHUNY decisions when a conflict of interest exists or might exist.

HHUNY BUSINESS RELATIONSHIPS

It is the policy of HHUNY to conduct all business honestly, fairly, and with integrity.

HHUNY agreements with contractors and vendors must clearly and accurately describe the services to be performed or items to be purchased. Compensation of vendors must be reasonable.

Employees may not solicit or accept money, gifts, services, or any other personal benefits or favors of any kind from contractors, suppliers, customers, providers, or their families if such benefits are, or appear to be, in consideration for Employee actions on behalf of HHUNY. Kickbacks and rebates in cash, credit, or other forms are strictly prohibited.

Employees may not offer or accept meals or entertainment from third parties except in the ordinary course of business on behalf of HHUNY.

USE OF HHUNY RESOURCES

HHUNY funds, equipment and resources are only to be used for the benefit of HHUNY, to deliver service to HHUNY customers, and for charitable purposes.

Employees may not use HHUNY equipment and resources for personal gain. Nor may they make such resources available to any other person or entity, except in the ordinary course of HHUNY business.

HHUNY equipment and resources includes, but is not limited to, computer equipment, office supplies, written materials, software programs, training programs, intellectual property owned or licensed by HHUNY, confidential business information, and other HHUNY assets.

CONFIDENTIALITY OF BUSINESS INFORMATION

Employees may not use or disclose confidential business information discovered in the course of work for HHUNY. Confidential information includes any information that is not available to the public about the business of HHUNY, HHUNY subsidiaries (including particularly Health Homes United New York), or HHUNY business associates (including particularly Lead Health Home Programs).

CONFIDENTIALITY OF PERSONAL INFORMATION

In the course of work for HHUNY, employees or contractors may have access to information about individuals that is highly confidential, such as personnel records, health records, or information about substance abuse treatment. HHUNY has a legal and ethical obligation to safeguard that information.

Employees should not seek access to personal information about individuals, or make use of any such personal information, except as necessary to performance of work on behalf of HHUNY or its customers. Personal information may not be disclosed to third parties, except in accordance with HHUNY Privacy Policies and Procedures, and as authorized by law. HHUNY has a Privacy and Data Security program which all employees must follow.

All Employees are required to comply with HHUNY Privacy and Data Security Policies and Procedures.

USE OF COMPUTER SYSTEMS

The computers, network, Internet connections, software applications and electronic mail systems (collectively referred to as “computer systems”) made available by HHUNY to Employees are intended for use to support the business of HHUNY and HHUNY customers, and to help Employees do their work.

HHUNY computer systems are to be used for business purposes only. Incidental personal use of computer systems is permissible so long as: (a) it does not consume more than a trivial amount of resources, (b) does not affect Employee productivity, and (c) does not interfere with any HHUNY business activity.

HHUNY computer systems may not be used for any offensive or illegal purpose.

All employees and associates must comply with HHUNY Policies and Procedures governing use of HHUNY computer systems.

REIMBURSEMENT PRACTICES AND BILLING ERRORS

HHUNY is committed to ensuring that its reimbursement practices comply with all federal and state laws, regulations, guidelines, and policies, ensuring accurate billing of claims for services that are actually rendered and deemed medically necessary, correcting inappropriate billings, and refunding overpayments as necessary. All Employees are required to follow HHUNY Policies and Procedures governing Reimbursement Practices and Billing Errors.

MAINTENANCE OF RECORDS

Employees and contractors must record information fully, accurately, and honestly. Relevant information must not be concealed, omitted, falsified, or altered.

Information provided in reports to supervisors, HHUNY management or directors, HHUNY customers, and government authorities must be complete and accurate.

Records must be retained as required by law, HHUNY agreements with its customers, and HHUNY Policies and Procedures.

Records pertaining to government investigations or audits of HHUNY or HHUNY customers or business associates may not be disposed or destroyed without the express written approval of the Compliance Officer.

Records pertaining to threatened or pending litigation involving HHUNY may not be disposed or destroyed without the express written approval of HHUNY counsel.

Disposal of records and electronic media must be in accordance with HHUNY data security policies and procedures.

TERMINATION OF EMPLOYMENT

All directors, employees and contractors must return all HHUNY property upon termination of employment, contracts for the delivery of services to HHUNY, or participation as a member of the Board of Directors. This includes, but is not limited to, documents, records, databases, computers, electronic media, HHUNY identification, security devices, keys, and credit cards. Use of HHUNY computer systems must be discontinued. Supervisors are required to notify HHUNY information systems managers of any termination of employment by a member of their staff so that access to computer systems and confidential records may be properly controlled.

GOVERNMENTAL INVESTIGATIONS

HHUNY will fully cooperate with governmental investigations or audits of HHUNY or programs managed by HHUNY. Governmental requests for information about HHUNY or its customers should be forwarded to the Compliance Officer.

WORK ENVIRONMENT

HHUNY is committed to creating a safe and professional workplace where employees and others are treated with respect and without regard to their race, sex, age, religion, national origin, color, marital status, sexual orientation, disability, or other protected characteristics. Discrimination or harassment of any sort violates these values.

All Employees are prohibited from considering someone's race, color, religion, sex, national origin, age, sexual orientation, disability, or other protected characteristic in making decisions about hiring, placement, assignment of duties, training, promotion, termination, compensation, benefits, and other work terms.

Sexual harassment is prohibited. Sexual harassment includes any form of unwelcome sexual advance, request for sexual favors, or other verbal or physical conduct of a sexual or sex-based nature.

COMPLIANCE OFFICER

APPOINTMENT OF COMPLIANCE OFFICER

HHUNY will appoint an employee with the education, training, experience, and integrity to perform the duties and responsibilities of Compliance Officer, set forth below.

The duties of the employee designated as Compliance Officer may be combined with other duties as long as compliance responsibilities are carried out satisfactorily.

The Board of Directors and Executive Director shall ensure that the Compliance Officer has the training, time and resources necessary to effectively design, implement and monitor the compliance program.

REPORTING RELATIONSHIP; ACCESS TO INFORMATION

The Compliance Officer will have direct lines of communication to the Executive Director and the HHUNY Board of Directors. He or she will not report directly to the Chief Financial Officer. He or she will work cooperatively with HHUNY counsel and may consult with counsel as needed, but will not report directly to counsel.

The Compliance Officer will participate in meetings of senior management and the HHUNY Board of Directors at which compliance reports or compliance related issues are discussed.

The Compliance Officer will receive copies of reports on compliance-related matters from operating units within HHUNY. All operating units will inform the Compliance Officer about patterns or significant concerns related to compliance with legal and regulatory standards, the Code of Conduct, or Compliance Policies and Procedures.¹

The Compliance Officer will be advised of meetings affecting the compliance program such as quality assurance, risk management, billing and coding, and attend such meetings, as appropriate.

¹Note that the Compliance Officer is not single-handedly responsible for HHUNY compliance with legal and regulatory requirements. Other operating units may have compliance monitoring and reporting responsibilities, and the HHUNY Board of Directors and management has ultimate responsibility for meeting statutory and regulatory requirements.

The Compliance Officer will have the authority to review all documents and records related to compliance with legal, regulatory, and ethical standards by HHUNY, HHUNY subsidiaries, and programs managed by HHUNY or its subsidiaries. This includes, but is not limited to, patient records (when necessary), billing records, contracts, financial records, and arrangements with employees, independent contractors, suppliers, agents, referral sources, and others.

DUTIES AND RESPONSIBILITIES

The Compliance Officer is responsible for the day-to-day operation of the compliance program. The Compliance Officer's primary responsibilities include:

- Develop compliance policies and procedures, and work with HHUNY management and counsel to update such policies and procedures to reflect changes in the law, regulations, payer requirements, or HHUNY operations.
- Oversee and monitor implementation of the compliance program.
- Promote evaluation and auditing processes that are reasonably effective in identifying compliance issues. Directing internal compliance audits as necessary.
- Maintain a compliance reporting system that allows anonymous reporting of compliance problems or concerns.
- Log reports of known or suspected non-compliance with applicable standards and track the progress of investigation of such reports.
- Coordinate internal investigations of reports of known or suspected compliance violations by HHUNY, HHUNY subsidiaries (HHUNY), or programs managed by HHUNY (i.e., health home programs).
- Work with HHUNY management and departments, operators of programs managed by HHUNY (such as Lead Health Homes), providers, and contractors to ensure that appropriate action is taken in response to identified compliance concerns.
- Coordinate efforts by HHUNY and the operators of programs managed by HHUNY (Lead Health Homes) to monitor and ensure compliance with legal and regulatory requirements, including Medicaid program standards.

- Cooperate with compliance activities and investigations conducted by Lead Health Homes and other programs to which HHUNY (or HHUNY subsidiaries such as HHUNY) provides management services.
- Provide guidance to HHUNY personnel about compliance matters.
- Advise HHUNY management and HHUNY counsel about compliance related contract issues.
- Document compliance activities and HHUNY efforts to meet statutory, regulatory, and contractual obligations.
- Advise management and the Board of Directors about difficulties achieving compliance and implications of non-compliance.
- Advise operators of programs managed by HHUNY or a HHUNY subsidiary (HHUNY) about difficulties related to program compliance with statutory and regulatory standards. This specifically applies to Health Home Programs.
- Report on a regular basis to the Board of Directors, the Executive Director, and the Compliance Committee on the progress of implementation of the compliance program.
- Develop, coordinate, and participate in an education and training program that focuses on the elements of the compliance program and seeks to ensure that all appropriate employees, contractors, and management are knowledgeable of, and comply with, pertinent Federal and State standards.
- Work with supervisors to ensure that excluded individuals and entities are not employed or retained by HHUNY. Review public databases for this purpose. (*Public databases with information about excluded individuals and entities include: (i) U.S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities, available at <http://exclusions.oig.hhs.gov>; (ii) System for Award Management's (SAM) Excluded Parties List, <https://www.sam.gov>; and (iii) the NYS Medicaid Fraud Database available on the NYS Office of the Medicaid Inspector General website at <http://www.omig.ny.gov/index.php/fraud/medicaid-terminations-and-exclusions>.)*)
- Review the effectiveness of the compliance program annually, update the Compliance Plan, Policies and Procedures as necessary, and report to the Board of Directors.

COMPLIANCE COMMITTEE

APPOINTMENT

The Board of Directors shall have the discretion to appoint a Compliance Committee, which may include members of the Board of Directors, officers and employees or HHUNY, or both. In the event that the Board of Directors does not appoint a separate Compliance Committee, the Executive Committee of the Board of Directors shall serve that purpose.

FUNCTION

The function of the Compliance Committee is to:

- Review the Compliance Plan. Provide feedback to the Compliance Officer, and make recommendations regarding risk areas that should be addressed in the Compliance Plan. Recommend Board actions with regard to the Compliance Plan.
- Review HHUNY Compliance Policies and Procedures and proposed amendments to Policies and Procedures. Make recommendations to the Compliance Officer, the CEO/Executive Officer, and the full Board of Directors.
- Advise the Compliance Officer and HHUNY management with regard to implementation of the Compliance Plan.
- Monitor implementation of the Compliance Plan.
- Review internal and external compliance audit reports. Review corrective action plans and monitor implementation of those plans.
- Review periodic reports submitted by the Compliance Officer.
- Review complaints to the Board of Directors about compliance issues, including complaints of retaliation for good faith reports of known or suspected non-compliance with statutory or regulatory standards or the HHUNY Code of Conduct.

EDUCATION AND TRAINING

POLICY

Education and training are critical elements of the HHUNY compliance program. All employees and agents of HHUNY are expected to be familiar with the HHUNY Code of Conduct and understand their responsibilities with regard to compliance.

All employees and persons associated with HHUNY, including executives and members of the Board of Directors will receive training and education on compliance issues, expectations, and the operation of the compliance program.

Employees and contractors with responsibilities in identified risk areas (such as billing and coding) will receive more detailed compliance education related to their function and responsibilities.

Compliance training will be conducted periodically and will be part of orientation for new employees, associates, executives, and members of the Board of Directors.

TRAINING CURRICULUM

The Compliance Officer is responsible for coordinating development of the compliance education curriculum and ensuring that the curriculum and educational materials are updated as necessary.

The training program for all employees and associates will, at a minimum, address the following:

- The HHUNY Code of Conduct;
- Legal Obligations, including, but not limited to:
 - Prohibitions on submission of false claims;
 - Civil and criminal penalties for submission of false claims;
 - Obligations to disclose overpayments to government authorities;
 - Confidentiality of personal information; and
 - Whistleblower protection under federal and state laws.
- HHUNY Compliance Policies and Procedures;
- CCSI Compliance Policies and Procedures (when applicable);

- Reporting known or suspected compliance violations to supervisors and/or Compliance Officer;
- Communication channels (name, telephone number and email address of Compliance Officer, anonymous reporting); and
- Non-retaliation policy.

In addition to the above, targeted training will be provided to all employees and contractors whose work includes activities related to identified risk areas. Managers are required to assist the Compliance Officer in identifying risk areas that require specific training.

DISSEMINATION OF INFORMATION

HHUNY will disseminate compliance training information through a number of means, which may include:

- New employee orientation;
- Annual compliance training programs;
- Online training programs;
- HHUNY website;
- Newsletters;
- Distribution of notices to employees and associates;
- Posters; and
- Frequently asked questions (FAQs).

ATTENDANCE

Participation in compliance training is mandatory and is a condition of continued employment by HHUNY or continuation of contracts related to identified risk areas.

Employees may be disciplined for failure to participate in compliance training programs, with penalties up to and including dismissal.

Participation in compliance training will be documented. This may be accomplished through sign in sheets, meeting minutes, electronic tracking, or signed acknowledgements.

REPORTING COMPLIANCE VIOLATIONS

POLICY

HHUNY recognizes that a critical aspect of its compliance program is the establishment of a culture that promotes prevention, detection, and appropriate response to instances of misconduct or non-compliance with legal and regulatory standards governing programs that HHUNY or HHUNY subsidiaries operate or manage. To promote this culture, HHUNY has established a compliance reporting process and a strict non-retaliation policy to protect employees and others who report problems and concerns in good faith.

COMMUNICATION LINES TO THE COMPLIANCE OFFICER

Open lines of communication with the Compliance Officer are essential to the success of our compliance program. HHUNY will encourage reporting of compliance violations by:

- Informing all employees, agents, directors and independent contractors of the identity of the Compliance Officer, his or her contact information, and methods of reporting of compliance problems or concerns. This information will be included in training materials and posted on the HHUNY website;
- Enabling anonymous and confidential reporting of potential compliance issues; and
- Strictly enforcing its policy of non-retaliation against persons who make good faith reports of compliance problems or concerns.

REPORTING PROCEDURE

All HHUNY employees and associates have an affirmative duty to promptly report any known or suspected violations of the HHUNY Code of Conduct, HHUNY policies and procedures, or laws and regulations governing programs operated or managed by HHUNY or its subsidiaries (HHUNY).

Reports of potential compliance issues may be made at any time to the Compliance Officer, a senior manager, or a supervisor who has the authority to review or address the question or concern.

If reports of compliance issues are provided to anyone other than the Compliance Officer, the person receiving the report should provide a report to the Compliance Officer of the potential compliance issue in sufficient detail that the Compliance Officer can track and log the report and ensure that a complete investigation can be completed.

Reports to the Compliance Officer may be made in person, by telephone, by electronic mail, by US Mail, by calling a telephone line dedicated for the purpose of receiving such notification, or by dropping it in the compliance drop box.

Reports may be made anonymously by calling the dedicated telephone line, using the compliance drop box, or mailing information to the Compliance Officer. No effort will be made to discover the identity of an anonymous reporter.

PROTECTIONS

The identity of reporters will be safeguarded to the fullest extent possible if requested. Reports of possible compliance problems will be kept confidential.

HHUNY strictly prohibits intimidation of and retaliation against individuals who make good faith reports of known or suspected compliance violations. If a person believes that he or she has been retaliated against for reporting a known or suspected compliance problem he or she should immediately report the retaliation to the Compliance Officer.

GUIDANCE

Any HHUNY employee or associate may seek guidance from the Compliance Officer regarding the HHUNY Code of Conduct, the HHUNY Compliance Plan, or applicable compliance obligations. The Compliance Officer or a designee will respond to all such inquiries.

ENFORCEMENT OF COMPLIANCE STANDARDS

POLICY

Employees and independent contractors who violate the HHUNY Code of Conduct, HHUNY Compliance Policies and Procedures, or laws and regulations governing programs operated or managed by HHUNY or a subsidiary (HHUNY) will be subject to disciplinary action, up to and including termination.

The following actions may result in disciplinary action:

- Knowing participation in actions that violate the Code of Conduct, Compliance Policies and Procedures, or laws and regulations governing programs operated or managed by HHUNY or a subsidiary (HHUNY);
- Encouraging, directing, facilitating, or permitting non-compliant behavior;
- Failure to report known or suspected compliance violations;
- Failure to cooperate in an investigation;
- Hiding or destroying records of known or suspected compliance violations;
- Failure to comply with HHUNY policies and procedures governing the prevention, detection, or reporting of fraud and abuse; and
- Retaliation against an individual for reporting a possible violation or participating in an investigation.

Reporting a compliance violation or cooperating in a compliance investigation will not excuse an employee of his/her own misconduct, but it will be considered as a mitigating factor in disciplinary actions.

PROCEDURES

- Disciplinary action for violation of the Code of Conduct, Compliance Policies and Procedures, or laws and regulations governing programs operated or managed by HHUNY will be taken in accordance with normal HHUNY procedures, except that the Compliance Officer shall participate as described below.
- When the determination is made that a compliance violation has occurred, the Compliance Officer will notify the Executive Director and the individual's supervisor. In the event of a violation by the Executive Director, the Compliance Officer shall notify the Chairperson of the Board of Directors or the Compliance Committee.

- The Compliance Officer will advise the appropriate supervisor/manager and the Executive Director in determining disciplinary action related to an instance of non-compliance.
- The Compliance Officer and Executive Director will be responsible for assuring that disciplinary actions related to non-compliance with the law, regulations, and Compliance Program, including the Code of Conduct, are consistent with actions taken in similar instances of non-compliance.
- The Compliance Officer will maintain a written record of disciplinary actions related to compliance violations and will reference these records when necessary to ensure consistency in application of disciplinary measures.
- Discipline will be appropriately documented in the disciplined employee's personnel file (or in the independent contractor's file), along with a written statement of reason(s) for imposing such discipline.
- Disciplinary action will be based on the nature and severity of the compliance violation, the role of the employee or contractor charged with the violation, the knowledge or intent of the violator, historic performance, and other factors.
- Progressive discipline may be applied if appropriate. Examples of disciplinary action that may be taken include but are not limited to: (a) verbal counseling or warning; (b) counseling with written warning; (c) retraining; (d) reassignment or demotion; (e) suspension without pay; and (f) termination of employment (or arrangement with an independent contractor).

COMPLIANCE RISK AREAS; AUDITING AND MONITORING

POLICY

HHUNY will establish a system for identification of compliance risks specific to HHUNY operations, including the operations of subsidiary organizations such as Health Homes United New York (HHUNY).

The Compliance Officer will work with HHUNY operating units and operators of programs managed by HHUNY or HHUNY subsidiaries (HHUNY) to establish reasonable systems for periodic internal, and, as appropriate, external, monitoring, audit and evaluation of compliance with legal and regulatory standards. He or she will report the results of such evaluations or audits to HHUNY management and the HHUNY Board of Directors.

HHUNY management and the HHUNY Board of Directors will review compliance reports, confer with the Compliance Officer and external advisors, and take action to ensure an appropriate response to detected instances of non-compliance.

COORDINATION WITH HEALTH HOME PROGRAMS

The HHUNY Compliance Officer will promptly inform his/her counterpart at a Lead Health Home of any correspondence received from regulatory authorities and any visit, audit, or survey of the program that is conducted by a regulatory authority.

HHUNY will collaborate with Health Homes in identification of compliance risk areas, \establishing priorities for audits of health home programs, evaluation and response to internal or external audit reports, and implementation of corrective measures when required.

The HHUNY Compliance Officer will share reports of internal or external audits of health home programs and Care Management Agencies with the Lead Health Home Compliance Officer.

HHUNY will cooperate with Lead Health Home investigation of compliance concerns related to HHUNY work in support of the Health Home program, and provide reasonable access to HHUNY records, subject to legal standards governing use or disclosure of personal information.

If an audit report identifies non-compliant activities by a Care Management Agency, the agency will be informed and asked to take corrective action.

IDENTIFICATION OF COMPLIANCE RISK AREAS

The Compliance Officer will lead an annual process of identification of compliance risk areas specific to HHUNY and its affiliates. He or she will consult with operating units, HHUNY management, contractors, legal counsel and the Compliance Committee as necessary to inform this evaluation. The goal of this process is to identify priorities for monitoring and auditing of compliance with legal and regulatory standards.

This process may be informed by:

- The results of previous internal or external audits;
- Identified compliance problems;
- Corrective action plans, if any;
- Suggestions from the Compliance Committee, HHUNY management, the Health Home Advisory Committee, contractors, customers, or advisors;
- Work plans and publications issued by the New York State Office of Medicaid Inspector General (OMIG) or the US Department of Health and Human Services Office of Inspector General (OIG);
- OMIG and OIG audits;
- Risk areas identified by appropriate New York State agencies;
- Risk areas identified in guidance issued by OMIG or the OIG;
- Changes to applicable laws and regulations.

On an annual basis, the Compliance Officer will suggest priorities for auditing and monitoring of the identified risk areas to the Executive Director and the Compliance Committee.

Taking into consideration the resources available to HHUNY, the Compliance Officer and the Executive Director will determine the focus and scope of routine monitoring and audits of HHUNY operations. At a minimum, HHUNY will establish a system to ensure that false claims for payment are not being submitted.

The Compliance Officer will include all scheduled audits on an annual work plan that is shared with the Executive Director, Compliance Committee and Board of Directors.

MONITORING OF PROGRAM COMPLIANCE

HHUNY executives responsible for management of specific programs or specific departments (the “Program Director”) will monitor compliance in identified risk areas and promptly inform the Compliance Officer and the Executive Director of identified compliance problems. Program compliance with applicable regulations and quality measures will be reviewed annually. The results of such reviews will be documented and shared with the Compliance Officer.

The Compliance Officer and the HHUNY senior management team will ensure that ongoing monitoring is conducted as scheduled and that annual reviews are properly conducted, documented, and reported.

The Compliance Officer will assist program managers who have questions about applicable regulations and quality measures, compliance indicators, and compliance reviews.

INTERNAL AUDITS

The Compliance Officer will be responsible for oversight of the HHUNY internal compliance auditing system. He or she is authorized to delegate auditing duties to other HHUNY personnel, accountants, consultants, and attorneys, as necessary and appropriate.

The Compliance Officer will determine the sample size, sample criteria, and compliance indicators to be reviewed prior to each internal audit. To the extent feasible, audit review tools will be standardized and approved by the Compliance Officer.

A written report of audit findings will be forwarded to the Compliance Officer, Program Director, Executive Director and the Compliance Committee within seven days of completion of an internal audit.

EXTERNAL AUDITS

Any correspondence from any regulatory agency charged with administering a federally or state-funded program received by any department of HHUNY will be copied and promptly forwarded to the Compliance Officer for review and subsequent discussion by the Compliance Committee.

HHUNY executives and program managers must immediately notify the HHUNY Compliance Officer of any visits, audits, investigations, or surveys by any regulatory agency or authority. Any oral or written report of the results of any such visits, audits,

investigations, or surveys should be forwarded to the HHUNY Compliance Officer promptly upon receipt.

HHUNY will cooperate fully in any government audit, investigation, or survey of HHUNY or of programs operated or managed by HHUNY.

REVIEW AND RESPONSE TO AUDIT REPORTS

Within fifteen days of receipt of a written report of the findings of an internal or external audit, the Program Director and Compliance Officer will evaluate the audit results, identify potential or actual non-compliance with applicable standards and regulations, and identify trends in program compliance. As necessary, the Compliance Officer will conduct a further investigation to determine the breadth and scope of non-compliance and necessary corrective actions.

Within thirty days of receipt of an audit report, the Program Director, with the support of the Compliance Officer, will prepare a written plan of action to correct and prevent non-compliance.

Program Directors are responsible for ensuring that corrective measures are implemented in a timely manner. The Compliance Officer will monitor the implementation of corrective measures.

The Compliance Officer will assess whether a plan of correction has been fully implemented, whether the correction implemented is addressing the non-compliant issue, and if the implemented plan of correction should remain in effect and inform the Executive Director and the Compliance Committee.

The Compliance Officer will keep a written record of all internal audits, including records reviewed, audits results, corrective actions, and the results of corrective actions.

The Compliance Officer and Executive Director will evaluate the effectiveness of internal monitoring and auditing efforts periodically. The Compliance Officer will report to the Compliance Committee on the general status of compliance reviews, the outcome of compliance auditing and monitoring, and the corrective actions taken.

The Compliance Officer will report the results of auditing and monitoring activities and corrective actions to the Board of Directors at least annually. The report will also include an assessment of any compliance risks to HHUNY and HHUNY managed programs.

FALSE CLAIMS

HHUNY will establish systems for prepayment and post-payment monitoring of claims submitted on behalf of health homes, with the goal of identifying false claim(s), correcting billing errors, and voiding inappropriate claims. It is impossible to review all claims, but a reasonable sampling of claims will be reviewed on an ongoing basis.

HHUNY will periodically audit claims submitted on behalf of Lead Health Homes. Audits may be conducted (i) horizontally (sample all claims from all providers submitted on behalf of a single health home or all health home programs managed by HHUNY), or (ii) vertically (sample claims from particular Care Management Agencies).

Audits will assess compliance with health home program standards, including but not limited to documentation, appropriateness of billing, completion of individual service plans, and delivery of required services. The Compliance Officer will select the Care Management Agencies to be audited, determine sample sizes, monitor audits, review audit results, work with Program Directors to develop plans of corrective action, and monitor the effectiveness of corrective measures.

Care Management Agencies will be informed of the results of HHUNY audits of their health home claims and asked to implement corrective measures when necessary. Care Management Agencies will be required to refund payments for improper claims.

HHUNY will implement a system for correction of identified billing errors or non-compliant claims. Non-compliant claims will be voided if feasible. HHUNY will disclose and refund overpayments.

FINANCIAL AUDITS

The Chief Financial Officer will work with outside auditors to audit HHUNY financial records and assess compliance with Generally Accepted Accounting Principles. Audit reports will be shared with the Compliance Officer.

RESPONSE TO COMPLIANCE ISSUES

POLICY

It is the policy of HHUNY to promptly investigate reports of noncompliance with legal and regulatory standards or the Code of Conduct. If non-compliance is detected, HHUNY will implement corrective measures, report non-compliance to authorities as required, and take steps to prevent similar violations in the future. HHUNY will take immediate action if it discovers a serious threat to the health or safety of individuals served by programs it operates or manages.

INVESTIGATION OF COMPLIANCE REPORTS

The Compliance Officer will oversee the conduct of internal investigations of compliance reports.

The Compliance Officer will have unfettered access to HHUNY records and access to resources needed to enable thorough investigation of compliance concerns. At the request of the Compliance Officer and as directed by the Executive Director, staff of other departments may assist the Compliance Officer in an investigation.

The Compliance Officer may consult with HHUNY legal counsel as necessary to ensure a thorough understanding of underlying legal and regulatory standards. If HHUNY resources are insufficient to enable the Compliance Officer to conduct an investigation, or there is a conflict of interest that impedes an investigation, the Compliance Officer may engage independent counsel, consultants, or auditors.

Upon receipt of a report of known or suspected non-compliance with applicable legal and regulatory standards, the Compliance Officer will conduct a preliminary inquiry to determine if sufficient evidence of non-compliance to warrant further inquiry. If so, a more complete investigation will be conducted.

If the Compliance Officer believes that there is evidence of a serious violation of law or that the facts and circumstances suggest a significant risk of civil litigation, he or she shall inform legal counsel and the Executive Director. In those circumstances, legal counsel may lead the investigation, with the assistance of the Compliance Officer as necessary.

Potential compliance problems will be promptly, fairly, and thoroughly investigated by impartial investigator(s) who are independent of the department implicated by compliance allegations. Employees and other persons who have a real or potential conflict of interest

related to a compliance allegation must disclose the conflict and must not participate in investigation of the allegation or HHUNY decisions in response to a finding of non-compliance.

All HHUNY personnel are expected to cooperate fully in any investigation of compliance allegations. Relevant information and records must be disclosed and made available to investigators. Relevant documents and records may not be disposed or destroyed without the written permission of the Compliance Officer or legal counsel.

Investigators will promptly interview any individuals who may have relevant information. Interviewees will be reminded of the HHUNY policy of non-intimidation and non-retaliation for disclosure of compliance problems or cooperation in compliance investigations. They will be asked to refrain from discussing the topic and questions asked during the interview.

Documentation and evidence accumulated in the course of an investigation will be delivered to the Compliance Officer, and maintained in a secure and confidential manner as appropriate. Documentation, evidence will be retained for seven years.

An investigative report will be prepared by the lead investigator and retained by the Compliance Officer. At a minimum, the investigative report will include:

- A description of the alleged compliance issues;
- The identities of the individuals interviewed, if any;
- A description of the documents, records and other evidence reviewed in the course of the investigation;
- Observations or findings of fact; and
- Recommendations for discipline or corrective action, if any.

EVALUATION OF INVESTIGATION REPORTS

The Compliance Officer will evaluate investigation reports, and may recommend discipline, corrective action, or further investigation of compliance problems to HHUNY management. If serious compliance deficiencies are identified, the Compliance Director will review HHUNY policies and procedures and suggest appropriate revisions.

Investigative reports and the recommendations of the Compliance Officer will be delivered to the Executive Director for further consideration.

CORRECTIVE ACTION

HHUNY management will prepare a plan for correction of compliance deficiencies, with benchmarks and deadlines.

The corrective action plan may include, but need not be limited to, revision of HHUNY policies and procedures, and education and training of HHUNY personnel about the changes in practice required to correct compliance deficiencies and prevent future compliance violations.

A copy of the corrective action plan will be provided to the Compliance Officer. The Compliance Committee will be informed of significant compliance issues and plans for corrective action.

HHUNY management will ensure that corrective action plans are fully implemented. Individuals will be assigned responsibility for each aspect of the corrective action plan, and their performance of this responsibility will be included in personnel performance reviews.

The Compliance Officer and HHUNY management will monitor the progress of implementation of corrective measures, evaluate the effectiveness of the corrective measures and determine whether the plan should remain in effect or be revised. The Compliance Committee will be informed about the progress of implementation and effectiveness of corrective measures.

REPORTS TO GOVERNMENT AUTHORITIES

HHUNY will report compliance deficiencies to the New York State Department of Health or the State Office of the Medicaid Inspector General as and when required by law.

OVERPAYMENTS

Acting on behalf of Lead Health Homes, HHUNY processes Care Management Agency claims and bills the New York State Medicaid program for Health Home Services.

If HHUNY discovers that improper claims have been submitted and paid, it will report the overpayment to the Department of Health using the DOH Medicaid claims system and refund the overpayment. Outstanding claims may be voided.

As necessary, HHUNY will self-disclose overpayments and the reasons for overpayments to the Office of the Medicaid Inspector General. OMIG guidance about this issue may be found on its website, www.omig.ny.gov.

NON-INTIMIDATION AND NON-RETALIATION

HHUNY strictly prohibits intimidation of or retaliation against individuals for good faith participation in the HHUNY compliance program. Any HHUNY employee or associate who participates in such intimidation or retaliation is subject to discipline, up to and including termination of employment or independent contracts.

Good faith participation in the compliance program includes, but is not limited to:

- Reporting known or suspected violations of the HHUNY Code of Conduct or laws and regulations governing programs operated or managed by HHUNY;
- Providing information to investigators of alleged compliance violations;
- Serving as an investigator of non-compliance;
- Routine monitoring of program operations (such as Medicaid billing) to discover non-compliance in real time;
- Participation in compliance audits;
- Implementation of corrective measures; and
- Providing information requested by public authorities.

If an employee or associate believes that he or she has been subject to intimidation or retaliated against for good faith participation in the HHUNY compliance program, he or she should immediately report the intimidation or retaliation to the Compliance Officer.

The Compliance Officer will ensure that allegations of intimidation or retaliation are promptly, thoroughly, and objectively investigated.

Any HHUNY employee or associate who participates in intimidation or retaliation is subject to discipline, up to and including termination of employment or independent contracts.