

Procedure Number: CC-017  
Compliance Program Overview

<b>The Arc Chemung-Schuyler</b>	Effective Date: April 2002  Reviewed/Revised: 1/24, 6/24, 6/25  Chief Executive Officer:  Board Approval Required: Y/N Approval Date:
Procedure Number: CC-017  Procedure Title: Compliance Program Overview	Position Responsible: Quality & Compliance Director
Regulatory Reference:  OMIG, Arc NY, NY Social Services Law	Audience:  <input checked="" type="checkbox"/> All <input type="checkbox"/> Staff <input type="checkbox"/> Volunteers <input type="checkbox"/> Board Members <input checked="" type="checkbox"/> Other (Fill In) Contractors

**Purpose:** This policy and procedure describe the Arc Chemung-Schuyler's Compliance Program. The Arc Chemung-Schuyler developed this policy and procedure, including our Standards of Conduct, to guide our best efforts to operate an effective compliance program consistent with federal, state, and local statutes, rules, regulations, and Medicaid Program requirements as well as the compliance program expectations of the Arc New York.

**Policy:** The Arc Chemung-Schuyler is dedicated to improving the lives of people with intellectual and developmental disabilities, and is committed to complying with the statutes, rules, and regulations of the federal, state, and local governments, including but not limited to those promulgated by the U.S. Centers for Medicare and Medicaid Services (CMS), Office of the Medicaid Inspector General (OMIG) and the New York State Office for People with Developmental Disabilities (OPWDD). The Arc Chemung-Schuyler supports a work environment where high standards of ethical and legal behavior are recognized and practiced. The Arc Chemung-Schuyler expects that all aspects of business activity will be performed in compliance with this policy and procedure, professional standards and applicable statutes, rules and regulations. To achieve these standards and expectations, it is the policy of Arc Chemung-Schuyler to adopt and implement a compliance program.

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

**References:** The Arc Chemung-Schuyler is governed by several federal, state, and local statutes, rules, and regulations; however, the focus of this policy is on those pertaining to participation in and compliance with the Medical Assistance Program (Medicaid and Medicare). Applicable statutes, rules and regulations used to design this policy include, New York State Title 18 regulations, specifically those under Part 521 that establishes requirements to adopt and implement programs designed to detect and prevent fraud, waste, and abuse in the Medical Assistance program. Social Services Law Part 363-d which establishes expectations for provider compliance programs was also used to design this policy and procedure. The Arc New York Chapter Manual also requires that all operating Chapters shall have in effect a plan for corporate compliance that contains all the elements of a corporate compliance plan required by the OMIG (Section III-15.0: Corporate Compliance, Arc New York Chapter Manual) as well as a Compliance Committee that is a committee of the Chapter Board. (Section II-5.1: Model Chapter By-Laws, Article XI, Sections 1 &2)

**Definitions:**

Affected Individuals: all persons who are affected by the required provider's risk areas including the required provider's employees, the chief executive and other senior administrators, managers, contractors, agents, subcontractors, independent contractors, and governing body and corporate officers. (N.Y. Comp. Codes R. & Regs. tit. 18, § 521-1.2)

**Responsibilities:** This policy and procedure are overseen by the Arc Chemung-Schuyler's designated Compliance Officer (CO) and Compliance Committee (CC). The CO and CC are responsible for monitoring implementation of this policy and procedure, reviewing and revising as necessary; but no less frequent than annually.

**Procedures:** The Arc Chemung-Schuyler fulfills our policy of adopting and implementing a compliance program, structured around the following principles:

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

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

**Written Policies, Procedures, and Standards of Conduct**

At a minimum, the Arc Chemung-Schuyler maintains written policies and procedures outlining the operation of the Compliance Program inclusive of the aforementioned principles, confidentiality practices, and a commitment to an environment of non-intimidation and non-retaliation. The Arc Chemung-Schuyler reviews, revises, and develops, as appropriate, new compliance program policies and procedures, annually and as necessary, to ensure that the Arc Chemung-Schuyler's Compliance Program activities are conducted effectively and consistent with applicable statutes, rule regulations, Chapter and Arc New York policy.

Review of the written policies, procedures and standards of conduct must determine the following:

1. If the written policies, procedures, and standards of conduct have been implemented.
2. Whether affected individuals are following the policies, procedures, and standards of conduct.
3. Whether such policies, procedures and standards of conduct are effective.
4. Whether any updates are required.

**Standards of Conduct**

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

The Arc Chemung-Schuyler requires that all affected individuals sign a written acknowledgment that they understand and will follow the Arc Chemung-Schuyler's Standards of Conduct.

### **Compliance Officer and Compliance Committee**

The Arc Chemung-Schuyler is committed to the operation of an effective compliance program and has assigned compliance oversight responsibilities to individuals at the management level. Individuals with day-to-day compliance oversight authority occupy high levels in the Arc Chemung-Schuyler's organizational structure, including a Compliance Officer (CO), and are empowered to implement the Compliance Program, investigate compliance concerns, report compliance concerns directly to those in higher positions of authority, up to and including, the Arc Chemung-Schuyler Board of Directors and the Chief Executive Officer (CEO). The CO is accountable to the CEO or their designee who must be a senior manager. The CO does not hold a position in the Arc Chemung-Schuyler's legal or financial departments. The CO receives annual performance evaluations that assess the duties they are to perform. An annual assessment determining whether the CO is allocated sufficient staff and resources to satisfactorily perform their responsibilities for the day-to-day operation of the compliance program is also completed and documented. This assessment is conducted as part of a broader compliance program effectiveness review.

The Arc Chemung-Schuyler maintains a Compliance Committee (CC) operating under a written charter. The CC reports directly to the CEO and Board of Directors while coordinating committee activities with the CO.

A key task of the Arc Chemung-Schuyler CC is to ensure that all affected individuals have received compliance training and education both through orientation and annually. This task will be accomplished through coordination with the CO.

At a minimum, membership on the CC consists of senior managers from operations, finance, compliance, and human resources.

At a minimum, the CC issues reports to the CEO and Board of Directors.

Meetings occur quarterly and more if requested by the CO or CC.

### **Compliance Training and Education Program**

The Arc Chemung-Schuyler conducts a detailed compliance training and education program for all affected individuals to the extent that they are affected by Arc Chemung-Schuyler's risk areas. The Arc Chemung-Schuyler's training program includes a training plan that outlines compliance subjects or topics required for all affected individuals, timing and frequency of the trainings, which affected individuals are required to attend specific trainings, how attendance for each training is recorded, and how periodic evaluation of training effectiveness is completed. Arc Chemung-Schuyler continuously identifies training topics, including those arising as a result of self-monitoring,

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audits by regulatory agencies and regulatory developments. The Arc Chemung-Schuyler provides refresher training for affected individuals on, at minimum, an annual basis.

New employees receive training in the Arc Chemung-Schuyler Standards of Conduct, this policy and procedure and those policies and procedures relevant to their job duties as part of an orientation program. The Arc Chemung-Schuyler tailors the training based on the roles and responsibilities of each group of individuals and in a manner that the individual can understand. The Arc Chemung-Schuyler does not lean on self-study programs based ONLY on written policy distribution as the means of training affected parties.

**Lines of Communication**

The Arc Chemung-Schuyler makes available lines of communication to all affected individuals for the purpose of supporting anonymous or confidential reporting of and asking questions about compliance concerns to the CO. The Arc Chemung-Schuyler makes available telephone, email, website-based correspondence, interoffice mail, regular mail, anonymous hotline, face-to-face interaction as the method(s) of reporting compliance concerns to the CO.

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

It is an expected good practice, when one is comfortable with it and thinks it is appropriate under the circumstances, for compliance concerns to be raised first with a supervisor. The supervisor then makes the CO aware of any compliance concerns. If this is not comfortable or not a viable option, then parties are encouraged to contact the Compliance Hotline at (607) 333-9252 or ext. 555 from internal agency phone where all reports are confidential and can be made anonymously. Additionally, affected individuals may contact the CO directly as a means of confidential reporting.

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

**Disciplinary Standards**

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The Arc Chemung-Schuyler maintains written disciplinary policies and procedures pertaining to violations of the Compliance Program that are published and disseminated to all affected individuals.

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

The Arc Chemung-Schuyler strives to enforce disciplinary standards fairly and consistently with the same disciplinary action applied to all levels of personnel.

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

Resolution of disciplinary issues will be determined through direct cooperation with the appropriate manager, Human Resources, and the CO and, as appropriate, the CEO of the Arc Chemung-Schuyler. The degree of discipline may range from counseling, verbal warnings, written warnings, recommended change or discontinuation of privileges, termination of a contract, termination of employment or removal from a particular position or function.

### **Auditing and Monitoring**

The Arc Chemung-Schuyler is committed to fostering a culture of compliance through the implementation of a system for the routine identification of compliance risk areas to detect, correct and prevent non-compliance behaviors. Through the process of our compliance reporting structure, the articulation of compliance-related roles and responsibilities at every level of the Arc Chemung-Schuyler's operations, and through the utilization of our organizational experience, detection and correction of problems is expedited. If an internal investigation substantiates a reported violation, then it is our policy to engage in a two-fold process:

(1) to initiate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary; and (2) implementing systemic changes to prevent a similar violation from recurring in the future.

The Arc Chemung-Schuyler is committed to routinely conducting internal audits of compliance risk areas. Results of internal and external audits are shared at minimum with the CC and Arc Chemung-Schuyler Board of Directors. Arc Chemung-Schuyler also conducts annual reviews of the compliance program to determine and evaluate the program's effectiveness and

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any need for correction or revision. The results of annual compliance program reviews are shared at minimum with the CEO, senior management, the CC, and the Board of Directors.

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

**Responding to Compliance Issues**

The Arc Chemung-Schuyler maintains a system to prevent, detect, investigate, and correct non-compliance with Medical Assistance Program requirements. This system is designed to ensure appropriate response, investigation, resolution, and proper reporting of compliance issues. This system includes the implementation of procedures, policies, and systems as necessary to reduce the potential for recurrence. The Arc Chemung-Schuyler also maintains a system that ensures prompt reporting of compliance issues in a manner consistent with applicable statutes, rules, and regulations.

If a compliance issue requires reporting and returning of overpayment, this will be completed in accordance with the appropriate Self-Disclosure Program requirements.