Chapter 3
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SARATOGA COUNTY MEDICAID CORPORATE COMPLIANCE PROGRAM (SCMCCP)

I. Policy

The policy of the County of Saratoga in its oversight role of the Saratoga County Mental Health Center (SCMHC), the Saratoga County Public Health Nursing Service (SCPHNS), the Saratoga County Youth Bureau (SCYB), collectively known as the County Providers, is to conduct its business in compliance with applicable federal, state, and local laws and regulations, and to adhere to the highest ethical standards.

The County of Saratoga recognizes that the federal and state agencies responsible for enforcement of Medicare and Medicaid laws and regulations applicable to healthcare providers have encouraged the development and implementation of formal compliance programs by health and human service providers.

The development and implementation of a formal compliance program is consistent with Saratoga County's efforts to improve quality and performance and further reflects its long-standing commitment to conduct its business in compliance with applicable laws and regulations and the highest ethical standards.

Saratoga County wishes to ensure that the compliance program is effective in identifying and correcting practices and policies that are not in compliance with applicable laws and regulations, including, where necessary, provisions for disciplinary action against those employees and agents who fail to comply with such laws and regulations.

Saratoga County, through the Saratoga County Medicaid Corporate Compliance Program (SCMCCP) will develop specific standards of conduct and policies for education and training of employees and agents with respect to those standards, review and possibly enhance internal controls and monitoring systems, and foster effective communication and responsiveness on compliance issues.

All acts of SCMCCP employees shall be for the sole benefit of the county in any dealing which may affect it adversely. They should avoid, directly or indirectly, participating in any arrangement, agreement, investment, or other activity which could result in personal benefit at the expense of the interest of Saratoga County. All SCMCCP employees are subject to County policies regarding conduct and conflict of interest as these pertain to their respective offices.

II. Code of Conduct

The County Providers and their employees shall exercise the utmost good faith in all transactions touching upon their duties to the County. In their dealings, they are held to a strict rule of honesty and fair dealing. They shall not use their positions, or knowledge gained therefrom, so that a conflict might arise between the County's interest and that of the individual.

No County Provider employee shall accept any favor which might influence his/her official action or which might reflect upon his/her business conduct.

County Provider employees shall avoid outside employment or activity which involves obligations which may compete with or be in conflict with the interests of the county.

A full disclosure of all facts of any transaction or relationship which is subject to any doubt shall be made to the Saratoga County Medicaid Compliance Officer at any time that a conflict arises.

The Saratoga County Medicaid Corporate Compliance Officer will, immediately following the receipt of facts concerning any transaction or relationship which shall constitute or indicate a conflict of interest, report the same to the County Administrator for such action as deemed appropriate.

Violation of the Code of Conduct may result in discipline up to and including termination.

III. Compliance Officer Duties and Responsibilities

Purpose

Saratoga County Medicaid Corporate Compliance Program establishes the position of Compliance Officer (CO) to serve as the focal point for compliance activities and to be responsible for oversight of the development, implementation, and operation of the compliance program through the County Providers.

Policy

1. The CO's primary responsibility is the implementation and effective operation of the compliance program. The CO will have access to the County Providers, as required.

2. The County Administrator will provide oversight of the CO's activities.

Procedures

The CO shall be responsible for the following:

1. Oversee the operation of the SCMCCP.

2. Preside over quarterly meetings of the SCMCCP Board, which shall consist of the department heads of the County Providers.

3. Coordinate development and implementation of the compliance program.

4. Develop and maintain policies, rules, and procedures related to this program.

5. Ensure that County Providers have established audit controls and measures with regard to billings, payments, medical necessity and quality of care, governance, mandatory reporting, credentialing and other risk areas that are or should with due diligence be identified by the Provider.

6. Implement training and communication programs to ensure that all employees are educated regarding the compliance program, and other specific issues deemed necessary.

7. Establish employee reporting channels, which employees may use to report problems, complaints, non-compliance, and concerns without fear of retaliation.

8. Coordinate and conduct inquiries and/or investigations of any compliance problems, when and as deemed necessary.

9. Respond appropriately if a violation is uncovered, including a direct report to the County Administrator or external agency, if deemed necessary.

10. Monitor the compliance plan for periodic updates, when needed.

11. Report as needed to the County Administrator, but no less frequently than quarterly on the status of the compliance program, and annually to the Board of Supervisors.

12. Maintain a working knowledge of relevant issues, laws, and regulations and advise County Providers of changes.

13. Assist the County Administrator in certifying to the Medicaid Inspector General (OMIG), each December, that a compliance program is in place.

14. The CO shall be appointed on an annual basis by the County Administrator.

IV. Problem Reporting and Non-Retaliation

Purpose

Saratoga County Medicaid Corporate Compliance Program recognizes that a critical aspect of its compliance program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to federal, state, and private payer healthcare program requirements, as well as the organization's ethical and business policies. To promote this culture, the SCMCCP has established a problem resolution process and a strict non-retaliation policy to protect employees and others who report problems and concerns from retaliation. Any form of retaliation can undermine the problem resolution process and result in a failure of communication channels in the organization.

Policy

1. All employees have an affirmative duty and responsibility for reporting perceived misconduct, including actual or potential violations of statutes and regulations, County policies, practices and procedures, or professional Code of Ethics.

2. An "open-door policy" will be maintained at all levels of supervision of County Providers to encourage employees to report problems and concerns.

3. Employees must report all non-compliance.

4. Employees may report non-compliance, problems or concerns to their immediate supervisor, department head, department CO, CO, or County Personnel Department. Employees may also make a report through the Saratoga County Corporate Compliance Hotline at 518-885-5381, extension 2202. Reports can be made anonymously, however, no follow-up can then be made back to the employee.

5. Any form of retaliation against any employee who reports a perceived problem or concern is strictly prohibited.

6. Any employee who commits or condones any form of retaliation for reporting a compliance problem will be subject to discipline up to, and including, termination.

7. Employees cannot exempt themselves from the consequences of their own misconduct by reporting the issue, although self-reporting may be taken into account in determining the appropriate course of action.

Procedures

Procedures that apply to all employees:

1. Knowledge of misconduct, including actual or potential violations of laws, regulations, policies, procedures, or the organization's standards of conduct must be immediately reported to the Compliance Office (CO).

2. Employees may also report problems or concerns to the County Personnel Department, or the County Provider department supervisor, or department CO, if no action is taken by the CO.

3. If an employee's concern or problem cannot be satisfactorily resolved or special circumstances exist, the employee should report such concern or problem to the CO.

Procedures that apply to County Provider department supervisors:

1. County Provider department supervisors must take appropriate measures to ensure that all levels of County Provider department supervisors support this policy and encourage the reporting of problems and concerns. At a minimum, the following actions will be taken and become an ongoing aspect of the management process:

   - Meet with County Provider staff and employees to discuss the main points within this policy;

   - Provide County Provider staff and employees with a copy of this policy;

   - Post a copy of this policy on all employee bulletin boards.

- Ensure that County Provider employees receive education on the subject of Medicaid compliance laws and regulations.

- Conduct periodic education conferences for rules and regulations, attendance at which the employees shall evidence with a signature.

- Conduct periodic education conferences for the governing bodies of SCMCCP county departments.

Procedures that apply to the Compliance Officer (CO):

1. The CO will be responsible for the investigation and follow-up of any reported retaliation against an employee. The Personnel Department will investigate and follow up if the CO is a member of the department where the complaint originated.

2. The CO will report the results of the investigation into suspected retaliation to the County Administrator.

V. Compliance Issue Resolution

Purpose

Saratoga County has implemented this Compliance Program in an effort to establish a culture within the organization that promotes prevention, detection and resolution of misconduct or violations of statutes, regulations, or County policies. This is accomplished, in part, by establishing communication channels for employees to report problems and concerns. Employees are encouraged to report issues to the Compliance Officer (CO). The CO is responsible for responding to employee issues that are raised.

Policy

1. Employees are allowed to use any communication channel with the county administration they deem appropriate to report issues.

2. However, employees are redirected to the CO, whenever indicated or possible.

3. The CO is responsible for the compliance program; therefore, issues related to the operation of the program should be referred directly to the CO, either by the employee reporting actual or potential misconduct or violations or by the County Provider department supervisor approached.

4. To the extent practical or allowed by law, the CO must maintain the confidentiality or anonymity of an employee, when requested.

Procedures

1. Issues received by the CO will be either referred to the appropriate individual or responded to within 30 calendar days.

2. Issues with the potential for legal liability or containing issues of a legal nature will be referred to the County Attorney.

3. The CO will involve members of management and staff, as appropriate, to resolve issues.

4. For compliance related issues, the department CO will conduct an Initial Investigation that may include document review, interviews, audit, or other investigative techniques. The CO will pursue the following: (a) conduct a fair impartial review of all relevant facts; (b) restrict the inquiry to those persons or parties necessary to resolve the issues; and (c) conduct the inquiry with as little visibility as possible while gathering pertinent facts relating to the issue. The CO may conduct the same inquiry.

5. The department CO should ensure that the following objectives are accomplished:

- Fully debrief the employee forwarding the concern;

- Notify appropriate parties;

- Determine if there is reasonable cause to believe non-compliance occurred, report to OMIG and to County Attorney.

- Identify cause of problem, desired outcome, affected parties, applicable guidelines, possible regulatory or financial impact;

- Implement the necessary corrective action measures, (e.g., policy changes, operational changes, system changes, personnel changes, training/education);

- Provide a complete list of findings and recommendations to the County Administrator, and County Attorney.

- Document the inquiry and maintain records of the inquiry for a minimum of seven years, records of

which are filed with the County Attorney.

VI. County Provider Duties and Responsibilities

1. Develop a department compliance plan which follows the rules and concepts set forth herein.

2. Designate a department CO who will coordinate with the CO to implement the rules and concepts set forth herein, and annually review and amend the department compliance plan on an as-needed basis.

3. Develop department procedures designed to ensure compliance with New York State statute, rules and regulations.

4. Conduct education of applicable employees on the subject of Medicaid compliance and the rules and concepts set forth herein.

5. Review reports, receive complaints, concerns or problems and report in writing to the CO.

FAILURE TO COMPLY WITH THE POLICIES AND PROCEDURES OF THIS MEDICAID CORPORATE COMPLIANCE PROGRAM SHALL CONSTITUTE A VIOLATION OF SARATOGA COUNTY POLICY, AND SHALL SUBJECT THE EMPLOYEE TO DISCIPLINARY ACTION, UP TO AND INCLUDING TERMINATION.