Corporate Compliance

- Where We Are ... And Why
- Where We Want/Need to Be
- How Do we Get There from Here
Corporate Compliance

The more you know ...

... the more you’re responsible for!
What Is Corporate Compliance

• Compliance:
  – Conforming to a rule, specification, policy, standard or law.

• Regulatory, or Corporate Compliance:
  – Corporations aspire to ensure that personnel are aware of and take steps to comply with relevant laws and regulations.
History:

• Headlines in the private sector raised public awareness
  – Enron 2001 led to Sarbanes-Oxley 2002

• Government has been in the compliance business for years
  – OIG since late 1990s
  – HIPAA and HITECH
  – The Patient Protection and Affordable Care Act of 2010 (PPACA)
  – OMIG Medicaid Compliance - mid-2000s
Why Compliance?

- Number & complexity of regulations
- Operational transparency
- Ensure employees can meet requirements
- Ensure organization can:
  - Deliver
  - Document
  - Defend
  - Disclose
Let me introduce you

“Compliance Carl”:
Carl, that kills people!
Information OVERLOAD

Where’s the road map?

What applies to my agency?
Sometimes, we just want to...
Other times...
Your employees feel...

Pressured
Overwhelmed
Your employees feel...

...they’re being punished

...Big Brother is watching!
You’re Behind the 8 Ball! What to do?
A Road Map from OMIG

• *What is Corporate Compliance and Why Do You Need it?*

  *What are the 8 Required Elements?*

• *How Does Your Agency Measure Up?*

• *Are You ‘Behind the 8-Ball’ in Any of these Areas?*

• *Let’s Work Together!*
At least *they* had a Promised Land!
A Corporate Compliance Program puts policies & procedures in place to prevent/reduce risk of:

• *Violating laws and regulations*
• Fraud or abuse
• *Mishandling of Medicaid funds*
• Retaliation against employees who report possible violations
The 8 Required Elements

1. Written policies and procedures

2. Employee responsible for day-to-day compliance operation

3. Training & education of all affected employees and persons

4. Communication lines to the responsible compliance position
The 8 Required Elements

5. Disciplinary policies to encourage good faith participation

6. A system to routinely identify compliance risk areas

7. A system for responding to compliance issues as they arise to include identifying and reporting compliance issues to DOH and OMIG and refunding overpayments

8. A policy of non-intimidation and non-retaliation for good faith participation
Many aspects of a corporate compliance program are applicable to all agencies.
We Can Work Together

- Uncovering best practices
- Process vs. punishment
- Identifying & developing resources
- QA, PI and RM
- Using the 8 Elements & Medicaid Work Plan
Compliance has Come a Long Way

A few years ago, it was like a foreign language ...

It is getting clearer, but there’s also more at stake
Let’s Talk about You

NYSCAA survey in May:
• 17 respondents
• All over NYS
Compliance Challenges

• **Funding: Lack of Revenue**
  – staff, legal, resources, training

• **Your current funding sources:**
  – Grants
  – Indirect cost rate
  – Unrestricted funds
How NYSCAA can Help

• Seek additional funding sources
Compliance Challenges

• **Training:**
  – Funding, resources, in-house or outsourced

• **Your current practices:**
  – HR staff provide training
How NYSCAA can Help

• Provide resources
  – Curriculums
  – Visiting trainers
  – Conference speakers
Compliance Challenges

• **Reporting:**
  – The “Sun Sweet Prunes Dilemma”

• **Your current practices:**
  – HR, Fiscal, QA/PI/RM issue reports for their respective areas
How NYSCAA can Help

• **Provide resources**
  – Reporting tools/templates
  – Report review process
  – Gather data and issue regional reports
Compliance Challenges

• **Templates – Consistency:**
  – Aids for policy/procedure development
  – Standardization that allows for customization

• **What You are Doing Now:**
  – Developing your own P&P, with assistance from legal/fiscal/ executives/peers
How NYSCAA can Help

This is why we are here today!

Goals:

1. Develop a Compliance & Risk Management/QA/PI network within NYSCAA
Goals ...

2. Establish templates and best practices
3. Bring in experts for workshops and conferences
4. Create a regional team that provides audits and spot checks for member agencies
Goals ...

WHAT ELSE ...?
Resources

Professional Organizations

• SHRM – Society for Human Resource Management
• SCCE – Society for Corporate Compliance and Ethics
Resources

Regional/State Agencies

• OMIG – NYS Office of the Medicaid Inspector General
• OPWDD – Office for Persons With Developmental Disabilities
• NYSWDA -
Resources

Technology

• HRIS – Human Resources Information System
• NYSCAA Online Resource Center
Resources

WHAT ELSE?
Corporate Compliance at Oswego County Opportunities
Since 2009 ...
It takes Brains ...
The tools we used...

- OMG’s 8 Elements
- Medicaid Audit work plans
- Create a Team
- Involve QA/QI, PI, RM

and ... THE GIANT TREASURE HUNT!
Tone at the Top is Key

- Support from CEO
- Support from and access to Board of Directors
Changing the Culture

- Compliance “on paper” is not enough
- Employees: What’s in it for them???
- No Medicaid = no worries, right?
- But HIPAA doesn’t apply to us!
Changing the Culture

• Process vs. Punishment
• Clear channels of communication
• Listen and learn
• Respond swiftly
Occasionally I got burned...
The regulations say WHAT?!

• Ask the experts – if there are any
• Let’s share:
  – Our interpretations and how they impact our subsequent P&P development
  – Our processes for implementation, monitoring and reporting
Putting it to the Test

• April 2011 – internal audit, using NYS Medicaid work plan for Medicaid Service Coordination (MSC)

• Signed and updated documentation lacking for 1 Residential consumer, over a 4-month period
Putting it to the Test

• Violation of Medicaid regulations
• All Residential Habilitation Services for this one consumer for that time period were therefore not billable to NYS Medicaid
• OCO had to self-disclose this violation and repay nearly $20,000 to NYS Medicaid
Putting it to the Test

• Followed procedure for disclosure
• Repayment plan established
• All other Res Hab consumer records were audited (200+ billing records) and no further findings were discovered.
The Silver Lining:

• WE found it
• WE disclosed it
• WE demonstrated that we follow the Medicaid requirements and use their work plan for our audits
• WE have an effective compliance program
Most important of all:

• The appropriate plan and standard of care was provided to the consumer throughout her time as a resident of our service.
If you never find anything wrong when you conduct your internal audits, you’re missing something – and potentially arousing suspicion!
Many of you do not qualify for a Corporate Compliance Program under Medicaid regulations

**HOWEVER....**
Some of you are on the cusp...
A NYSCAA network can help:

- Established compliance programs
- Those who are just getting started
- Agencies that want to incorporate similar standards into QA/QI, PI, RM
A Few Useful Web Addresses

- [www.omig.ny.gov/compliance](http://www.omig.ny.gov/compliance)
- [www.omig.ny.gov/resources/archived-webinars](http://www.omig.ny.gov/resources/archived-webinars)
- [www.caplaw.org/resources](http://www.caplaw.org/resources)
- [www.shrm.org](http://www.shrm.org)
- [www.corporatecompliance.org](http://www.corporatecompliance.org)
- [www.sam.gov](http://www.sam.gov)
  - new site for Excluded Parties List information
THANK YOU! 