

SUBJECT Corporate Compliance Program		CHAPTER 01	SECTION 02	SUBJECT 01
CHAPTER Administrative		SECTION Compliance		
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I. APPLICATION:

- PIHP Board
- PIHP Staff
- CMH Providers
- CMH Subcontractors
- SUD Providers

II. POLICY STATEMENT:

Region 10 PIHP is committed to providing quality care for all individuals served. The safety and well-being of those it serves is the paramount consideration of all PIHP activities. In furtherance of this commitment, the PIHP strives to promote honesty, integrity and high ethical standards in the work environment and to comply with all applicable federal state statutes and regulations and other legal and ethical obligations.

This policy is intended to address matters relating to the Federal False Claims Act (1863), the Michigan Medicaid False Claims Act (1977), the Anti-Kickback Statute, the Health Insurance Portability & Accountability Act (HIPAA), the Balanced Budget Act (1996), the Deficit Reduction Act (Medicaid Integrity Program) (2006), as well as any other circumstance in which the potential for or actual occurrence of Medicaid fraud, waste or abuse is involved.

III. DEFINITIONS: N/A

IV. STANDARDS:

A. REGULATORY COMPLIANCE COMMITTEE

The Board has established a Regulatory Compliance Committee to oversee the organization’s Compliance Program as referenced in 42 CFR § 438.608 Program Integrity Requirements. Members shall minimally include a PIHP Board members as well as the PIHP Chief Executive Officer (Privacy Officer), Chief Financial Officer, Chief Information Officer (Security Officer) and Corporate Compliance Officer.

The Committee shall provide compliance program oversight (including endorsement of the Annual Compliance Report and endorsement of the Annual Compliance Plan), review significant reportable events, review compliance policies and act as liaison to the PIHP Board.

Committee standards and procedures are further addressed in the PIHP Regulatory Compliance

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Committee Policy.

B. CORPORATE COMPLIANCE COMMITTEE

The Board has established a QAPIP Oversight Committee which has designated a Corporate Compliance Committee to address the PIHP's Compliance Goals. Members shall minimally include PIHP Corporate Compliance Officer and Administrative Staff, representation from each CMH Provider within the region and a representative for the regional SUD Provider Network.

The Committee shall provide practical consultation regarding legal requirements, existing policies and procedures and training materials. The Committee shall review the Annual Compliance Report and Annual Compliance Plan. Members shall work with the PIHP Management Team and Corporate Compliance Officer in support of corporate compliance complaint reporting requirements and maintenance of Policies and Procedures which promote the PIHP's Corporate Compliance Program Plan.

C. CORPORATE COMPLIANCE OFFICER:

The Board has designated a Corporate Compliance Officer as the individual who is responsible for overall development, implementation and administration of the PIHP Corporate Compliance Program Plan. The Corporate Compliance Officer has the authority to:

1. Design and coordinate internal investigations, and any resulting corrective action within the PIHP region;
2. To review all documents and other information which are relevant to compliance activities, including but not limited to: individual case records, billing records, and individual personnel arrangements and agreements with other parties.

All personnel are expected to cooperate with the Corporate Compliance Officer in the implementation and ongoing administration of the Corporate Compliance Program Plan.

The Corporate Compliance Officer shall be a member of and report to the Regulatory Compliance Committee and serve as Chairperson of the Corporate Compliance Committee. The Corporate Compliance Officer shall also serve as a liaison between the Committees. Additional duties are further outlined in the PIHP Corporate Compliance Plan.

D. COMPLIANCE POLICY AND PROCEDURES:

The policies and procedures for each risk area specific to PIHP include, but are not limited to: conflict of interest, Health Insurance Portability and Accountability Act (HIPAA) requirements, billing, medical records, documentation, record access and retention, contracting, training and

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education, and monitoring.

E. TRAINING:

The PIHP requires all PIHP personnel to participate in programs of training and continuing education as needed with respect to the Corporate Compliance Program Plan. All personnel shall cooperate with the implementation and ongoing administration of the Corporate Compliance Program Plan.

At minimum, the PIHP and each CMH Provider / subcontractor and SUD Provider shall ensure all employees receive Corporate Compliance training upon initial hire and annually thereafter.

F. NOTICE:

1. The PIHP shall post Notice regarding access to the PIHP Corporate Compliance Office (including how to report a complaint).
2. The CMH Provider / subcontractor and SUD Provider shall post Notice regarding access to the CMH / SUD Provider and PIHP Corporate Compliance Offices (including how to report a complaint).

G. FINANCIAL REPORTING AND PAYMENTS:

All financial reports, accounting records, research reports, expense accounts, time sheets, and other documents will accurately and clearly represent the relevant facts or the true nature of a transaction. Improper or fraudulent accounting, documentation or financial reporting contrary to the policy of the PIHP may violate the Corporate Compliance Program Plan.

All overpayments identified or recovered known to the CMH Provider / subcontractor and SUD Provider shall be promptly reported to the PIHP.

The PIHP and each CMH Provider / subcontractor and SUD Provider shall comply with the requirements outlined in 42 CFR § 438.608.

H. DOCUMENTATION AND BILLING PRACTICES:

The PIHP will strive to ensure that services are fully documented and that all claims, bills and other submissions for reimbursement to those served and third-party payers for services rendered by any CMH Provider / subcontractor or SUD Provider complies with the Corporate Compliance Program Plan.

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I. MONITORING

The PIHP shall engage in monitoring activities of the Corporate Compliance Program Plan. Evaluation efforts may be addressed through contract monitoring, record reviews, claims verification and utilization review.

The Corporate Compliance Officer will conduct an annual evaluation of the Corporate Compliance Program Plan. This assessment shall be reviewed with the Corporate Compliance Committee and reported to the Regulatory Compliance Committee.

J. COMPLAINT REPORTING AND INVESTIGATION:

It is the responsibility of all regional personnel to report to the CMH Provider / subcontractor and SUD Provider and / or the PIHP his or her good faith belief of any violation of the Corporate Compliance Program Plan.

V. PROCEDURES: N/A

VI. EXHIBITS: N/A