



Corporate Compliance Plan

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OLV Human Services

Corporate Compliance Plan

OLV Human Services (OLVHS) has developed this Corporate Compliance Plan to further its mission and legal duty to promote adherence to all applicable state and federal statutes and regulations including, but not limited to, the Federal and New York State False Claims Acts, the Deficit Reduction Act of 2005, NYS Social Services Law 363-d and NYCRR Title 18, Part 521. As used in this Plan, OLV Human Services and OLVHS shall refer to OLV Human services and its affiliates, including the Baker Victory Health Care Center. This Plan is not intended to set forth all of the substantive programs and practices of OLV Human Services to achieve compliance but it is intended to outline essential elements of due diligence to assure business is conducted professionally and lawfully and to prevent, detect, correct and report fraud, waste, abuse and other improper activities. This Plan applies to all facilities and programs operated under the operating certificates of OLV Human Services and its affiliates, to all OLV Human Services and affiliate employees, volunteers, agents, vendors, independent contractors and Board members (referred to as "Personnel").

Through the Plan, OLV Human Services demonstrates commitment to honest and responsible corporate and provider conduct as it carries out its Mission. It is OLV Human Services' goal to maintain an institutional culture that promotes the prevention, detection, and resolution of potential instances of non-compliance to ensure that OLV Human Services upholds its ethical practices and its reputation. This message is communicated through its compliance program to the individuals receiving services at OLV Human Services, its affiliates, employees and agents, and the community.

COMPLIANCE PROGRAM ELEMENTS

OLV Human Services has established the following essential elements in its Compliance program to ensure its goal of lawful and responsible conduct in delivering quality services:

1. Written standards of compliance expectations as embodied in Standards of Conduct, including a policy of non-intimidation and non-retaliation for good faith reporting of potential or actual misconduct ("Whistleblower")
2. A Compliance Officer to operate and monitor the Compliance program and to report to the Chief Executive Officer (CEO) and the Board of Directors
3. Effective, on-going education and training programs for all employees and persons associated with OLV Human Services, including executives and governing body members
4. Open lines of communication for reporting compliance issues, including a method for anonymous and confidential good faith reporting
5. Procedures regarding the investigation of potential violations and the implementation of corrective actions, appropriate discipline and remediation
6. Processes to identify and investigate risk areas specific to provider type and program, including internal audits, and evaluation of potential or actual non-compliance
7. Procedures to investigate identified compliance concerns and to implement and monitor corrective measures

The success of the OLV Human Services Compliance Program requires a sincere commitment on the part of all parties to implement and manage these elements. The Compliance Officer and OLV Human Services Board Compliance/Risk Management Committee shall annually review the Compliance Plan and recommend changes. All changes to the Plan shall be submitted to the Board for approval.

Departments and programs within the Agency have adopted and implemented compliance policies and procedures that are specific to those departments, programs and affiliates. The Compliance Officer shall ensure that all such policies and procedures are reviewed by the appropriate department or program and shall monitor any amendments to ensure compliance with applicable federal and state statutes and regulations.

I. COMPLIANCE STANDARDS OF CONDUCT

Failure to comply with the following OLV Human Services Standards of Conduct may result in disciplinary action including, but not limited to, termination:

- All Personnel must adhere to all applicable state and federal laws and regulations, OLV Human Services policies and ethical and legal standards.
- All Personnel involved in documenting and billing for services must ensure that they follow all applicable laws, rules, conditions of participation and interpretive guidance relating to billing.
- All Personnel must be free from any undue influence that conflicts with or appears to conflict with their legal duties and responsibilities to the individuals receiving services from OLV Human Services. With the exception noted, Personnel may not receive or accept any payment, gift, or other personal economic benefit of value from any person or entity that has or seeks to have a business relationship with OLV Human Services. However, it is permissible to accept gifts of nominal value, meals, and social invitations that are consistent with good business ethics and practices and do not obligate the recipient to take or refrain from taking any action or decision on behalf of OLV Human Services. Personnel must report (disclose) to OLV Human Services all conflicts of interest as well as situations which could be perceived to be a conflict of interest. If Personnel have a question about whether they can accept a gift, payment, or other personal economic benefit, they must contact the Compliance Officer before accepting.
- Personnel must be completely honest in all dealings with government agencies and representatives. Misrepresentations, false bills and false requests for payment are strictly prohibited. Personnel may not alter, destroy, mutilate, conceal, cover up, falsify or make false entries in any record with the intent to impede, obstruct or influence the investigation of any governmental department or agency. Personnel certifying the correctness of records submitted to government agencies must have knowledge that the information is accurate and complete. Personnel shall cooperate fully with government investigations by directing all governmental inquiries or requests for information, documents, or interviews to the Compliance Officer. Personnel who participate in government interviews shall give answers that are truthful, complete, and unambiguous.
- Personnel must not, in the name of or on behalf of OLV Human Services, participate or intervene in any political campaign on behalf or in opposition of any candidate for public office. This does not prevent Personnel acting in their individual capacity from engaging in political activity.

- Personnel must disclose any financial or other personal interest in a transaction between OLV Human Services and a vendor, supplier, provider, or customer. Personnel must not engage in financial, business or other activity which competes with the Agency's business or which, actually or in appearances, interferes with the performance of their job duties.
- Personnel must maintain the confidentiality of OLV Human Services business information, as well as the business information relating to OLV Human Services vendors, suppliers, providers, customers, and persons receiving services from OLV Human Services. It is OLV Human Services policy to keep all information and records pertaining to person receiving services confidential in accordance with applicable law. All Personnel with access to confidential information and records must strictly adhere to OLV Human Services confidentiality policies.
- OLV Human Services and its Personnel must not engage in unfair competition or deceptive trade practices that misrepresent the Agency's services or operations.
- All Personnel are responsible for following safe work practices and complying with all applicable safety standards and health regulations.

WHISTLEBLOWER POLICY – NON-INTIMIDATION/ NON-RETALIATION

The Whistleblower Policy protects anyone who reports an activity that he/she considers to be dishonest or illegal such as violations of federal, state or local laws or regulations. In order to encourage individuals to come forward and report misconduct, State and Federal False Claims Acts contain a whistleblower provision.

The Government, or an individual citizen acting on behalf of the Government, can bring actions under a False Claims Act. An individual citizen, referred to as a "whistleblower", who has actual knowledge of allegedly false claims may file a lawsuit on behalf of the U.S. Government. If it is successful, and provided certain legal requirements are met, the "whistleblower" may receive an award ranging from 15% - 30% of the amount recovered.

Whistleblower protections are provided in two important areas: confidentiality and against an adverse employment action. As much as possible, the confidentiality of a whistleblower will be maintained; however, identity may have to be disclosed to conduct a thorough investigation, to comply with the Law or to provide accused individuals their legal rights of defense.

OLV Human Services will not retaliate against a whistleblower in any way including, but not limited to, intimidating the employee, threatening harm, assigning punitive work, reducing salary or wages, or terminating employment. Whistleblowers who believe that they have been retaliated against may file a written complaint with the OLVHS Chief Financial/Operating Officer. A proven complaint of retaliation shall result in a proper remedy for the person harmed and corrective action, up to and including termination, against the retaliating person.

The Compliance Officer shall ensure implementation of the OLV Human Services Whistleblower Policy that prohibits retaliation for "good faith" reporting of any actual or potential violation of this Plan, OLV Human Services Policy, and/or any federal or state statute or regulation. Failure to report possible misconduct or noncompliance is itself a violation of OLV Human Services policy and may result in discipline.

II. COMPLIANCE PROGRAM STRUCTURE

The following organizational structure provides oversight for the OLV Human Services Corporate Compliance Program.

Board of Directors

The OLV Human Services Board of Directors has determined that the adoption of a Compliance Program is necessary to ensure that the agency consistently complies with applicable laws and regulations. The Board has established a Committee on Compliance/Risk Management and will receive and review regular reports from that Committee, and take necessary and appropriate action in response. The Board will also respond to reports of potential or actual noncompliance received from the OLV Human Services Compliance Officer, Chief Executive Officer (CEO), or a Compliance/Risk Management Committee member.

Compliance/Risk Management Committee of the Board

The Compliance/Risk Management Committee is a standing committee of the OLV Human Services Board of Directors. The Committee consists of no fewer than three Directors, one of whom shall be appointed Chair. The Committee is responsible for adherence by the Corporation to the agency Compliance Program and Plan, and to applicable federal and state laws and regulations, including laws and regulations relating to billing, reimbursement, safety, and confidentiality of protected personal information.

Corporate Compliance Committee

The Corporate Compliance Committee is comprised of key agency leadership staff. The Committee provides oversight for regulatory and legal compliance activities to ensure that OLV Human Services meets standards of legal and ethical accountability. In addition, the Corporate Compliance Committee advises the Compliance Officer and assists in the implementation of the agency Corporate Compliance Plan.

Committee's responsibilities include:

- Analyzing the agency's regulatory environment and the legal requirements with which it must comply and specific risk areas;
- Assessing existing policies and procedures that address these areas for possible incorporation into the compliance program;
- Working with appropriate agency departments to develop standards of conduct and policies and procedures that promote adherence to the agency's compliance program;
- Recommending and monitoring, in conjunction with the relevant departments, the development of internal systems to carry out the agency's compliance standards, policies and procedures as part of its daily operations;
- Determining strategies to promote compliance and detection/reporting of potential violations, such as through a compliance hotline and other fraud reporting mechanisms;
- Developing a system to solicit, evaluate and respond to complaints and problems; and
- Monitoring internal and external audits and investigations for the purpose of identifying issues; and
- Implementing corrective and preventive action.

Corporate Compliance Officer

To further its commitment to compliance with all relevant state and federal statutes and regulations, the Board shall ensure that a Corporate Compliance Officer is designated who will

report to the OLV Human Services CEO, the Board of Directors and to its Committee on Compliance and Risk Management. The Compliance Officer oversees and monitors the implementation of the Compliance Program and Plan. All Personnel should view the Compliance Officer as a resource to answer questions and address compliance concerns

The Compliance Officer shall:

- Oversee and monitor the implementation of the Compliance Plan
- Report to the Board and its Compliance/Risk Management Committee on compliance program implementation and compliance monitoring activities
- Develop and coordinate appropriate compliance training and education programs for all Personnel and ensure records of such training and education are maintained
- Ensure that internal monitoring controls are in place to reasonably detect and prevent non-compliance with applicable state and federal laws and regulations or misconduct
- Formalize and operate a system for Personnel to report non-compliance or misconduct without fear of retribution
- Work with the Human Resources Department to ensure disciplinary mechanisms in place for verified instances of non-compliance or misconduct are applied consistently in a manner appropriate to the nature and extent of the non-compliance or misconduct. Together with Human Resources, work to ensure that individuals with a propensity to engage in illegal activity will not become or continue as Personnel of OLV Human Services. (Procedures employed towards this end may include background and reference checks as required or permitted by law.)
- Ensure that all Personnel who provide, authorize, order, or refer an individual for a service for which OLV Human Services receives payment from Medicare and/or Medicaid are screened to ensure that they have not been excluded from participating in a federal- and/or state- funded health care program.
- Review and track internal and external compliance audits including, but not limited to, internal peer reviews

Legal Counsel

Outside and in-house legal counsel shall assist the Board, Committees of the Board, CEO and Compliance Officer, as needed, to identify and interpret federal and state laws and regulations, assist in maintenance of the Corporate Compliance Program, and provide legal advice with respect to the Compliance Program.

At the discretion of the Compliance Officer, legal counsel may be notified of incidents that reasonably suggest that OLV Human Services and/or its Personnel may not have acted, or be acting, in compliance with this Plan and/or applicable laws and regulations. The Compliance Officer will be responsible for facilitating an investigation into a reported incident, involving legal counsel as needed. The results of the investigation will be used by legal counsel to provide legal advice to the Compliance Officer, CEO and/or Board of Directors, as indicated.

Department/Program Management

Department and program management have a pivotal role in achieving the objectives of the Corporate Compliance program. They will do this by:

- Providing due diligence when hiring, training, and supervising staff.

- Remaining knowledgeable with all current regulatory requirements pertaining to their department responsibilities.
- Providing guidance and oversight in the form of Policy and Procedure.
- Enforcing and supporting the guidelines and directives of the Compliance Program with procedures for monitoring the accuracy of workflow, including spot checks, periodic audits, and corrective measures in response to areas of identified risk.
- Reporting findings or concerns to the appropriate authority and the Compliance Officer.

Employees, Vendors and Other Agents

OLV Human Services employees, vendors and other agents are responsible for:

- Carrying out their job responsibilities in an ethical, effective, and appropriate manner.
- Reporting potential compliance problems to management or the Compliance Officer.
- Complying with the agency Code of Conduct.

III. EDUCATION AND TRAINING

To successfully implement the compliance program, the Compliance Officer, in conjunction with the Human Resources Department and appropriate supervisors and managers, will design educational and training programs for all OLV Human Services Personnel. Executive and Board Member training and education necessary to implement the Compliance Plan will also be conducted.

Such education and training will:

- Be mandatory and carry sanctions for failure to attend or participate
- Be provided to all new Personnel during Orientation
- Be offered ongoing, but at least annually, to incorporate new statutes, regulations, and identified areas of risk
- Be presented through a variety of means including, but not limited to, newsletters, notices, posters, and may occur at regular staff meetings
- Inform employees and other Personnel that failure to comply with compliance standards may result in disciplinary action, including termination of employment
- Include information about False Claims Acts and the rights of employees to be protected as “whistleblowers” if they assist in detecting and preventing waste, fraud, and abuse
- Emphasize that it is a violation of the Plan for Personnel not to report an instance of suspected or known non-compliance or misconduct

The Compliance Officer and Human Resources Department shall periodically monitor, evaluate and assess the effectiveness of the Agency's education programs and may revise such programs as necessary. The Compliance/Risk Management Committee shall report to the Board periodically as circumstances dictate on the status and effectiveness of educational and training programs.

All training shall be documented by sign-in sheets, reflected in meeting minutes, and/or tracked electronically. Attendance at compliance training sessions is mandatory and is a condition of continued employment.

Specific Job Training

Job-specific training is dependent upon the employees' assignments and is the responsibility of the department/program managers who are expected to stay abreast of changing governmental regulations and to develop sufficient education programs to ensure compliance. The Compliance Officer will assist in this function and serve as a resource when needed. All formal training should be documented and tracked by the program management and the Human Resources Department.

IV. REPORTING AND CONFIDENTIAL COMMUNICATIONS

All OLV Human Services Personnel have a duty to report any suspected or known compliance-related violation or any illegal activity. Failure to report may result in corrective action, including termination of employment. Questions or concerns about particular acts or conduct should be directed to immediate supervisors, the OLV Human Services Compliance Officer or reported to the Compliance Hotline. It is OLV Human Services policy to investigate all reports of illegal activity or violations. All Personnel must cooperate with any internal or external investigation of compliance-related matters and must not prevent, hinder, or delay discovery of illegal acts or violations.

How to Report

OLV Human Services Personnel shall report suspected or known compliance issues by any of the following methods:

1. Contacting OLV Human Services Compliance Officer – in person, by phone or in writing (716/828-7058)
2. Contacting OLV Human Services Compliance/Risk Management Committee or Board member
3. Calling the Compliance Hotline at 716/828-7654 at any time
4. Reporting directly to immediate supervisor

All reports of suspected or actual noncompliance should contain as much detail as possible to allow for appropriate follow up including relevant names, dates, location and the specific conduct that the individual believes may violate the law, applicable regulations and/or the Compliance Plan or agency policies. The Compliance Officer will make every effort to ensure confidentiality of reports, and individuals may report anonymously, the individual reporting is strongly encouraged to include identifying and contact information so that the Compliance Officer can obtain additional information from and respond to the reporting individual.

The following are examples of conduct which must be reported:

- Any claims billed for an amount in excess of permitted rates
- Any claims billed for services that are not medically necessary or otherwise authorized
- Any claims billed for services that do not meet statutory, regulatory, or contractual requirements
- Any services that are provided by unqualified Personnel
- Any services that are provided by individuals or entities excluded or suspended from any government or third-party payer program (e.g. Medicaid)
- Misleading or altered documentation
- Any inappropriate or unauthorized release of confidential information
- Any suspected fraud or false billing practices

OLV Human Services is accredited by the Joint Commission under its Behavioral Health Program Standards. OLV Human Services Personnel may report concerns about the safety or quality of care provided by OLV Human Services to the Joint Commission's Office of Quality Monitoring (call 1-800- 994-6610 or email complaint@jointcommission.org)

V. CORRECTIVE ACTION, ENFORCEMENT & DISCIPLINE

To successfully implement the Compliance Plan, OLV Human Services will implement case-by-case compliance corrective action and remediation. The OLV Human Services Compliance Officer will document all investigations and compliance corrective action or remediation.

Compliance corrective action or remediation may include, but not be limited to, any of the following:

- Personnel education or training
- Employee discipline, up to and including termination of employment
- Corrective billing action, including claim retraction, withdrawal or refund
- Development and implementation of new policies and procedures
- Revisions to Compliance Plan and implementing procedures
- Implementation of additional monitoring and/or auditing
- Disclosure to outside agencies

VI. COMPLIANCE AUDITS AND MONITORING

OLV Human Services desires to monitor and identify compliance issues before they become legal problems. To that end, billing and claims audits will be conducted by the OLV Human Services Compliance Officer, designated departmental staff and/or Quality Improvement staff. In addition, the Compliance Officer shall be notified of any visits, audits, investigations or surveys by any federal, state or local agency or authority, and shall receive a copy of any correspondence from any regulatory agency charged with licensing, certifying or administering a program with which OLV Human Services participates.

The Compliance Officer shall review and track all internal compliance audits and reviews (including peer reviews), internal compliance audit tools, and external compliance audits and surveys and shall report the findings of audits and reviews to the Compliance/Risk Management Committee.

In addition, the Compliance Officer and OLV Human Services Compliance/Risk Management Committee shall periodically identify potential risk areas by examining:

- Relevant initiatives of applicable state, local, or federal governmental enforcement and oversight agencies, including Annual Work Plan of NYS Office of Medicaid Inspector General (OMIG).
- Risk areas identified by OLV Human Services internal compliance audits and reporting mechanisms
- Common audit findings or initiatives of relevant governing and/or accrediting bodies.

From the risk assessment, the Compliance Officer will develop an annual work plan for conducting audits and implementing other preventative measures.

VII. DETECTION, RESOLUTION, AND RESPONSE

The Compliance Officer shall develop and implement procedures regarding the investigation of any actual or potential violation of this Plan, OLV Human Services policy, and/or federal or state statute or regulation. The procedures will include, but will not be limited to, the manner in which investigations are conducted, communication of findings, and follow-up/corrective action and monitoring.

OLV Human Services and affiliated programs, internal departments, affected persons, and other Personnel are required to:

- Provide or allow access to documentation as appropriate to the investigation
- Cooperate with the investigation and ensure that nothing is done to compromise the integrity of the investigation
- Be available for interviews, questions, and follow-up as necessary
- Ensure that confidentiality is maintained regarding the investigation

If an investigation or audit reveals improper or illegal conduct, including billing, coding or claims submissions issues, the Compliance Officer (and legal counsel, if necessary) is responsible for ensuring corrective actions are taken. The corrective actions should include each billing practice or activity that may not meet all of the applicable requirements and specify what will be done to correct the practice. In addition to the possibility of returning overpayments, and the citing of claims submission problems, consideration should be given to disciplinary actions, incident reporting, and voluntary self-disclosure to designated state and or federal authorities.

All corrective actions will be documented and retained for at least three years. The decision whether to disclose the results of an investigation or audit to federal or state authorities or private payers will be made by the OLV Human Services CEO based upon recommendations of the Compliance Officer and/or legal counsel.