

**MONTGOMERY COUNTY
POLICY AND PROCEDURE**

CORPORATE COMPLIANCE

Date Drafted: 12/07/09

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Date(s) Revised: _____

I. POLICY:

It is the policy of Montgomery County to promote compliance with all federal, state, and local statutes, regulations and program requirements pertinent to the accomplishment of our corporate mission. Corporate compliance has been embraced as a central theme for all current programs of Montgomery County and every reasonable attempt will be made to prevent, detect, and address errors, omissions, fraud and abuse in our daily operations.

II. GENERAL GUIDELINES:

1. The foundation of the Corporate Compliance Policy is the network of internal controls, policies and procedures in place within Montgomery County. The success of the plan is predicated on the continuous monitoring of effective managerial systems and investigation and correction of real and potential problems.
2. All employees are required by this policy to discuss potential errors or irregularities with their chain of command and/or directly with the Montgomery County Compliance Officer. Under no circumstances will retaliation be permitted against employees who voice legitimate concerns to management.
3. The Corporate Compliance Policy follows the Health & Human Services (HHS) Office of Inspector General's Compliance Program Guidance for Health Care Facilities but is equally applicable to the requirements of all other governmental entities.

III. PROCEDURE FOR ADMINISTRATION OF THE CORPORATE COMPLIANCE PROGRAM

1. The County Auditor will function as the Corporate Compliance Officer. External reviewers will be utilized in any circumstance where the Compliance Officer has a conflict of interest with the compliance function. The Compliance Officer will coordinate system wide compliance initiatives and be responsible for the following tasks:

- a. Reviewing and updating the Montgomery County Compliance Program on a regular basis.
 - b. Maintaining all records and documentation of compliance related activities.
 - c. Reporting on compliance matters to the Board of Supervisor's Committee quarterly.
 - d. Conducting ad hoc training on compliance related issues and helping to develop compliance elements for the standard orientation and inservicing program.
 - e. Serving as the point of contact for employees with questions or concerns about potential compliance problems within Montgomery County. Agency training and literature will reinforce this option for employees and stress that their inquiries will be kept confidential to the extent possible and that they will be protected from retaliation.
 - f. Reviewing all monitoring and auditing functions within the various internal control systems of Montgomery County to ensure that potential problems are identified and dealt with in a timely manner and for developing and implementing new systems as needed.
 - g. Working with the Chairman of the Board of Supervisors and the Director of Personnel to ensure that employees who have compliance related violations are appropriately disciplined according to the standards contained in the Montgomery County Policy Manual and for monitoring compliance issues with independent contractors and vendors.
 - h. Conducting and/or coordinating internal investigations into potential compliance issues and working with the Chairman of the Board of Supervisors and the Director of Personnel on developing appropriate courses of action.
2. All staff members are required to read and abide by the policies contained in the Montgomery County Policy Book. All management, and LEICC members in a position to affect agency billing and purchasing decisions are further required to read and execute an annual Code of Ethics statement as described in county administrative policy. Violations of the terms and conditions stated in these documents expose the individual to disciplinary actions up to and including dismissal and removal.
 3. All vendors and independent contractors will be held to the same standard of compliance as Montgomery County employees. Contracts will be reviewed by legal counsel (the County Attorney) as needed for potential issues, and any instances of noncompliance will be considered grounds for severing the business relationship.

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4. The Board of Supervisors and all Department Heads are responsible for continually reviewing and updating the policies, procedures and systems of internal controls within their areas of responsibility. It is contingent upon them to remain current and informed on all changes and modifications to the regulatory environment in which they operate. To this end, Montgomery County is committed to supporting continuing professional education through tuition reimbursement, seminars, industry publications and online research.
5. The Board of Supervisors and all Department Heads are responsible for enforcing adherence to the policies, procedures, and systems of internal controls within their areas of responsibility. Training staff members, monitoring their work directly or through managerial systems, and timely correction of problems that come to light are critical to the prevention and detection of errors, omissions, fraud and abuse.
6. The Personnel Department and all Department Heads are responsible for conducting and/or coordinating all new employee orientation, certification classes and mandatory inservicing in conjunction with other involved department managers. Specific training for individual risk areas will be organized or outsourced as needed.

IV. PROCEDURE FOR ENSURING QUALITY OF CARE COMPLIANCE

1. It is the policy of Montgomery County to provide the highest quality of care to its patients and clients. Montgomery County believes that state and federal regulations provide a minimum baseline of standards in which all staff will strive to exceed in the provision of care and services.
2. The Montgomery County Department Heads conduct monitoring and evaluation activities relating to the quality and appropriateness of patient care. The policies and procedures of Montgomery County are incorporated by reference into this Compliance Plan.
3. The Montgomery County Departmental Quality Assurance Committees, and Medical Review Committees, assembles, reviews, and draws conclusions about the quality and appropriateness of patient care in conjunction with the Medical Director as needed. The team maintains its own data files, analytical reports and minutes of meetings. The records, internal controls, policies and procedures of the team are incorporated by reference into this Compliance Plan.
4. The Quality Assurance, and Medical Review Committees review quality issues in a broader perspective. The records, internal controls, policies, and procedures of the committee are incorporated by reference into this Compliance Plan.

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V. Procedure for Ensuring Patient Rights' Compliance

1. It is the policy of Montgomery County, as required by state and federal law, not to discriminate in the admission, retention and care of patients because of race, color, blindness, national origin, sex, sexual preference, religion, sponsorship, or source of payment.
2. The Board of Supervisors, Department Heads and managerial supervisors monitor adherence to all federal and state guidelines and address all patient and family complaints and concerns.

VI. PROCEDURE FOR ENSURING BILLING AND FINANCIAL/REGULATORY REPORTING COMPLIANCE

1. Montgomery County has an obligation to its patients, third-party payers, and the state and federal government to exercise diligence, care and integrity when submitting claims for payment or statutory reports.
2. The Montgomery County Policy and Procedure Manual, as well as the standing system of internal controls and software controls, are incorporated by reference into this Compliance Plan. The County Treasurer will continuously monitor compliance with the fiscal systems, making modifications and corrections as needed.
3. Financial statements will be prepared and presented by the County Treasurer on a regular basis. Utilization of services, cash position and operational performance compared to the approved budget will be reviewed and discussed.
4. An independent accountant possessing significant healthcare expertise will audit the year-end financial statements.
5. Department Heads will oversee the preparation of all required departmental Medicare Cost Reports in strict compliance with HIM-11 and Fiscal Intermediary guidelines.
6. Department Heads will oversee the preparation of all required departmental Medicaid Cost Reports in strict compliance with NYSDOH guidelines. The independent accountant is required to certify key components of the Medicaid Cost Report prior to its submission.
7. The Montgomery County Treasurer will ensure preparation of the annual federal and state non-profit tax returns for Montgomery County if so indicated, ensuring reporting and disclosure requirements are met.
8. Periodically, an outside entity will review a sample of Medicare Part A and Part B claims to ensure the following:

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- a. Eligibility of patient for benefits

- b. The presence of all necessary physician orders
 - c. Appropriate care plans and clinical notes
 - d. Descriptions of procedures/treatments performed
 - e. Supporting OASIS and HRGS documentation
 - f. Accuracy of information on the UB-02 or HCFA 1500
9. Other payer claims will be reviewed by this entity during the engagement on an as-needed basis
 10. The Quarterly Medicare Credit Balance Report, if applicable, will be reviewed and filed by the department's designated employee.
 11. All audit reports and focused medical reviews will be reviewed by the Department Head, designated Managerial Supervisors and Billing Department.
 12. All NYS Department of Health draft audits will be reviewed by the Department Head, designated Managerial Supervisors and Billing Department.
 13. Complaints and concerns of private-pay patients will be reviewed by the Montgomery County Departmental Quality Assurance Committees, and Medical Review Committees.

VII. PROCEDURE FOR ENSURING EMPLOYEE SCREENING COMPLIANCE

1. It is the policy of Montgomery County to exercise due care in the recruitment and hiring of employees.
2. The Department Heads and the Personnel Department share joint responsibility for the screening and processing of new employees.
3. Any new hire or rehire is required to complete the Montgomery County Civil Service employment application and certify its accuracy. Any disclosure of criminal offense or healthcare related noncompliance will be reviewed and may serve as grounds for refusal to hire. Falsification of the employment application will serve as grounds for immediate termination.
4. All prospective employees who will be providing direct care will be checked against an appropriate databank for sanctions.
5. Professional certifications or licensures will be checked on line or by other means.
6. References will be checked for all patient care positions.
7. Periodically, the Personnel Department has the option of reviewing a sample of new hires to ensure compliance with the above standards.

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VIII. PROCEDURE FOR DETECTING KICKBACKS, INDUCEMENTS AND SELF-REFERRALS

1. Federal and state laws prohibit Montgomery County and its employees from offering or accepting anything of value in exchange for patient referrals or orders for goods and services that involve payments from either Medicare or Medicaid. These circumstances can be quite complex and require close scrutiny from all involved staff.
2. All new contracts will be reviewed by the County Attorney and Compliance Officer for potential conflicts with federal and state statutes and regulations. Existing contracts that come under question will also be subject to review and possible termination or renegotiation.

IX. PROCEDURE FOR CONFIDENTIALITY, DOCUMENTATION AND RECORDS' RETENTION

1. It is the policy of Montgomery County to properly safeguard and manage all sensitive and privileged information pertaining to patients, clients, and employees. This philosophy pertains to agency operations in general and compliance related tasks in particular.
2. All pertinent federal and state guidelines for confidentiality and record retention, as well as Montgomery County policies and procedures are incorporated by reference into this Compliance Plan.
3. All potential compliance issues noted by staff and management will be documented in writing and submitted to the Compliance Officer, who will maintain the central files on compliance issues.
4. Privacy and confidentiality of patient and employee data will be ensured, to the extent possible, by all parties to compliance investigations. Information on patients and staff may have to be provided to federal and state authorities in the course of their investigations.

X. PROCEDURE FOR EVALUATING EMPLOYEE PERFORMANCE RELATING TO COMPLIANCE

1. Montgomery County is committed to training all staff in regulatory issues and keeping them current with developing trends. Compliance with all applicable laws, regulations, ethical standards and policies is an expectation for all staff, and violations of the same will not be tolerated.
2. Training records will be maintained along with other mandated orientation and inservice records and will be a component of the employee's annual appraisal.

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3. Failure to follow Montgomery County policies and procedures or report instances of misconduct will be cause for an unfavorable performance appraisal and/or progressive discipline.
4. Gross misconduct, fraudulent or abusive behavior uncovered as part of a compliance investigation will result in immediate termination and potential legal ramifications.
5. Management and supervisory personnel will be evaluated in part based on their department's adherence to compliance related policies and procedures. Failure to train and monitor staff or to detect obvious compliance issues within the scope of their authority will result in disciplinary action against the manager or supervisor.

XI. PROCEDURE FOR ENSURING RISK MANAGEMENT AND EMPLOYEE INCIDENT COMPLIANCE

1. It is the policy of Montgomery County to promote the safest environment possible for patients, staff, and visitors.
2. The management, supervisory, and field staff monitor patient, visitor, and employee incidents for trends and causes and develops corrective actions. The records, internal controls, policies and procedures of the team are incorporated by reference into this Compliance Plan.
3. The management staff reviews all pertinent federal and state regulations and coordinates systemic changes, building modifications and staff training as necessary.
4. The Board of Supervisors and Safety Officer will monitor all reporting to and from insurance companies and will coordinate involvement of legal counsel where warranted.

12/07/2009