Compliance Plan Policy

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Policy

The Department of Behavioral Health (DBH), with the leadership and guidance from its Compliance staff, establishes and maintains a Compliance Plan that is consistent with federal guidelines regarding essential element requirements that promote a culture of ethics, integrity and quality service.

DBH maintains a Compliance Program designed to demonstrate the Department's commitment and efforts to comply with applicable laws and regulations; to develop and maintain policies and procedures to serve as guidance for staff; to establish mechanisms for employees to raise compliance concerns; to ensure concerns are appropriately addressed; to educate and empower staff to make an informed decision that conforms with applicable laws and regulations; and to take appropriate action when noncompliance is identified.

Purpose

The objective of the Compliance Plan is to serve as the foundation for the DBH Compliance Program.

Responsibility

The DBH workforce, including its contract providers, is responsible for maintaining a compliant workplace by adhering to DBH and County policies as well as local, State and federal laws, rules and regulations. The DBH Office of Compliance is a resource for the Department and often serves as the lead for Compliance Program efforts.

In addition to the Office of Compliance, DBH staff from both its Mental Health and Alcohol and Drug Programs plays an integral role in adherence to the Compliance Plan. These programs perform audit and program evaluations of DBH clinics and contractors.

When audit or program evaluation findings reveal anomalies, non-compliance, or egregious violations, the results are referred to the Office of Compliance for review and appropriate action.

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Compliance Plan Policy, Continued

Elements of a Compliance Plan The DBH Compliance Plan consists of the essential elements required for effective compliance as recommended by the U.S. Department of Health and Human Services' Office of Inspector General. DBH contract providers are also required to have a compliance plan with the essential elements, which include the following:

Element	Description
Designation of a Compliance Officer and Compliance Committee.	The Compliance Officer of a health care agency must have the following attributes: • Well-qualified • Member of senior management • Supported by a Compliance Committee Additionally, the person shall complete compliance related job duties, including, but
	not limited to, the following: Reports to agency or department director Provides organizational support and compliance expertise Creates an awareness of Compliance Program guidelines Assists in identifying potential risk Contributes to the Compliance Program in a regulatory manner Reports compliance concerns and risks to executive staff Recommends mitigating and corrective action
	The Compliance Committee shall be comprised of the following individuals: Trained representatives of each of the relevant functional departments Senior management

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Compliance Plan Policy, Continued

Elements of a Compliance Plan, continued

Element	Description
Development of Compliance policies and procedures, including standards of conduct.	The following are examples of policies, procedures and standards of conduct: • Written Code of Conduct articulating the commitment to maintain a compliant work environment by all levels of staffing, detailing the fundamental values of the agency, providing the framework for compliance action, and empowering staff to make compliant and ethical decisions. Included in the Code of Conduct is an acknowledgment form that employees are required to read, sign and adhere to. • Standard Practice Manual (SPM) and Outpatient Chart Manual (OCM) containing policies, procedures and processes that provide a structured point of reference for staff to comply with federal, state and local rules, regulations and laws. • Scope of Practice and Billing Guide to provide guidance regarding coding, billing and scope of practice for disciplines rendering services.
Open lines of communication.	Open communication is essential to maintaining an effective compliance program. Therefore, it is critical that the agency have open communication to increase the agency's ability to identify and respond to compliance issues. The following are examples of open lines of communication: • Alternative methods of communication to identify noncompliance such as a compliance hotline
	 Development of a compliant work environment for staff to report non-compliance without fear of retaliation Alternative methods to communicate compliance hot topics and issues to staff such as web blasts, tweets, and newsletters

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Compliance Plan Policy, Continued

Elements of a Compliance Plan, continued

Element	Description
Appropriate Training and Education for staff, including Compliance staff.	The purpose of training is to ensure that all levels of staff are fully capable of executing compliance with rules, regulations and other standards. Examples of education include, but are not limited to, the following:
	 Education and training for staff on relevant compliance issues such as healthcare fraud and abuse, applicable laws and regulations and Compliance Program guidelines Recommended best practices to mitigate compliance violation(s)
	Education and training for the Chief Compliance Officer and designated Compliance Staff to increase knowledge regarding emerging compliance issues
Auditing and monitoring procedures.	As an effective compliance program, Compliance develops auditing and monitoring plans to minimize areas of risk associated with non-compliance. The following are examples of Compliance auditing and monitoring procedures:
	 Audit plan to assess elements associated with an individual billing such as NPI, taxonomy and licensure Unscheduled reviews of programs
	 Analysis of prior risk assessments, audits or findings to re-evaluate concerns or risks Development of an Annual Work Plan that addresses and prioritizes risk areas of the agency to review, audit or monitor
Investigation and remediation of compliance violations.	It is the expectation that agencies will respond to detected deficiencies. The following are examples of actions to take when an issue arises:
	 Respond to detected offenses and develop corrective action to prevent recurrence Report and repay, if applicable, offenses to the appropriate government authority Conduct periodic reviews of risk areas to verify corrective action taken

Compliance Plan Policy, Continued

Elements of a Compliance Plan, continued

Element	Description
Enforcement of compliance standards.	Developing and enforcing disciplinary standards helps create an organizational culture that emphasizes ethical behavior. The following are examples of the enforcement of compliance standards:
	 Development and posting of well-publicized disciplinary guidelines Enforcement of disciplinary standards consistently across the agency
	 Investigation and documentation of potential violations, regardless of the staff level
	 Execution of corrective action and referral of disciplinary action
	 Routine checks of all levels of staff against government sanction or exclusion lists

Important Note: In addition to this policy, the DBH Compliance Plan consists of the policies and procedures in the <u>Related Policies</u> section of this document, which further detail the essential elements.

Compliance Violations

A violation of any compliance standard, policy and/or procedure warrants investigation regardless if the clinic or employee is DBH or a contract agency. DBH expects its workforce to cooperate and be forthcoming when involved in a Compliance Investigation.

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Compliance Plan Policy, Continued

Compliance Contacts For questions regarding compliance matters, please contact:

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Related Policies

DBH Standard Practice Manual:

COM0914 Code of Conduct

COM0917 Compliance Auditing and Monitoring Policy

COM0920 DBH Compliance Committee

COM0919 Compliance Hotline Policy

COM0927 Fraud, Waste and Abuse Prevention Policy

COM0933 Ineligible Persons Policy

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