

# South Country Health Alliance

Medicare	<input checked="" type="checkbox"/>
Medicaid	<input checked="" type="checkbox"/>

## Policy & Procedure

<b>Policy Name</b>	<b>Compliance Plan and Policy</b>
<b>Policy Number</b>	<b>AD 06</b>
<b>Regulatory Requirement(s)</b>	DHS Managed Care Contract, Article 9 False Claims Act – 31 U.S.C. §§ 3729-3733 42 CFR 422.503(b)(4)(vi) and 42 CFR 423.504(b)(4)(vi) Section 8B2.1 of the United States Sentencing Guidelines Medicare Managed Care Manual – Chapter 21 Prescription Drug Benefit Manual – Chapter 9
<b>Original Effective Date</b>	November 1, 2005
<b>Version Effective Date</b>	July 25, 2023
<b>Policy Owner(s)</b>	Compliance Officer
<b>Cross Reference(s)</b>	AD 13, AD 28

## Policy

All persons performing services for, or on behalf, of South Country, must abide and comply with South Country's Compliance Plan and Policy at all times in the performance of their duties. All such persons are prohibited from violations or misconduct to external parties, co-workers, and the organization. All individuals or agents of South Country will exhibit the proper conduct and integrity in the performance of their duties. Consistent disciplinary action will follow any breach of compliance and will be dependent on the scope and severity of the situation.

## Standards

1. South Country will have written policies and procedures and a Code of Conduct that will:
  - a. Articulate a commitment to comply with all applicable Federal and State standards.
  - b. Describe compliance expectations as embodied in the standards of conduct.
  - c. Implement the operation of the compliance program.
  - d. Provide guidance to employees and others on dealing with suspected, detected, or reported compliance issues.

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- e. Identify how to communicate compliance issues to appropriate compliance personnel.
  - f. Describe how suspected, detected, or reported compliance issues are investigated and resolved by the organization.
  - g. Include a policy on non-intimidation and non-retaliation for good faith participation in the compliance program, including but not limited to reporting potential issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials.
2. Compliance Officer (CO) and Regulatory Compliance Committee
- a. South Country will have a CO and Compliance Committee who report directly and are accountable to South Country's CEO or other senior management.
  - b. The CO, vested with the day-to-day operations of the compliance program, will be a full-time employee of South Country, and will not be an employee of a first tier, downstream or related entity. The CO has express authority to make in-person reports to the CEO and Joint Powers Board (JPB) at the CO's discretion.
  - c. The CO, the Compliance Committee, and the CEO will receive reports and will periodically report to the governing body on the activities and status of the compliance program, including regular updates, compliance program outcomes, internal and external audit results, government compliance enforcement activities, program non-compliance and fraud, waste and abuse issues identified, investigated, and resolved by the compliance program.
  - d. The governing body of South Country will be knowledgeable about the content and operation of the compliance program and will exercise reasonable oversight with respect to the implementation and effectiveness of the compliance programs.
3. Effective Training and Education
- a. South Country will establish, implement and provide effective training and education between the CO and the organization's employees including temporary employees, volunteers, and governing body members.
  - b. This training and education will occur within 90 days of hire or appointment and annually thereafter for all employees including temporary employees, volunteers, and governing body members. All employees and Board members must participate in required training.

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- c. South Country expects first tier, downstream and related entities to implement an effective compliance program designed to prevent, detect, and correct Medicare and Medicaid non-compliance, fraud waste and abuse, and address improper conduct in a timely and well-documented manner.

### 4. Effective Lines of Communication

- a. South Country will establish and implement effective lines of communication, ensuring confidentiality between the CO, members of the Compliance Committee, employees, managers, governing body, and first tier, downstream and related entities.
- b. Such lines of communication will be accessible to all and allow compliance issues to be reported including a method for anonymous and confidential good faith reporting of potential compliance issues as they are identified.

### 5. Enforcement of Well-Publicized Disciplinary Standards

- a. South Country will have well-publicized disciplinary standards through the implementation of procedures which encourage good faith participation in the compliance program by all affected individuals.
- b. These standards must include policies that articulate expectations for reporting compliance issues and assist in their resolution, identify noncompliance or unethical behavior, and provide for timely, consistent and effective enforcement of the standards when noncompliance or unethical behavior is determined.

### 6. Monitoring and Auditing

- a. South Country will establish and implement an effective system for routine monitoring and identification of compliance risks.
- b. The system will include internal monitoring and audits, and as appropriate, external audits, to evaluate the organization, including first tier entities' compliance with CMS and DHS requirements and the overall effectiveness of the compliance program.

### 7. Detected Offenses and Reporting Requirements

- a. South Country will establish and implement procedures and a system for promptly responding to compliance issues as they are raised, investigating potential compliance problems as identified in the course of self-evaluations and audits, correcting such problems promptly and thoroughly to reduce the potential for recurrence, and ensure ongoing compliance with CMS requirements.

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- b. If South Country discovers evidence of misconduct related to payment or delivery of items or services under the contracts, South Country will conduct a timely and reasonable inquiry into that conduct.
- c. South Country must conduct appropriate corrective actions in response to the potential violation involving the payment or delivery of items or services under the contracts.
- d. South Country will have procedures to voluntarily self-report potential fraud or misconduct related to the MA program to CMS or its designee (such as the NBI Medic).

### Procedure

#### 1. Written Policies and Procedures and Code of Conduct

- a. South Country distributes the Code of Conduct and relevant P&Ps to employees within 90 days of hire, when there are updates, and annually thereafter.
- b. South Country Code of Conduct and P&Ps are reviewed annually and updated if needed to incorporate changes in applicable laws, regulations and other program requirements.
- c. A Code of Conduct will be provided in written form to all employees and agents of the organization to follow.
- d. Specific policies and procedures for functional or departmental areas are written and used to implement and enforce compliance activity.

#### 2. Designation of a CO and Regulatory Compliance Committee

- a. The CO will be the focal point of all compliance activity and will have both compliance and operational responsibilities. This position will oversee and monitor the implementation of the compliance program through, but not limited to, the following:
  - i. Creating, developing and implementing policies and procedures that affect agency-wide compliance;
  - ii. Developing, coordinating, and participating in a multifaceted educational training program that focuses on the elements of the compliance program to ensure that all individuals are knowledgeable of and comply with all applicable rules and regulations;

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- iii. Ensuring that each individual of the organization understands the Code of Conduct;
  - iv. Reviewing and coordinating internal compliance activities including annual or periodic reviews of departments or functions;
  - v. Independently investigating and reporting on matters concerning compliance;
  - vi. Developing the processes and protocols in accordance with Human Resource policies to ensure that individuals who are sanctioned from Medicare or Medicaid participation or who appear on the list of excluded individual entities or the list of debarred contractors from any participation with our organization; and
  - vii. Reporting on the oversight and monitoring to the JPB and Compliance Committee.
- b. The Regulatory Compliance Committee is established to advise the CO and oversee the compliance program. The duties and responsibilities of this committee include, but are not limited to the following:
- i. Analyzing the regulatory environment, legal requirements, and specific risk areas;
  - ii. Assessing policies and procedures for high risk areas for possible use in the compliance program;
  - iii. Working with appropriate departments or functions to promote the standards of conduct, policies, or procedures that promote allegiance to the organization's compliance program;
  - iv. Recommending and monitoring, along with the departments, the development of internal systems and controls to carry out the organization's standards;
  - v. Determining the strategy or approach to promote compliance with the program and the detection of any potential violations, through "hotlines" or other fraud reporting mechanisms; and
  - vi. Monitoring internal and external audits and investigations to determine troublesome or deficient areas and implementing corrective and/or preventive action.

### 3. Conducting Effective Training and Education

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- a. South Country will ensure that the appropriate information is being disseminated to individuals through general education and specific risk area training sessions. Formal and informal training will be conducted on a scheduled basis for all individuals and for new employees. Website and other efficient and effective means of informal training will be available to all on an as needed basis. Results of knowledge testing will be reviewed and retained to determine effectiveness.
  - b. Where appropriate, contractors will be provided access to training on an as needed basis.
  - c. General training will be required within 90 days of hire/appointment and on an annual basis. Frequency, documentation, and curriculum will be identified, defined, and required.
  - d. At a minimum the Code of Conduct will be distributed, and an attestation signature will be used to verify receipt.
  - e. Specialized Training will be provided to individuals in high risk areas. Specific requirements will be identified and defined, but not limited to marketers, those that work with providers, and data users.
  - f. South Country expectations will be annually communicated to first tier, downstream and related entities. First tier, downstream and related entities will be required to attest annually that they have completed adequate training to implement an effective compliance program designed to prevent, detect, and correct Medicare and Medicaid non-compliance, fraud waste and abuse, and address improper conduct in a timely and well-documented manner.
4. Develop Effective Lines of Communication
- a. Communication is essential to a viable compliance program. All employees and Board members are required to report compliance concerns and potential fraud, waste or abuse, and improper payments. Steps will be taken to provide the best possible means for reporting non-compliance by any or all individuals. Confidentiality will remain a priority throughout any reporting situation.
    - i. South Country uses Report IT, a “Hotline” for reporting misconduct. The system hotline is available to all employees, providers, and enrollees, and provides a confidential means of receiving, recording, responding to and reporting FWA or compliance concerns. The process for receiving a report is as follows:
      1. Log all incoming calls;

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2. Investigate all calls by the CO;
  3. Report on all calls investigated or referred;
  4. Report findings and outcome to the Compliance Committee, CEO, and JPB; and
  5. Reporting is done under the strictest standards for confidentiality.
- b. Routine Communication and Access to the CO
- i. The CO is responsible for fostering communications among the employees, providers, and enrollees.
  - ii. The CO will be responsible for clarification of issues regarding compliance within a reasonable timeframe, including changes in laws, regulations and guidance, standards of conduct, and policies and procedures. Documentation of the matter should be shared with all others as needed.
  - iii. The CO will solicit help from the employees and others for developing the lines of communication.
5. Enforcement of Well-Publicized Disciplinary Standards
- a. Disciplinary standards are made available to all South Country workforce members, including management and the governing body.
  - b. Disciplinary standards are disseminated through the Code of Conduct, the Employee Handbook, annual compliance training, and related policies and procedures.
  - c. Disciplinary records are maintained for 10 years and include the dates or the violation and investigation, a summary of the findings, the action taken and date taken.
6. Auditing and Monitoring
- a. All programs, including, but not limited to Families and Children, Minnesota Senior Health Options (MSHO), Minnesota Senior Care Plus (MSC Plus), Special Needs Basic Care (SNBC), Ability Care, and Medicare Part D Compliance will be audited annually. External Auditing may be required depending on the program specifications.

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- b. All audits will include contractors and sub-contractors and will be conducted at least one time per year.
- c. Audit results will be reported to the Regulatory Internal Audit and Delegation Entity (RIDE) Committee, Compliance Committee and the JPB by the CO or another individual as delegated by the CO.
  - i. The Audit results, utilization data, and QI activity will be shared with contractors for open discussion and communications.
  - ii. Audit reports will include, but are not limited to, reports of suspected noncompliance, high risk factors, and those functions that affect payments.
- d. Monitoring is conducted on an as needed basis and includes a study or analysis from a baseline measurement. Monitoring will include a minimum of annual reviews on program elements to include but are not limited to appropriate dissemination of the programs standards, training, ongoing educational programs, and disciplinary actions.
- e. Auditors should be well qualified and meet the following criteria:
  - i. Knowledgeable about the operational requirements for the area being audited;
  - ii. Be independent of the specific functional area or take necessary precautions to avoid self-policing;
  - iii. Have access to area and personnel being audited;
  - iv. Present written reports of evaluations to the CO; and
  - v. Identify where corrective action is needed.
- f. Auditing techniques will include but are not limited to on-site visits, questionnaires, trend analyses, and statistical sampling.
- g. Certain functional areas are recommended for auditing activity purposes. These functional areas include but are not limited to the following:
  - i. Marketing, enrollment, disenrollment;
  - ii. Utilization Management and Quality of Care;
    - 1. This will include Provider services and enrollee utilization that identifies aberrant behavior and/or outliers.



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- iii. Data Collection and submission processes; and
  - iv. Compliance with state and federal regulations, as applicable.
- h. Policies and procedures will be developed to safeguard against unnecessary or inappropriate use of services and against excess payments for services, and shall include, but are not limited to:
- i. Safeguards against failure by subcontractors or Participating Providers to render Medically Necessary items or services that are required to be provided to an enrollee;
  - ii. A provision for identifying, investigating, and taking corrective action against fraudulent and abusive practices by Providers, subcontractors, and enrollees, South Country employees, officers and agents; and
  - iii. A method to verify whether contracted services, paid for by South Country, were actually furnished to the enrollees as required in 42 C.F.R. § 455.1 (a)(2).

### 7. Detected Offenses and Reporting Requirements

- a. A timely, reasonable investigation will be conducted by the CO on all suspected or actual misconduct, fraud, waste or abuse, to begin no later than two weeks after the date of the potential non-compliance or FWA is reported.
- b. Any violation that is determined to violate criminal, civil, or administrative law will be reported to the appropriate government authority within five (5) business days after South Country knows or has reason to believe of such suspected misconduct.
- c. The violation report will include the impact on costs and on the beneficiaries of the program.
- d. Appropriate corrective or disciplinary action will be implemented to detect and prevent further violations of the same nature. Corrective actions will:
  - i. Be designed to correct and prevent future non-compliance, including a root cause analysis;
  - ii. Be tailored to address the particular fraud, waste or abuse, problem or deficiency identified;
  - iii. Include time frames for specific achievements; and

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- iv. Be monitored after implementation to ensure their effectiveness.
- e. All investigations will include, but are not limited to interviews, review of documents, outside counsel help on an as needed basis, and documentation of processes and corrective actions. Employees will be notified of the ramifications should they fail to satisfactorily implement the corrective action.
- f. Record keeping at a minimum will include the following listed below:
  - i. Documentation of the alleged violation or deficiency
  - ii. Description of the process taken
  - iii. Copies of interview notes
  - iv. Key documents, including the corrective action plan
  - v. A log of witnesses interviewed
  - vi. The written results of the investigation
  - vii. Any disciplinary action taken and corrective action implemented
- g. Investigations of fraud, waste or abuse, or non-compliance will conclude within a reasonable time after the activity is discovered.

### Violation of Policy

A breach of this policy may result in noncompliance with regulatory requirements and potential penalty to South Country. South Country will investigate alleged violations and take disciplinary or other appropriate corrective action.

### Signatures

Signature Approval:  \_\_\_\_\_ Date: 7/25/2023

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Compliance Officer

Joint Powers Board Approval Date: December 8, 2006