



# Corporate Compliance Plan

( 2017-2018)

Revision Date October 2016

Reviewed Dec. 2017

**Inspire Board Resolution Regarding  
Corporate Compliance Program**

**WHEREAS**, the policy of INSPIRE (Orange County Cerebral Palsy Association, Inc.) has always been to conduct its business in compliance with applicable federal, state, and local laws and regulations, and to adhere to the highest ethical standards; and

**WHEREAS**, the Board of Directors recognizes that even unwitting violations of laws and regulations by INSPIRE employees and agents can subject the Company to civil and criminal penalties, tarnish its reputation for professionalism, and lead to unfavorable publicity; and

**WHEREAS**, the Board of Directors recognizes that the federal agencies responsible for enforcement of Medicare and Medicaid laws and regulations applicable to healthcare providers have encouraged the development and implementation of formal Corporate Compliance Programs by health and human service providers; and

**WHEREAS**, the Board of Directors believes that the development and implementation of a formal Corporate Compliance Program is consistent with INSPIRE’s efforts to improve quality and performance and further reflects INSPIRE’s long-standing commitment to conduct its business in compliance with applicable and constitutional laws and the highest ethical standards; and

**WHEREAS**, the Board of Directors wishes to ensure that the Corporate Compliance Program is effective in identifying and correcting practices and policies that are not in compliance with applicable laws and regulations, including, where necessary, by providing for disciplinary action against those employees and agents that fail to comply with such laws and regulations; and

**WHEREAS**, the Board of Directors further wishes the Corporate Compliance Program to formalize, and, as necessary, develop specific standards of conduct and policies for education and training of employees and agents with respect to those standards, review and possibly enhance internal controls and monitoring systems, and foster effective communication and responsiveness on compliance issues;

**NOW, THEREFORE, IT IS HEREBY RESOLVED** that the management of this organization is directed to implement the updated formal Corporate Compliance Program and to provide periodic progress reports to the Board of Directors on the development, implementation, and ongoing operation of this program.

**UNANIMOUSLY ADOPTED** this 8<sup>th</sup> day of November, 2016 by

The Board of Directors.

## Inspire Corporate Compliance Plan

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## II. Mission, Vision and Values

### Mission Statement

INSPIRE's mission is to form partnership with people who have special challenges in order to maximize their capabilities to lead fuller lives

- ❑ by providing meaningful person-centered services
- ❑ by educating about disability, intervention and resources
- ❑ by promoting inclusion within the community
- ❑ by responding to changing community needs

### Vision Statement

People will choose to partner with INSPIRE for care designed to meet their special challenges. INSPIRE will be a pathfinder as well as a comprehensive resource of needed programs and services.

### INSPIRE Values:

- ❑ An environment of caring, integrity, respect and encouragement
- ❑ One to one individualized relationship building
- ❑ The demonstration of professional responsibility
- ❑ The belief that everyone can be INSPIREd to develop and enhance their capabilities
- ❑ The diversity and celebration of our similarity and differences

### Operational Values

- ❑ Integrity: acting and working within Inspire's ethical and professional boundaries.
- ❑ Respect: treating others as we want to be treated.
- ❑ Customer Focus: treating all customers with respect and dignity. A customer is anyone with whom we interact, provide information or services.

## **IV. Introduction**

### **A. Purpose**

INSPIRE (Orange County Cerebral Palsy Association) is dedicated to maintaining excellence and integrity in all aspects of its operations, professional and business conduct. Our goal is to establish a culture of compliance and ethical behavior. Accordingly, INSPIRE is committed to conformance with high ethical standards and compliance with all governing laws and regulations, not only in the delivery of health care but in business affairs and in dealings with employees, administrative staff, physicians, agents, payers and the members of the communities we serve. It is the personal responsibility of all who are associated with INSPIRE to honor this commitment by adhering to the terms of this Compliance Plan, INSPIRE's Code of Conduct and other related policies, procedures and standards developed by INSPIRE in conjunction with the Corporate Compliance Program.

INSPIRE strives to create an ethical culture that supports not only doing things right, but doing the right things.

### **B. Scope**

The Corporate Compliance Program demonstrates INSPIRE's commitment to provide guidance in compliance, ethics and conduct to all INSPIRE staff, vendors, contractors and the Board of Directors. The provisions of the program apply to all medical, business and legal activities performed by INSPIRE employees, agents and contractors.

### **C. Commitment**

Each person is accountable for individual decisions and actions. Each must follow a course of conduct that preserves and enhances INSPIRE's reputation of honesty and integrity. To do so, it is critical that all staff, vendors, contractors and Board Members understand the laws, company policies, and contractual obligations that apply to their specific area.

Expectations of staff, board and contractors:

1. To establish a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to laws, standards, and ethical business practices.
2. To comply with and to perform job responsibilities in a professional manner which demonstrates quality care and commitment to compliant and ethical behavior as described in the INSPIRE mission statement and Values, the INSPIRE Code of Conduct, Code of Ethics, this compliance plan, INSPIRE policies and procedures and with all applicable State, Federal and local laws and regulations.
3. To satisfy the conditions of participation in health care programs funded by the state and federal government and the terms of INSPIRE's other contractual arrangements.
4. To report known or suspected compliance issues that are illegal, unethical or expose INSPIRE to significant civil liability by other employees, management, Board Members, agents and contractors, to the Corporate

Compliance Officer or the Corporate Compliance Hotline and to participate in investigations to the point of resolution of alleged violations.

5. To establish, enforce, monitor and maintain high professional and ethical standards and care.
6. To promote and cooperate with auditing and monitoring plans, and in appropriate circumstances, provide for voluntary disclosure of violations of laws and regulations

## **V. Administrative Responsibility**

INSPIRE's Compliance program shall operate independently of daily operations. Primary responsibility for implementing and managing the compliance program shall be assigned to a designated Inspire employee (Compliance Officer). The Compliance Officer shall report directly to the President & CEO.

The Board of Directors is responsible for oversight of the compliance program. The Compliance Officer will review compliance activities with the Board Audit Committee Chair regularly. The Compliance Officer will attend Board meetings as needed or desirable, but no less than quarterly, to provide training, program information and as a resource for questions or discussion.

To further its commitment to compliance and ethics, INSPIRE has established a Compliance Committee to assist in and provide oversight of compliance activities. The Compliance Committee is chaired by the Compliance Officer and consists of employees from diverse programs and authority levels.

## **VI. Compliance Plan**

The Compliance Plan adheres to the guidance and regulations as issued by the New York State Office of the Medicaid Inspector General and the US Sentencing Guidelines as written in the Federal Register. An effective compliance plan must contain the seven elements required by both the federal and state governments and the eighth element required by New York Office of Medicaid Inspector General. The Compliance Plan is distributed to all programs and all departments and is available on the INSPIRE Network. The Compliance Program will be reviewed at least annually and revised as necessary. The Board has final review and approval of the Compliance Plan.

### **Element 1: Written Policies and Procedures**

INSPIRE's commitment to Corporate Compliance is evidenced by the Board of Directors' review and approval of this Corporate Compliance Plan.

INSPIRE has adopted a Code of Conduct which upholds the agency's commitment to ethics and integrity in all of its dealings. Employees are required to maintain behavior and practices that are consistent with the Code of Conduct, Code of Ethics and the expected professional standards within their own professions. INSPIRE expects every person employed by or contracted with INSPIRE to adhere to the

highest ethical standards and to promote ethical behavior. Any person whose behavior is found to violate ethical standards and/or the Code of Conduct will be disciplined appropriately.

The Compliance Officer ensures the maintenance and dissemination of the Code of Conduct and other compliance policies and procedures that promote compliant program operation with applicable laws, regulations and standards. This Corporate Compliance Plan and other written policies and procedures address the operation of the compliance program, provide guidance to employees and others on dealing with potential compliance issues, describe how to communicate potential compliance issues and detail how compliance issues are investigated.

The Corporate Compliance Plan and compliance policies are available are located on INSPIRE's Intranet under Documents: Compliance. The information is also available on the INSPIRE's network ( icp-fs01 →dept →1.General →Corporate Compliance ).

The Corporate Compliance Plan and the Code of Conduct will be reviewed annually and revised as necessary to meet the changing guidelines issued by State and Federal Governments. INSPIRE's compliance policies and procedures will also be reviewed and revised as necessary. The Compliance Officer ensures the review, revision, and maintenance of the Corporate Compliance Plan and compliance policies, and the dissemination to employees.

## **Element 2: Corporate Compliance Officer and Compliance Committee**

### **A. Compliance Officer**

INSPIRE is committed to an effective compliance program and has assigned oversight and program responsibility to a designated employee. The Compliance Officer works in concert with designated resources in the completion of the duties and responsibilities of this plan. The Compliance Officer will advocate a culture of Ethics and Integrity, promote quality and compliance, and serve as lead and liaison with compliance program partners.

The Compliance Officer, the Compliance Committee and Inspire's compliance partners are responsible for the following activities:

1. Annual Compliance Risk Assessment.
2. Proposing revisions to the Compliance Plan.
3. Training and other strategies to ensure that INSPIRE employees, contractors and Board Members are aware of and understand the Compliance Plan, the Code of Conduct, policies and procedures, and current laws and regulations.
4. Guidance to departments and programs to help meet statutory and regulatory obligations.
5. Audits of billing and service delivery to identify deficiencies or weaknesses.
6. Monitoring of corrections of identified deficiencies.
7. Investigation of suspected non-compliance issues, identification of any restitution, recommendation of discipline, follow-up of corrective actions.



8. Reporting compliance activities and outcomes to the Compliance Committee, Executive Team, and Board of Directors.

#### B. Compliance Committee

To further its commitment and to facilitate an active and effective Compliance Program, INSPIRE has established a Compliance Committee. The role of the Committee is to assist the Compliance Officer with implementation of the Compliance Program and provide oversight of the compliance program.

The Compliance Committee will meet quarterly and provide ongoing assistance in the development of policies and procedures, and oversight in audits and program monitoring. The Compliance Committee will provide identification of risk areas and oversight of risk areas and audit findings. The Committee may offer suggestions for the continuous improvement of the Compliance Program.

#### **Element 3: Training and Education**

All employees and persons associated with INSPIRE, including Executive Management and the Board of Directors, will be trained on fraud, waste and abuse, compliance and ethics expectations, and the components of the compliance program, plan and policies.

All existing employees, including contract employees and consultants with ongoing responsibilities for client care, management or billing, must participate in annual training as a condition of continued employment. New employees, including contract employees and consultants, must participate in corporate compliance training as part of their orientation to INSPIRE. Failure to comply with training requirements will result in disciplinary actions.

Additional training will be provided to address high risk or for departments demonstrating a need for more specific training. This need may be identified by the departments or program, or may be the outcome of audit findings, deficiencies or repeat compliance issues.

Annual compliance training is provided for all members of the Board of Directors. Board Members must attest to attending Compliance training.

Compliance training will include but not be limited to the Code of Conduct, Corporate Compliance Plan, Federal and State False Claims Acts, Whistleblowers Act, the Non-Retaliation, Non-Intimidation policy, Fraud, Waste and Abuse, Self Disclosures, INSPIRE's compliance program, and compliance policies and procedures. New hires, current employees and contractors will also participate in annual training on HIPAA Privacy and Security.

#### **Element 4: Reporting Non-Compliance**

Every employee has a responsibility for reporting any activity by any colleague, provider, contractor or vendor that appears to violate applicable laws, rules,

regulations, professional standards or the INSPIRE Compliance program. The effectiveness of the Corporate Compliance Program depends on the willingness of all employees at all levels and departments to report in good faith any questions or concerns. INSPIRE encourages employees to report any behaviors or actions they believe should be reported without fear of retaliation or intimidation (See Element 8).

The reporting of suspected violations of standards, policies, and procedures for business operations can be made to the Compliance Officer in person or by telephone, interoffice mail or through the hotline. The Compliance Officer maintains an “open door” policy for employees to encourage compliance participation, to answer questions or for reporting of incidents. Questions that are raised by employees will be followed up in accordance with this plan.

If an employee, volunteer, Board member or service partner prefers not to report a potential violation directly to the Compliance Officer or prefers anonymity, alternate reporting mechanisms exist. Potential or suspected compliance issues or questions may be reported through the INSPIRE Compliance Hotline at 845-294-8806, extension 301, which was established to offer stakeholders a method of reporting with the option of anonymity. The hotline is monitored daily by the Compliance Officer.

An anonymous written report can also be made by completing the “Corporate Compliance Issues Report” which can be found on the INSPIRE Network (icp-fs01 →dept →1.General →Corporate Compliance ) or the INSPIRE Intranet under Documents: Compliance.

All reports should be completed as accurately and thoroughly as possible. If an employee, volunteer, Board Member or service partner choose to identify him/herself, confidentiality will be maintained to the greatest extent possible in the investigation of a compliance issue. All reports will remain confidential. All suspected violations of standards or episodes of non-compliance must be reported.

#### **Element 5: Good Faith Reporting and Disciplinary Policies**

INSPIRE expects employees to follow regulations, laws, policies and procedures as outlined in this plan and in service specific policy manuals. Compliance with INSPIRE’s Corporate Compliance Plan, Code of Conduct, Code of Ethics and agency policies and procedures is a condition of employment. Compliance responsibilities are included in employees’ job descriptions. Personal compliance with agency policies is evaluated in employees’ performance reviews.

Failure to comply with INSPIRE’s Corporate Compliance Plan, policies, procedures, and/or applicable laws and regulations, or failing to report suspected problems, participating in non-compliant behavior, or encouraging, directing, facilitating, or permitting non-compliant behavior will result in disciplinary action.

Discipline will be issued uniformly across all levels of employees within the organization and among contractors without regard to the level or status of the individual. Discipline for infractions may vary according to the severity of the situation but not the employee's role or level with the agency. Discipline may include counseling/retraining, first, second and third written warnings, suspension or termination from INSPIRE. While discipline usually follows a sequence, INSPIRE does not participate in progressive discipline. Managers may issue discipline at any level according to the severity of the violation. Discipline will be issued fairly and consistently throughout the agency. Severity of disciplinary response will include consideration of other factors such as repeated warnings or deliberate disregard for rules.

Any form of intimidation or retaliation against an employee who reports a perceived problem or concern in good faith is strictly prohibited. INSPIRE maintains a Non-Intimidation/Non-Retaliation Policy for reporters acting in good faith. Any violation of this policy will result in discipline up to and including termination. An employee who deliberately makes a false accusation for the purpose of retaliating against or harming another employee is subject to disciplinary action.

#### **Element 6: Identifying Compliance Risk Areas**

An annual risk assessment designed to identify potential liabilities and risks within programs and departments will be conducted. The Compliance Officer will review the annual work plans from the Office of the Inspector General and the NYS Office of the Medicaid Inspector General, external audits conducted by regulatory agencies, and internal audits. The risk assessment, work plans, and audit findings will be used to develop the annual compliance work plan. The risk assessment and the work plan will be reviewed by Executive Management, the Corporate Compliance Committee and the INSPIRE Board of Directors.

Scheduled and random department and program audits will be conducted to measure compliance and identify any areas of non-compliance or risk. Scheduled audits will be conducted on a rotating schedule according to the work plan, the OMIG and OIG work plans, and the results of any external audits or compliance concerns. Should the need for corrections be identified within a department or program, the responsible manager or administrator will develop a corrective action plan that addresses the audit deficiencies. A schedule of monitoring will be developed between the manager or administrator and the Compliance Officer.

#### **Element 7: Identifying and Responding to Non-Compliance**

INSPIRE is committed to the prevention, prompt detection and correction of non-compliant behaviors. If an audit or internal investigation of a compliance report substantiates a violation, INSPIRE will initiate corrective action, including as appropriate, notifying the government agency, making prompt restitution of any overpayment amounts, recommending disciplinary action, and implementing systemic changes to prevent recurrence.

The detection of non-compliance may come from various sources. A report of non-compliance identified through the hotline, other reporting systems or directly by the Compliance Officer will be logged into a log maintained by the Compliance Officer. Within 48 hours after receiving a report, the complaint will be reviewed. If it is determined that the report does not reflect non-compliance with this plan or policies, the report will be referred for management by the appropriate department (e.g. HR, program management). If the report is a potential compliance failure, the alleged issue will be investigated through audit, interviews and/or observation. If these actions confirm the issue as a compliance failure, a full investigation will be made into the incident according to the Complaint Investigation policy. All supporting documents, including copies of billing documents and voided payments, will be collected and documented in the file. The severity and scope of the issue will be identified, and affected personnel will be advised on immediate and long term actions, which may include ceasing functions (billing) until the problem is corrected. Follow-up and corrective action plans implemented will be documented in the file, and will include a schedule of monitoring.

#### **Element 8: Non-Retaliation and Non-Intimidation**

INSPIRE recognizes that a critical aspect of the compliance program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to federal, state and private payer health care program requirements, or to INSPIRE's ethical and business policies. To promote this culture, INSPIRE requires employees, service partners, Board Members and/or vendors to bring forth any issue they feel may be a potential compliance issue. In order to promote employee and service partner participation, INSPIRE has issued a non-intimidation/non-retaliation policy to protect any employee from retaliation or intimidation who reports problems and concerns in good faith. Any form of retaliation or retribution can undermine the problem resolution process and result in a failure of communication channels in the agency. INSPIRE will not tolerate any form of retaliation.

If an employee feels that he/she has been retaliated against, that employee should immediately notify Human Resources. Human Resources will investigate any claim of retaliation or intimidation towards an employee or service partner. If substantiated, Human Resources will instigate the appropriate response. All employees will be disciplined equally regardless of position within the agency. Each instance will be reviewed for other factors which may influence the severity of the discipline.

### **VII. Code of Conduct**

INSPIRE is committed to full compliance with the laws that apply to our agency, including federal, state and county laws and regulations and the requirements of federal health care programs including Medicare and Medicaid. INSPIRE has published a Code of Conduct to represent our commitment to high standards of performance and behavior.

INSPIRE's Code of Conduct provides standards by which all members of the organization will conduct themselves. Individual conduct protects and promotes organization-wide integrity and enhance INSPIRE's ability to achieve its organizational mission. These requirements apply to our relationships with the persons we serve, Board Members, providers, vendors, contractors, consultants, students, volunteers and each other. The Code of Conduct is a critical component of our Compliance and Ethics Program.

The Code is intended to be used as a guide to help employees make sound decisions during day to day activities. While the Code may give guidance in some instances, the employee is expected to seek additional information or assistance from supervisors, the Compliance Officer, and INSPIRE policies and procedures.

Adherence to the Code of Conduct is a condition of continued employment. All employees will attest upon hire and annually thereafter that they have read and understood the Code of Conduct.

### **VIII. Code of Ethics**

INSPIRE will maintain a workplace that is based on responsibility, mutual trust and respect. The foundations of such a workplace are the honesty, integrity, and sound judgment of the employees, managers, directors, executive leadership and the Board of Directors. INSPIRE is committed to protecting the agency, clients, employees, partners, and or vendors from illegal or damaging actions by individuals, either knowingly or unknowingly, as defined in the Code of Ethics policy. INSPIRE will not tolerate wrongdoings or impropriety at any time.

- INSPIRE will conduct business in compliance with local, state and federal regulations and laws as they apply to our programs and services, and our not-for-profit status.
- INSPIRE expects that employees, managers, members of the Board of Directors, and contractors, vendors, consultants and volunteers (who will henceforce be referred to in this document as service partners) will conduct themselves according to INSPIRE's Corporate Compliance Plan, Code of Conduct and Code of Business Ethics.
- INSPIRE values diversity and does not discriminate on the basis of race, ethnic background, disability, national origin, gender, age, religion, marital status or sexual orientation.
- INSPIRE will manage all communications and representations with third parties in a consistent manner that is accurate and without bias.
- Employees, management and Board Members representing INSPIRE will not accept gifts that directly or indirectly influence INSPIRE's relationship with a vendor, contractor, regulatory entity or other service partner.
- INSPIRE will provide programs and services that are necessary, verifiable and that both are valued by and value the individual being served.
- INSPIRE maintains confidentiality of information about the individuals we serve, our employees and our business relationships consistent with the requirements of our regulatory agencies.

- INSPIRE will maintain accurate and complete records of all services provided and provide timely and proper documentation.
- INSPIRE will bill accurately for services provided, and will not bill for false, fraudulent or fictitious claims.
- INSPIRE will prepare and maintain accurate and complete cost reports, financial records and statements on assets, liabilities, revenue and expenditures.
- INSPIRE will maintain internal controls to assure security and accountability of agency business, with proper monitoring and enforcement.
- INSPIRE will obtain contributions or donations without coercion or promise of any compensation in return.
- INSPIRE's advertising and marketing practices will be conducted in a professional manner that properly reflects INSPIRE's mission and values.
- INSPIRE employees and service partners will use INSPIRE property, including facilities, computers, equipment, supplies and vehicles, for INSPIRE business only or as allowed by policy.

### **IX. Conflict of Interest**

The relationship between INSPIRE and its staff is one which carries a duty of honesty, loyalty and fidelity. Employees, contractors, volunteers, and the Board of Directors may have instances where their personal interests conflict with the interests of INSPIRE. All staff, contractors and the Board of Directors must exercise the utmost good faith in all transactions, treatment and care of the persons we serve and relationship with vendors and suppliers which touch upon their duties and responsibilities for or on behalf of INSPIRE. The appearance of illegality, impropriety, or a conflict of interest or duality of interest can be detrimental to INSPIRE, and therefore must be avoided.

INSPIRE has established the Conflict of Interest policy that describes conflicts due to personal interests, employment, behaviors and INSPIRE's gift policy. It also establishes procedures whereby any potential conflict of interest or improper conduct will be disclosed, so that any necessary action may be taken. All employees and the Board are required to read and understand this Conflict of Interest Policy in order to be alert to a situation which could create a conflict of interest or otherwise be contrary to the established policies of INSPIRE. Employees must complete the attestation annually at training and upon any change in circumstances. The willful, knowing or reckless failure to disclose a real or potential conflict of interest will be grounds for disciplinary action up to and including termination

### **X. Job Description of Compliance Officer**

The Compliance Officer has overall responsibility to oversee compliance with established standards. The Compliance Officer provide reports, both oral and written, to the Board Audit Committee and to the full Board of Directors as necessary.

The Compliance Officer will work closely with INSPIRE's management team to foster and enhance compliance with all applicable laws and regulations, operational polices and procedures, and billing requirements. The authority of the Compliance Officer shall extend

to overview of billing functions, and clinical and program service practices as these corroborate and relate to billing and payment integrity.

The Compliance Officer will chair the Corporate Compliance Committee comprised of personnel from Administrative, Financial, Clinical and Program Service Departments.

## **XI. INSPIRE Organization Chart**

(Attached)

## **XII. Documentation**

Employees and contractors must report and record all agency, consumer and financial information fully, accurately and honestly. Information includes but is not limited to records of the people we serve, documentation of services, accounting books or records, financial statements, timesheets or attendance records, expense reports, vouchers, bills, payroll, claims, payment records, correspondence and any other method of communication.

Employees or service partners must not omit or conceal any relevant information.

Employees or service partners who perform billing and/or coding of claims must take every reasonable precaution to ensure that their work is accurate, timely, and in compliance with federal and state laws, regulations, government contracts and INSPIRE's policies and procedures.

INSPIRE bills for services actually rendered and which are fully documented in the treatment records of the individuals served. If the services must be coded, only billing codes that accurately describe the services provided will be used. Claims for payment or reimbursements of any kind that are false, fraudulent, inaccurate or fictitious will not be tolerated. INSPIRE shall act promptly to investigate, correct and issue restitution for any errors when discovered in submitted claims.

## **XIII. Protection of Confidential Information**

INSPIRE has developed policies and procedures to assure that the confidentiality of INSPIRE information and the people we serve is protected and released only with the proper authorization or for lawful reasons, in addition to the purposes of treatment, payment and operations.

INSPIRE will ensure that all private information owned by others but in the custody and possession of INSPIRE will be held in confidence and not utilized outside of the use contemplated by the owner of the information without the express permission of the owner.

All employees and service partners are required to read and comply with INSPIRE's Confidentiality Policy.

## **XIV. Corrective Action and/or Discipline**

An employee or service partner who violates or knowingly fails to report any violation of the Code of Conduct, applicable law, regulation, INSPIRE policy, procedure or practice is subject to appropriate disciplinary action.

Disciplinary action may range from a verbal warning up to and including suspension or termination, depending upon the nature of the incident and the relevant circumstances. Level of discipline will be determined by the nature of the offense and not the position held by the employee or service partner. INSPIRE does not follow a progressive discipline procedure and managers can issue more severe discipline if the instance warrants.

#### **XV. Investigation and Response**

INSPIRE will investigate and act upon reported incidents of improper or wrongful practice, or other breaches of the compliance program. The Compliance Officer will ensure the investigation of all compliance issues as per policy. The Compliance Officer will identify any need for legal consultation and communicate that need directly with the President & CEO.

Investigations will be completed in a timely and efficient manner, as referenced in the Investigation and Response Policy. If improper or wrongful practice is identified following an investigation, appropriate actions will be developed. The corrective action plan will address the improper practice, immediate actions required, steps to prevent recurrence, area or staff monitoring, and disciplinary actions.

#### **XVI. Auditing and Monitoring**

Ongoing internal evaluation is critical in detecting non-compliance and will help ensure the success of INSPIRE's Compliance Program. Auditing and monitoring are integral components of the Compliance Work Plan.

The Compliance Work Plan will be developed by the Compliance Officer in conjunction with designated resources and the Compliance Committee. The risk assessment, external audits, the OIG and OMIG work plans and known compliance concerns will inform the work plan. The work plan can include the following:

- Relationships with third party contractors, specifically those with substantive exposure to state, federal and local government enforcement actions.
- Compliance audits of policies and procedures and the Code of Ethics.
- Reviews of documentation, billing, development and submission of Medicaid and Medicare claims.

Audits will examine INSPIRE's compliance with specific rules and policies and may include site visits, personnel interviews, questionnaires, treatment record reviews, and claims reviews. HIPAA compliance and documentation reviews may be included.

The plan will include a review schedule, persons to assist with the review, and the documentation and data to be collected.

INSPIRE contracts with an independent certified public accounting firm to perform annual audits of INSPIRE's financial records, financial statements and the Consolidated Fiscal Report. The audit is to be conducted in accordance with generally accepted auditing standards. INSPIRE expects the auditors to call attention to any accounting control,



regulatory control or other related matters that they believe warrant consideration or action. The auditors will issue an opinion letter and a management letter for each audit period. The auditors will review their findings with the Executive Management Team, the Compliance Officer and the Board of Directors.

### **XVII. Education and Training**

The Compliance Officer is responsible for ensuring a systemic and ongoing training program to educate new and existing employees regarding policies, procedures, agency standards and Federal, State and other regulatory compliance. Every employee will be trained in INSPIRE policies and procedures and the laws and regulations that govern the agency's operations. Training will occur at the beginning of employment and annually thereafter. Training will also occur upon changes in the program and upon request of a supervisor or the Compliance Officer. Verification of employee attendance at the training/s will be maintained in the employee's personnel file.

Members of the Board of Directors will be trained annually by the Compliance Officer within regularly scheduled Board meetings.

Vendors will be given access to compliance education materials upon contract finalization.

### **XVIII. False Claims Act**

INSPIRE is committed to operating within a structure of appropriate business practices and to promoting the detection and prevention of health care fraud and abuse. INSPIRE complies with applicable state and federal fraud and abuse laws. Any employee, service partner, or member of the Board of Directors who suspects or has knowledge of false claims or inaccurate billing activities will report these activities to the Corporate Compliance Officer. Failure to report such information will result in disciplinary action up to and including termination of employment or removal from the Board.

The Federal False Claims Act (FCA) makes it illegal to knowingly present, or cause to be presented, a false or fraudulent claim to be paid by the federal government. Under this law, "knowingly" means acting not only with actual knowledge but also with deliberate ignorance or disregard for the truth. The law imposes liability on any person who submits a claim to the federal government that known or should know have been known to be false, or which conceals or knowingly and improperly avoids or decreases an obligation to pay or transmit money to the government. The FCA imposes liability on any individual who knowingly submits a false record to obtain payment from the government, or obtains money from the government to which he/she may not be entitled and then uses false statements or records to retain the money. Reverse false claims is the retention of money that has been paid by the government and knowingly kept or not reported within 60 days.

### **XIX. WhistleBlower's Act**

Whistleblowing is defined as the disclosure by a person to those in authority of mismanagement, corruption, illegality, or wrongdoing by others in the organization. The person who makes the disclosure is called the "whistleblower".

Under the Federal Law, INSPIRE employees, service partners, members of INSPIRE's Board of Directors and vendors with whom INSPIRE does business may bring a civil action in the name of the government (Whistleblow) for a violation of the Federal False Claims Act. The FCA provides protection for employees, contractors, volunteers, Board Members, contractors and vendors from retaliation, called the Non-Intimidation/Non-Retaliation Policy.

## **XX. Non-Intimidation/Non-Retaliation**

INSPIRE will not permit any negative or adverse actions to be taken against any employee or individual for making a good-faith report of a possible violation of its Code of Conduct, policies or applicable law, even if the report is mistaken. INSPIRE will not permit negative or adverse actions to be taken against any employee or individual who assists in the investigation of a reported violation. Intimidation or Retaliation in any form will not be tolerated. Any act of alleged retaliation should be reported to Human Resources immediately and will be promptly investigated. An employee who retaliates against someone who has reported a violation in good faith is subject to discipline up to and including termination of employment. This Non-Intimidation/Non-Retaliation Policy is intended to encourage and enable **employees** and others to raise serious concerns within INSPIRE prior to seeking resolution outside the organization.

## **XXI. Related Policies:**

- Code of Conduct
- Code of Ethics
- Confidentiality
- Conflict of Interest
- Training
- Whistleblower's Act
- False Claims Act
- Reporting Compliance Issues
- Complaint Investigation Process
- Investigating and Response
- Corrective Action and Discipline
- Compliance Officer Job Description
- Compliance Committee
- Compliance Issue Report