

CATTARAUGUS COUNTY

CORPORATE COMPLIANCE

HANDBOOK

Approved: December 8, 2010
By: Act 616-2010 of the Cattaraugus County Legislature
Revised: August 26, 2015
By: Act 390-2015 of the Cattaraugus County Legislature

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Cattaraugus County

Compliance Plan

Section 1

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Purpose of The Corporate Compliance Program

The Cattaraugus County Legislature has directed the development of a Corporate Compliance Plan, to reaffirm the commitment of Cattaraugus County to abide by high legal and ethical standards in all of its operations and services provided on behalf of the residents of Cattaraugus County.

To that end, Cattaraugus County has developed Standards of Conduct and Policies and Procedures for the implementation of the Cattaraugus County Corporate Compliance Plan. This Plan forms the basis of the Cattaraugus County Corporate Compliance Program and these documents provide guidance to all employees and independent contractors regarding the operation of the Corporate Compliance Program and the available mechanisms through which compliance issues can and should be reported.

Each employee and contractor of Cattaraugus County is responsible for adhering to both the Standards of Conduct and the Policies and Procedures of the Corporate Compliance Program.

Background

On November 28, 1990, Cattaraugus County adopted Local Law 7-1990 known as the Cattaraugus County Ethics Code. “The intent of this code was to establish minimum standards of ethical conduct for County officers and employees to ensure that County government is free from improper influence.” This law goes on to note that “by requiring public disclosure of interest that may influence, or be perceived to influence, the actions of County officials, this code is intended to facilitate consideration of potential problems before they arise, to minimize unwarranted suspicion, and to enhance the accountability of government to the people”. It is the policy of Cattaraugus County that ethical dilemmas within the organization are handled through the Cattaraugus County Ethics Board.

In keeping with its Ethics Code, the Cattaraugus County Legislature has directed the development of a Corporate Compliance Program, to reaffirm the commitment of Cattaraugus County to abide by high legal and ethical standards in all of its operations. To that end, Cattaraugus County has developed this Corporate Compliance Plan, which sets forth the Standards of Conduct and Policies and Procedures to be followed by all Cattaraugus County employees and contractors who furnish services and goods to Cattaraugus County. The Cattaraugus County Legislature on December 8, 2010 adopted this revised Corporate Compliance Plan. This Plan is a revision and update of the Corporate Compliance Plan adopted by the Cattaraugus County Legislature on November 8, 1999.

This Corporate Compliance Plan addresses the conduct of all employees and contractors and involves all Legislators, other elected officials, County officers, employees and contractors. All of these individuals are expected to comply with this Plan. Conduct in violation of these standards may lead to sanctions, disciplinary action or a revocation of the Contractor’s contract for service.

Ethical and legal conduct in all actions and operations on behalf of the residents of Cattaraugus County is of the utmost importance to the Cattaraugus County Legislature.

COMPLIANCE POLICY AND SUMMARY

1. Policy

1.1 It has been and continues to be the policy of Cattaraugus County (also referred to as “County” or “the County”) to comply with all applicable federal, state, and local laws and regulations, and payer requirements. It is also the County’s policy to adhere to the Code of Ethics that is adopted by the County Legislature.

2. Commitment

2.1 The County has always been and remains committed to its responsibility to conduct its business affairs with integrity based on sound ethical and moral standards. The County will hold its employees, contracted personnel, and vendors to these same standards.

2.2 Cattaraugus County is committed to maintaining and measuring the effectiveness of our Compliance policies and standards through monitoring and auditing systems reasonably designed to detect noncompliance by its employees and agents. The County shall require the performance of regular, periodic compliance audits by internal and/or external auditors who have expertise in federal and state health care statutes, regulations, and health care program requirements.

3. Responsibility

3.1 All employees, contracted personnel, and vendors shall acknowledge that it is their responsibility to report any instances of suspected or known noncompliance to their immediate supervisor or the Compliance Officer. Reports may be made anonymously and without fear of retaliation or retribution. Failure to report known noncompliance, or making reports which are not in good faith, will be grounds for disciplinary action, up to, and including, termination. Reports related to harassment or other workplace-oriented issues will be referred to the County Personnel Officer.

4. Policies and Procedures

4.1 Cattaraugus County will communicate its compliance standards and policies through required training initiatives to all employees, contracted personnel, and vendors. The County is committed to these efforts through distribution of this Compliance Policy, its Standards of Conduct and Policies and Procedures.

5. Enforcement

5.1 This Compliance Policy will be consistently enforced through appropriate disciplinary mechanisms including, if appropriate, discipline of individuals responsible for failure to detect and/or report noncompliance.

6. County Response

6.1 Detected noncompliance, through any mechanism, i.e., compliance auditing procedures and/or confidential reporting, will be responded to in an expedient manner. The County is dedicated to the resolution of such matters and will take all reasonable steps to prevent further similar violations, including any necessary modifications to the Compliance Plan.

7. Due Diligence

7.1 Cattaraugus County will, at all times, exercise due diligence with regard to background and professional license investigations for all prospective employees, contractors and vendors.

8. Whistleblower Provisions and Protections

8.1 The County will not take any retaliatory action against an employee if the employee discloses certain information about the County's policies, practices, or activities to a regulatory, law enforcement, or other similar agency or public official. Protected disclosures are those that assert that the County is in violation of a law that creates a substantial and specific danger to the public health and safety or which constitutes health care fraud under the law or that assert that, in good faith, the employee believes constitute improper quality of care.

1. Mission Statement and Expectations

1.1. Mission

It is the mission of Cattaraugus County to enhance the quality of life for all our citizens by providing vital public services, required by law or by the public, in a courteous, efficient and fiscally responsible manner that serve the needs of all our citizens.

1.2. Expectations

The County ensures that all aspects of service provision and business conduct are performed in compliance with our mission statement, policies and procedures, professional standards, applicable governmental laws, rules, and regulations, and other payer standards. Cattaraugus County expects every person who provides services to adhere to the highest ethical standards and to promote ethical behavior. Any person whose behavior is found to violate ethical standards will be disciplined appropriately.

In accordance with Cattaraugus County Code of Ethics, employees, legislators, elected officials, and County officers may not engage in any conduct that conflicts – or is perceived to conflict – with the best interest of Cattaraugus County. Employees, legislators, elected officials, and County officers must disclose any circumstances where the employee or his or her immediate family member is an employee, consultant, owner, contractor, or investor in any entity that (i) engages in any business or maintains any relationship with the County; (ii) provides to, or receives from, the County any patient referrals; or (iii) competes with the County. Employees may not without permission of the Compliance Officer accept, solicit, or offer anything of value from anyone doing business with the County, in excess of that authorized by New York State Statute or the County Ethics Code.

Employees and contractors are expected to maintain complete, accurate, and contemporaneous records as required by the County. The term “records” includes all documents, both written and electronic, that relate to the provision of County services or provide support for the billing of County services. Records must reflect the actual service provided. Any records to be appropriately altered must reflect the date of the alteration, the name, signature, and title of the person altering the document, and the reason for the alteration, if not apparent. No person shall ever sign the name of another person to any document. Signature stamps shall not be used. Backdating and predating documents is unacceptable and will lead to discipline up to, and including, termination.

When any person knows or reasonably suspects that the expectations above have not been met, this must be reported to his/her immediate supervisor or the Compliance Officer, so each situation may be appropriately dealt with. The Compliance Officer may be reached at (716) 938-6003.

2. The Role of the Corporate Compliance Officer

2.1. Compliance Officer

The Cattaraugus County Legislature designates the County Privacy, Security and Compliance Officer, created by Act 146-2013, as the Corporate Compliance Officer (also referred to as “Compliance Officer”). The Compliance Officer has direct lines of communication to the Legislature and the Cattaraugus County Attorney.

The Compliance Officer, once appointed, will serve in that position unless, and until, the Chairman of the Cattaraugus County Legislature determines that replacement of the Compliance Officer is necessary in order to maintain the effectiveness of the Corporate Compliance Program.

2.2. Job Duties

The Compliance Officer is directly obligated to serve the best interests of the County, its residents and employees. Responsibilities of the Compliance Officer include, but are not limited to:

- Developing and implementing compliance policies and procedures (P&P);
- Overseeing and monitoring the implementation of the Compliance Program;
- Directing County internal audits established to monitor effectiveness of compliance standards;
- Providing guidance to management, medical/clinical program personnel, and individual departments regarding policies and procedures and governmental laws, rules, and regulations;
- Updating the Compliance Plan periodically as changes occur within the County, within the law and regulations, or governmental and third party payers;
- Overseeing efforts to communicate awareness of the existence and contents of the Compliance Plan;
- Coordinating, developing, and participating in the educational and training program;
- Guaranteeing that independent contractors, including, but not limited to, program services, vendors, billing services, are aware of the requirements of the County’s Compliance Plan;
- Actively seeking up-to-date material and releases regarding regulatory compliance;
- Maintaining a reporting system (Compliance Helpline) and responding to concerns, complaints, and questions related to the Compliance Plan;
- Acting as a resourceful leader regarding regulatory compliance issues;
- Investigating and acting on issues related to compliance;
- Coordinating internal investigations and ensuring implementation of corrective action.

3. The Structure, Duties, and Role of the Corporate Compliance Committee

3.1. Reporting Structure and Purpose

Corporate Compliance Committee members are appointed by the Legislature. Compliance issues are reported by the Corporate Compliance Committee to the Compliance Officer and County Legislature, where appropriate. The Corporate Compliance Committee's purpose is to advise and assist the Compliance Officer with implementation of the Compliance Plan. The Corporate Compliance Committee shall include a total of seven (7) members; five (5) voting members and two (2) ex-officio members. The individuals holding the positions of Privacy, Security and Compliance Officer, County Treasurer, Personnel Officer, Undersheriff and Chairman of the Legislature, shall be voting members on the Committee. The County Administrator and County Attorney shall serve as ex-officio members. The term of the appointments shall be the duration of each individual's employment.

3.2. Function

The roles of the Corporate Compliance Committee include:

- Analyzing the environment in which Cattaraugus County does business, including legal requirements with which it must comply;
- Reviewing and assessing existing policies and procedures that address risk areas for possible incorporation into the Compliance Plan;
- Working with departments to develop standards and policies & procedures that address specific risk areas and encourage compliance, according to legal and ethical requirements;
- Advising and monitoring appropriate departments relative to compliance matters;
- Developing internal systems and controls to carry out compliance standards and policies;
- Monitoring internal and external audits to identify potential non-compliant issues;
- Implementing corrective and preventive action plans;
- Developing a process to solicit, evaluate, and respond to complaints and problems.

4. Delegation of Substantial Discretionary Authority

4.1. Requirement

Any employee, Legislator, elected official, and County officer who holds, or intends to hold, a position with substantial discretionary authority for Cattaraugus County is required to disclose any name changes and any involvement in non-compliant activities, including health care-related crimes. In addition, Cattaraugus County performs reasonable inquiries into the background of such applicants, contractors and vendors.

The following organizations may be queried with respect to potential employees, County officers, contractors and vendors:

- a) General Services Administration: list of parties excluded from federal programs.
The URL address is <https://www.sam.gov/portal/SAM/?portal>.
- b) Health and Human Services/Office of Inspector General cumulative sanction report.
The URL address is <http://exclusions.oig.hhs.gov/>.
- c) NYS Medicaid Fraud Database.
The URL address is <https://www.omig.ny.gov/search-exclusions>.
- d) Licensure and disciplinary record with NYS Office of Professional Medical Conduct (Physicians, Physician Assistants)
(the URL address is <http://w3.health.state.ny.us/opmc/factions.nsf>)
and/or New York State Department of Education (other licensed professionals)
(the URL address is <http://www.op.nysed.gov/opd/rasearch.htm>).

5. Education and Training

5.1. Expectations

Education and training are critical elements of the Corporate Compliance Plan. Every employee, legislator, elected official, County officer, contractor and agent is expected to be familiar and knowledgeable about Cattaraugus County's Compliance Plan and have a solid working knowledge of his or her responsibilities under the Plan. Compliance policies and standards will be communicated to all employees through required participation in training programs.

5.2. Training Topics - General

All personnel and members of the County legislature shall participate in training on the topics identified below:

- Government and private payer reimbursement principles;
- Government initiatives;
- History and background of Corporate Compliance;
- Legal principles regarding compliance and responsibilities related thereto;
- Federal False Claims Act provisions;
- New York State False Claims Act provisions;
- Whistleblower provisions and protections;
- Prohibitions against submitting a claim for services when documentation of the service does not exist to the extent required;
- Prohibitions against signing for the work of another employee;
- Prohibitions against inappropriate alterations to business and medical records: appropriate methods of alteration;
- Prohibitions against rendering services without a signed physician's order or other authorization, if applicable;
- Proper documentation of services rendered; and
- Duty to report misconduct and suspected non-compliance; including how to report.

5.3. Training Topics - Targeted

In addition to the above, targeted training will be provided to all supervisory personnel and any other employees whose job responsibilities include activities related to compliance topics.

Employees and contracted personnel involved in the delivery and monitoring of health care services, including the Departments of Nursing Homes, Community Services, Social Services, and Health will be provided with additional training in service planning, delivery and documentation practices, other program-specific risk areas and enforcement actions.

Department Heads shall assist the Compliance Officer in identifying areas that require specific training and are responsible for communication of the terms of this Compliance Plan to all independent contractors doing business with the County.

5.4. Orientation

As part of their orientation, each employee shall receive a written copy of the Compliance Plan, Compliance Program policies, Standards of Conduct, and Code of Ethics. Independent contractors shall be referred to the County's website for copies of the Compliance Plan and Standards of Conduct.

5.5. Attendance

All education and training relating to the Compliance Plan will be verified by attendance and a signed acknowledgement of receipt of the Compliance Plan and Standards of Conduct.

Attendance at compliance training sessions is mandatory and is a condition of continued employment.

6. Effective Confidential Communication

6.1. Expectations

Open lines of communication between the Compliance Officer and every employee and agent subject to this Plan are essential to the success of the County's Compliance Program. Every employee, legislator, elected official, County officer, contractor and agent has an obligation to refuse to participate in any wrongful course of action and to report the actions according to the procedure listed below.

6.2. Reporting Procedure

If an employee, legislator, elected official, County officer, contractor or agent witnesses, learns of, or is asked to participate in, any activities that are potentially in violation of this Compliance Plan, then he or she should contact his or her immediate supervisor or the Compliance Officer. Reports may be made in person or by calling the Compliance Helpline, a telephone line dedicated for the purpose of receiving such notification.

Upon receipt of a question or concern, any supervisor, officer, or director shall document the issue at hand and report to the Compliance Officer. Any questions or concerns relating to potential non-compliance by the Compliance Officer should be reported immediately to the Chairman of the County Legislature.

The Compliance Officer or designee shall record the information necessary to conduct an appropriate investigation of all complaints. If the employee was seeking information concerning the Code of Ethics or its application, then the Compliance Officer or designee shall record the facts of the call and the nature of the information sought and respond as appropriate. The County shall, as much as is possible, protect the anonymity of the employee or contractor who reports any complaint or question.

6.3. Protections

The identity of reporters will be safeguarded to the fullest extent possible and will be protected against retribution. Report of any suspected violation of this Plan by following the above shall not result in any retribution. Any threat of reprisal against a person who acts in good faith pursuant to his or her responsibilities under the Plan is acting against the County's Compliance Plan. Discipline, up to and including termination of employment, contract or appointment, will result if such reprisal is proven.

6.4. Guidance

Any employee and agent may seek guidance with respect to the Compliance Plan, Code of Ethics, or Standards of Conduct at any time by following the reporting mechanisms outlined above.

7. Enforcement of Compliance Standards

7.1. Background Investigations

For all employees who have authority to make decisions that may involve compliance issues, the County will conduct a reasonable and prudent background investigation, including a reference check, as part of every employment application.

7.2. Disciplinary Action - General

Employees who fail to comply with the County's compliance policy and standards, or who have engaged in conduct that has the potential of impairing the County's status as a reliable, honest, and trustworthy service provider, will be subject to disciplinary action, up to and including termination, in accordance with the applicable collective bargaining agreements or applicable laws, rules or regulations. Any discipline will be appropriately documented in the employee's personnel file, along with a written statement of reason(s) for imposing such discipline. The Compliance Officer shall maintain a record of all disciplinary actions involving the Compliance Plan and report periodically to the Legislature regarding such actions.

7.3. Performance Evaluation - Supervisory

Cattaraugus County's Compliance Program requires that the promotion of, and adherence to, the elements of the Compliance Program be a factor in evaluating the performance of County employees and contractors. They will be periodically trained in new compliance policies and procedures. In addition, all Department Heads and supervisors will:

- a. Discuss with all supervised employees the compliance policies and legal requirements applicable to their function;
- b. Inform all supervised personnel that strict compliance with these policies and requirements is a condition of employment;
- c. Disclose to all supervised personnel that the County will take disciplinary action up to, and including, termination or revocation of privileges for violation of these policies and requirements.

7.4. Disciplinary Action - Supervisory

Department Heads and supervisors will be sanctioned, in accordance with the applicable collective bargaining agreements or applicable laws, rules or regulations, for failure to adequately instruct their subordinates or failure to detect noncompliance with applicable policies and legal requirements where reasonable diligence on the part of the manager or supervisor would have led to the earlier discovery of any problems or violations and would have provided the County with the opportunity to correct them.

8. Auditing and Monitoring of Compliance Activities

8.1. Internal Audits

Ongoing evaluation is critical in detecting non-compliance and will help ensure the success of Cattaraugus County's Compliance Program. An ongoing auditing and monitoring system, implemented by the Compliance Officer and in consultation with the Compliance Committee, is an integral component of the County's auditing and monitoring systems. This ongoing evaluation shall include the following:

- Review of relationships with third-party contractors, specifically those with substantive exposure to government enforcement actions;
- Compliance audits of compliance policies and standards; and
- Review of documentation and billing relating to claims made to federal, state, and private payers for reimbursement, performed internally or by an external consultant as determined by Compliance Officer and Compliance Committee.

The audits and reviews will examine the County's compliance with specific rules and policies through on-site visits, personnel interviews, general questionnaires submitted to employees and contractors, and patient record documentation reviews.

8.2. Plan Integrity

Additional steps to ensure the integrity of the Compliance Plan will include:

- Periodic review with the County Attorney of all records of communications and reports by all employees or contractors kept in accordance with this Plan;
- The Compliance Officer will be notified immediately in the event of any visits, audits, investigations, or surveys by any federal or state agency or authority, and shall immediately receive a photocopy of any correspondence from any regulatory agency charged with licensing the County and/or administering a federally or state-funded program or County-funded program with which County participates;
- Establishment of a process detailing ongoing notification by the Compliance Officer to all appropriate personnel of any changes in laws, regulations, or policies, as well as appropriate training to assure continuous compliance.

9. Detection and Response

9.1. Violation Detection

The Compliance Officer and the Compliance Committee shall determine whether there is any basis to suspect that a violation of the Compliance Plan has occurred.

If it is determined that a violation *may have* occurred, then the matter may be referred to the County Attorney who, with the assistance of the Compliance Officer, shall conduct a more detailed investigation. This investigation may include, but is not limited to, the following:

- Interviews with individuals having knowledge of the facts alleged;
- A review of documents; and
- Legal research and contact with governmental agencies for the purpose of clarification.

If advice is sought from a governmental agency, then the request and any written or oral response shall be fully documented.

9.2. Reporting

At the conclusion of an investigation conducted by the County Attorney, he or she shall issue a report to the Compliance Officer, Compliance Committee and Chairman of the Legislature summarizing his or her findings, conclusions, and recommendations and will render an opinion as to whether a violation of the law has occurred.

The report will be reviewed with the County Attorney in attendance. Any additional action will be on the advice of the County Attorney.

The Compliance Officer shall report to the Compliance Committee regarding each investigation conducted.

9.3. Rectification

If County identifies that an overpayment was received from any third party payer, then the appropriate regulatory (funder) and/or prosecutorial (Attorney General/police) authority will be appropriately notified with the advice and assistance of the County Attorney. It is County policy to not retain any funds which are received as a result of overpayments. In instances where it appears an affirmative fraud may have occurred, appropriate amounts shall be returned after consultation and approval by involved regulatory and/or prosecutorial authorities. Systems shall also be put in place to prevent such overpayments in the future.

9.4. Record Keeping

Regardless of whether a report is made to a governmental agency, the Compliance Officer shall maintain a record of the investigation, including copies of all pertinent documentation. This record will be considered confidential and privileged and will not be released without the approval of the Chairman of the Legislature or County Attorney.

10. Whistleblower Provisions and Protections

10.1. Provisions

The False Claims Act provides protection to qui tam (“Whistleblower”) relators who are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the False Claims Act.

Cattaraugus County will not take any retaliatory action against an employee if the employee discloses information about the County’s policies, practices, or activities to a regulatory, law enforcement or other similar agency or public official. Protected disclosures are those that assert that County is in violation of a law that creates a substantial and specific danger to the public health and safety or which constitutes health care fraud under the law or that assert that, in good faith, the employee believes constitute improper quality of care.

10.2. Protections

The employee’s disclosure is protected only if the employee first brought up the matter with a supervisor and gave the employer a reasonable opportunity to correct the alleged violation, unless the danger is imminent to the public or patient and the employee believes in good faith that reporting to a supervisor would not result in corrective action.

Cattaraugus County will protect qui tam relators with remedies that include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys’ fees.

If the County takes a retaliatory action against the qui tam relator (employee), then the employee may sue in state court for reinstatement to the same, or an equivalent position, any lost back wages and benefits and attorneys’ fees.

Cattaraugus County

Standards of Conduct

Section 2

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Cattaraugus County Standards of Conduct

Intent

Cattaraugus County's (sometimes referred to as "County" or "the County") Standards of Conduct applies to all employees and independent contractors.

The Standards of Conduct were approved by the County Legislature and are a formal statement of the County's commitment to the standards and rules of ethical conduct.

The County is committed to preventing the occurrence of unethical or unlawful behavior, stopping such behavior as soon as possible after discovery, and to discipline employees who violate the Standards of Conduct, including employees who neglect to report a violation.

All employees must comply with the Standards of Conduct, immediately report any alleged violations of wrongdoing, and assist management and compliance personnel in investigating allegations of wrongdoing.

While these standards are intended to guide employees in the course of their day-to-day responsibilities, they do not replace any County or program policies and procedures. There may be instances that are not addressed by the Standards of Conduct or existing policies and procedures, or activities that may conflict with these standards. Employees must seek direction from their supervisor or the Compliance Officer in these instances.

1. Commitment to the Delivery of High Quality Programs and Services

1.1 Quality programs and services

1.1.1 The County:

- Will operate and provide programs and services in compliance with all applicable federal and state regulatory requirements.
- Is committed to providing a high quality of care and services to its program recipients and every other patient, as well through the delivery of services in a responsible, reliable, ethical and appropriate manner.
- Is committed to the goal of excellence in service delivery and programming with sensitivity to all recipient needs.
- Expects that services and decisions rendered by employees and contractors will be made in accordance with customary and recognized standards of care and acceptable business practices.

1.2 Treatment of service/program recipients

1.2.1 The County requires that service and program recipients and all others be treated with dignity and respect.

1.2.2 Employees and contractors of the County must maintain the confidentiality of all recipient related information, as required by law.

1.3 Non-Discrimination

1.3.1 The County provides programs and services to individuals in accordance with program eligibility and/or individual needs, and does not unlawfully discriminate in the provision of quality services delivered to individuals on the basis of age, sex, race, national origin, disability, religion, sexual preference, or veteran status.

2. Integrity of Business Practices

2.1 Ethical Conduct

2.1.1 It is the policy of the County to observe all laws and regulations applicable to its business and to conduct business with the highest degree of integrity. To accomplish this, all employees and contractors must obey the laws and regulations that govern their work and always act in the best interest of services recipients and the County.

2.1.2 Each employee and contractor must:

- Maintain a high level of integrity and honesty in business conduct, and function with honesty in all work for the County, the people served, providers, suppliers, and all others with whom the County does business.
- Avoid any conduct that could reflect adversely on the integrity of the County.
- Perform all duties on behalf of the County in a manner that he or she reasonably believes to be in the best interest of the County.
- Keep management staff informed of what he or she is doing; document or record all services or transactions accurately; and be honest and forthcoming with the County, regulatory agencies, and internal and external auditors.
- Not allow any outside financial interest, or competing personal interest to influence their decisions or actions taken on behalf of the County.

- Avoid any situation where a conflict of interest exists or might appear between their personal interests and those of the County. The appearance of a conflict of interest may be as serious as an actual conflict of interest.
- Not conduct outside activities during work time. Such activities interfere with regular duties and negatively impact the quality of work.
- Assure that the County's assets are to only be used for the benefit of the County and the people served. Assets include funds, equipment, inventory, and office supplies, but also concepts, business plans and strategies, information about people served, financial information, computer property rights, and other business information about the County.
- Not use County assets for personal gain or give them to any other persons or entities, except in the ordinary course of business as part of an approved transaction.
- Comply with the County's policies and procedures, accounting rules, and internal controls.

2.2 Business entertainment or gifts

- 2.2.1 Personnel of the County may not provide business entertainment, cash or non-cash gifts with County funds.

2.3 Improper payments

- 2.3.1 The County will not make any payments or provide anything of value to anyone to induce the use of health care services or other services furnished by the County.

- 2.3.2 An employee or contractor of the County:

- May not make, or offer to make, any payment or provide anything of value to another person with the understanding or intention that such payment or item of value will influence any government official, patient, physician or other source of referrals, or that such payment is to be used for an unlawful or improper purpose.
- Should never make a payment to anyone, which, if it were publicly disclosed, would embarrass the employee, staff member, contractor, or the County.

2.4 Marketing

- 2.4.1 The County will present itself to the community through its marketing activities in a manner consistent with its mission and capabilities.

- 2.4.2 The County will not engage in any unethical, abusive, or illegal marketing or advertising practices in connection with the offering or provision of health care services.

2.5 Payment for Referrals

- 2.5.1 The County will not pay incentives to employees or contractors based on the number of persons they refer to the County for health care or human services.

- 2.5.2 The decision to provide health care services to individuals referred to the County is a medical decision that will be made by qualified health care professionals.

3. Relations with government and suppliers

3.1 Other Government Officials

3.1.1 The County:

- Will be honest in all its dealings with government officials.
- Will comply with all laws regarding political contributions and gifts to government officials.
- Will not offer to make payments or anything of value to an employee or representative of a government agency with which the County has or is seeking to obtain a contractual or other business or financial relationship, or that regulates any County activities or operations.
- Will not offer, make, accept, or receive payments or anything of value that involve the provision of health care services to beneficiaries of any federal, state or local government care program, including Medicare or Medicaid.

3.2 Contract Negotiation

3.2.1 Conducting business with providers, contractors, suppliers, and competitors may pose ethical problems. Employees and contractors are expected to deal fairly with providers, contractors, suppliers, service recipients, and competitors.

3.2.2 Kickbacks and rebates in cash, credit, or other forms are prohibited. They are not only unethical, but in many cases, illegal.

3.2.3 The County must assure that any agreements with contractors and vendors clearly and accurately describe the services to be performed or items to be purchased. Performance standards, and the applicable compensation, if any, must be reasonable in amount, not be excessive in terms of industry practice and must equal the value of the services rendered.

3.2.4 The County will not make or receive payments from suppliers in exchange for entering into contracts or extending favorable rates.

3.2.5 Supplies and equipment will be obtained from suppliers who provide high quality products and services at a reasonable cost.

3.2.6 Employees of the County must not accept gifts, payments, entertainment, or anything of more than nominal value from current or potential suppliers of items or services related to the provision of services by the County, in excess of that authorized by New York State Law.

3.2.7 The solicitation of anything of value from current or potential suppliers of items or services is expressly prohibited.

3.2.8 Discounts that are available to all employees of the County and employees of other health care systems or providers may be accepted.

3.3 Contractors Compliance

3.3.1 It is the policy of the County to require compliance from contractors. Such contractors include all persons and entities that:

- Furnish direct services to the County on a contract basis.
- Provide billable services for the County, including but not limited to:
 - Temporary nursing staff agencies;
 - Health care supply and equipment providers;
 - Outside laboratories and diagnostic testing providers; and/or
 - Rehabilitation therapy providers that have entered into service agreements with the County.

3.3.2 Such contractors must be familiar with, and comply with, all applicable federal and state regulatory requirements and must conduct all business in an ethical manner.

3.3.3 All agreements between the County and contractors that provide services to the County or that provide billing services for the County must include a signed agreement indicating that the contractor:

- Has reviewed the Standards of Conduct and policies and procedures outlined in Corporate Compliance Program;
- Agrees to comply with such Standards of Conduct and policies and procedures;
- Will require compliance with such Standards of Conduct and policies and procedures by all persons who provide services to the County on behalf of such contractor. If a contractor has a Corporate Compliance Plan, then the Contractor's Plan must be submitted to the County.

4. Maintenance of Records

4.1 Record Retention

4.1.1 In order to ensure that the County keeps those documents required by law and necessary to its operations, employees, and contractors of the County should adhere to the following guidelines on document retention.

4.1.2 The retention, disposal, or destruction of records of or pertaining to the County must always comply with legal and regulatory requirements and County policy.

4.1.3 Employees and contractors must record and report all County, recipient and financial information fully, accurately, and honestly. Records include, but are not limited to, records of service recipients, documentation of services, accounting books or records, financial statements, timesheets or records, expense reports, vouchers, bills, payroll, claims payment records, correspondence, and any other method of communication. Employees or contractors must not omit or conceal any relevant information.

4.2 Requirements of government programs and other third party payers

4.2.1 The County will comply with the document retention requirements of state or federal government health care programs and other third party payers with regard to records relating to the provision of health care services to beneficiaries of such government programs or the health care reimbursement plans of such third party payers.

4.2.2 The Records Access Officer for the County maintains document retention requirements. Currently, the Office of the County Clerk handles the duties of the Records Officer. Files are generally maintained at the Records Facility currently located in the basement of the County Department of Public Works Building located at 8810 Route 242 in Little Valley, New York. The phone number for the County Clerk's Office is (716) 938-9111, extension 2293. The phone number for the County Records Facility is (716) 938-9121.

4.3 Requirements of state and federal law

4.3.1 The County will comply with the document retention requirements under state and federal law and regulations with regard to all medical, financial, and administrative records concerning health care and other services provided by the County.

4.3.2 No employee or contractor should ever destroy or alter any documents in anticipation of a request for those documents from any government agency or court.

4.3.3 If any employee or contractor believes that such conduct has occurred, or may occur, then the employee or contractor should contact 1) his or her immediate supervisor, 2) the Corporate Compliance Officer or 3) the County Compliance Helpline at 716-375-5136 immediately.

4.4 Patient and service recipient confidentiality and privacy

4.4.1 All medical records concerning patients and service recipients of the County will be maintained as confidential and will be disclosed to third parties or other entities only as required or permitted by state or federal law and in accordance with County policies and procedures.

4.5 Protection of confidential information

4.5.1 The County has developed policies and procedures to assure that the confidentiality of County information and information about the service recipients is protected and released only with the appropriate authorization or for lawful reasons. All employees and contractors are required to comply with applicable laws, rules and regulations.

4.5.2 Each employee and contractor must:

- Treat all County records and information as confidential.
- Not release confidential information without the proper authorization. Confidential information includes not only information about service recipients and their families, but also non-public information about the County that may be harmful to the County or its clients if released.
- Protect County information and avoid discussing or disclosing County information, purposefully or inadvertently (through casual conversation), to any unauthorized person inside or outside the County. Furthermore, employees and contractors shall not share confidential County information, except where required for a legitimate business purpose.
- Not remove County information from County property, without permission from a supervisor or administrator with proper authority over the information.

- Upon termination of employment or contract with the County, return all County property including, but not limited to, copies of documents, notes, and other records containing confidential information; computer disks; County ID; and keys.
- Properly use information stored and produced by all of the County's computer systems.
- Use computers, internet access, email, or other office communications systems for business-related purposes only and not for uses that may be disruptive, offensive, harassing, or harmful to others.
- Not share system user name or password with another person or allow another to access the computer with his/her password.

4.5.3 All employees and contractors are required to comply with the County's information technology policies, including, but not limited to, telephone and e-mail policies. Any questions concerning information security should be directed to his or her immediate supervisor or the Compliance Officer.

5. Compliance with Regulatory Requirements Related to Provision of Health Care Services

5.1 Familiarity and compliance with regulatory requirements

- 5.1.1 The County and its employees and contractors are subject to numerous federal and state regulatory requirements relating to the provision of health care services by the County, and the submission of claims for payment for such health care services on behalf of the County.
- 5.1.2 Employees and contractors of the County are expected to be familiar with the penalties for failure to comply with such requirements.
- 5.1.3 From time to time, the County will distribute written information and/or provide in-house training sessions regarding federal and state regulatory compliance issues relating to the provision of health care services by the County, or reimbursement by government health care programs for such services.
- 5.1.4 These issues will include those that are identified as a result of internal audit and monitoring activities, or identified as potential areas of concern by the Center for Medicaid and Medicare Services ("CMS"), the Office of the Inspector General of the Department of Health and Human Services ("OIG"), the Office of Medicaid Inspector General ("OMIG") or other federal or state government agencies.
- 5.1.5 Any question regarding federal and state regulatory requirements, or information provided through written communications or in-house training, should be directed to the employee's supervisor or the Compliance Officer.
- 5.1.6 The Office of the Compliance Officer will maintain a repository of state and federal requirements. Individuals interested in researching a particular issue should contact the Compliance Officer.

5.2 Licenses, certifications, approvals, and accreditation

5.2.1 The County maintains all licenses, certifications, approvals, and accreditation necessary for the operation of each health care facility, service, or department within the County health care system.

5.2.2 In addition, the County will comply with all applicable requirements for participation in government health care programs, including Medicare and Medicaid, and private health insurance plans to which claims or requests for payment for health care services are submitted on behalf of the County.

6. Billing compliance

6.1 Guidelines for billing

6.1.1 The County only bills for medically reasonable, necessary, and/or appropriate health care items and services rendered or provided.

6.1.2 The County must comply with specific billing requirements for government programs and third party payers.

6.1.3 The County expects its employees, contractors and subcontractors to be familiar with the billing requirements under government programs and private insurance plans for all health care items and services provided by the County.

6.1.4 Any questions regarding billing requirements should be directed to the individual's immediate supervisor or departmental supervising accountant or the Department's Business Office.

6.2 Billing accuracy

6.2.1 Employees and contractors of the County have an obligation to use best efforts to ensure that all bills submitted to patients, government programs, and other payers are accurate and complete.

6.2.2 All invoices, bills, claims, records and reports submitted to patients, government programs, or other payers in connection with request for payment for health care services rendered should be clear and accurate and should provide sufficient information and documentation to substantiate:

- The particular health care services rendered, including:
 - The medical necessity of such services, and
 - The cost for such services.
- Each patient's medical record should completely and accurately document:
 - The specific health care services rendered to the patient, and
 - The identity of the health care professional(s) involved in the rendering of such services.

6.3 Statements accuracy

6.3.1 All employees and contractors of the County must exercise care in any written or oral statement made to any government agency or any third party payer.

6.3.2 The County will not tolerate false or misleading statements by employees or contractors to a government agency or any third party payer.

- 6.3.3 Deliberate misstatements to government agencies or other third party payers expose the employee or contractor involved to severe sanctions, up to, and including, termination of employment, immediate termination of contract, and civil or criminal penalties.

7. Accounting

7.1 Accounting requirements

7.1.1 No Standard of Conduct can review the extensive accounting requirements that the County must fulfill. However, in general:

- It is the obligation of the County to ensure that assets and liabilities are accounted for in compliance with all tax and financial requirements, generally accepted accounting principles, and the established accounting and financial policies of the County. To help insure that this occurs, the County endorses the recommendations of both the Federal Accounting Standards Board (FASB) and the Government Accounting Standards Board (GASB).
- The financial reporting system for the County must contain accurate entries that reflect all items of income and expense, all assets and liabilities, and all financial transactions of the County.
- To meet this obligation, the County relies on employee and contractor truthfulness and integrity in accounting practices.
- Employees and contractors of the County should never engage in any arrangement that result in false, artificial, or misleading entries being made in any accounting records.

8. Employment Environment

8.1 Compliance with employment laws

8.1.1 All human resource policies and procedures of the County must comply with the applicable federal and state laws.

8.1.2 The County will comply with all human resource policies and procedures, including those approved by the County Legislature.

8.2 Equal employment opportunities

8.2.1 The County is committed to and will provide equal employment opportunities to all persons regardless of race, color, religion, sex, national origin, age, disability, sexual preference, or veteran status.

8.2.2 It is the policy of the County to comply with all federal and state laws concerning equal employment opportunity.

8.2.3 This policy of equal opportunity is applicable to all aspects of employment including, but not limited to, hiring, promotion, transfer, compensation, benefits, training, lay off, recall, corrective actions, and suspensions.

8.3 Unlawful discrimination and harassment

- 8.3.1 The County expects everyone associated with the County to treat co-workers, residents, and patients with respect and courtesy.
- 8.3.2 The County will not tolerate discrimination or harassment based on race, color, religion, sex, national origin, age, disability, or any other protected characteristic toward its employees by other employees, vendors, suppliers, clients, or other non-employees.
- 8.3.3 A person's race, color, religion, sex, national origin, age, disability, or other protected characteristic will not be considered in making decisions about hiring, placement, assignment of duties, training, promotion, termination, compensation, benefits, and other work terms.
- 8.3.4 Sexual harassment will not be tolerated. Sexual harassment specifically includes unwelcome sexual advances, requests for sexual favors, or other verbal, graphic, or physical conduct of a sexual nature.
- 8.3.5 Employees and contractors are expected to contact an appropriate supervisor or administrator if he/she believes that they or anyone else has been discriminated against or harassed based on race, color, religion, sex, national origin, age, disability, or other protected characteristic.
- 8.3.6 The County will discipline or discharge those who violate this policy in accordance with the applicable collective bargaining agreements or applicable laws, rules or regulations, or terminate the contract of any contractors.

8.4 Reasonable accommodation

- 8.4.1 Reasonable accommodation will be made for employees and contractors suffering from a disability as long as the accommodation does not create undue hardship on the County or create a direct threat to patients, the employee, the contractor, or others.
- 8.4.2 The County Human Resources Department can arrange for confidential counseling for drug or alcohol dependence problems through the Employee Assistance Program.
- 8.4.3 The County Human Resources Department and the Employee Assistance Program can also make and coordinate referrals for medical/psychological treatment and arrangements for leaves of absence.

8.5 Drugs, narcotics, and alcohol

- 8.5.1 It is the policy of the County to maintain a workplace free from the unlawful use of controlled substances.
- 8.5.2 The County prohibits the use, sale, manufacture, dispensing, or possession of illegal drugs and narcotics by employees and contractors, and the writing of unauthorized prescriptions by professional staff members, whether on or off County property.

- 8.5.3 It is also the policy of the County that employees and contractors must not possess, consume, or be under the influence of alcoholic beverages during regular business hours or while on call.
- 8.5.4 The County will discipline or discharge employees in accordance with the applicable collective bargaining agreements or applicable laws, rules or regulations, or immediately terminate contractors who violate this policy.

8.6 Reporting

- 8.6.1 Any employee or contractor reporting to work or discovered at work in a condition that suggests that he or she is under the influence of narcotics, drugs, or alcohol will not be permitted to report to, or remain on, the job, and may be subject to corrective action, including suspension or termination.
- 8.6.2 The matter will be referred to the appropriate County Department head and/or the Employee Assistance Program for review and will be handled in accordance with current County policies and procedures regarding substance abuse.
- 8.6.3 All such reports will be logged and maintained by the County Human Resources Department

8.7 Employment of sanctioned (excluded) individuals

- 8.7.1 The County will not employ, contract with, or accept as a member of any County professional staff any individual who:
- Has been convicted of a criminal offense related to health care.
 - Is listed by a New York State or a federal or agency as debarred, excluded, or otherwise ineligible to participate in federally funded health care programs.
 - Is listed on the New York State Nurse Aide Registry as having been found guilty of patient abuse, neglect, or misappropriation of resident's property.
 - Is listed as having been found guilty on the New York State Central Registry for child abuse or maltreatment.
 -

8.8 Qualifications of health care professionals

- 8.8.1 The County, through its credentialing processes, will make appropriate efforts to verify that all physicians, nurses, and other health care professionals who provide health care services on behalf of the County are appropriately licensed and/or certified under state law to provide such services.
- 8.8.2 All physicians, nurses, and other health care professionals must satisfy the applicable requirements for providing services to beneficiaries of government health care programs, including Medicare and Medicaid.
- 8.8.3 The credentials of these professionals are checked upon hire or initiation or renewal of a contract and on a regular basis thereafter.

9. Government Investigations

9.1 Investigative requests

9.1.1 It is the policy of the County to comply with all applicable laws and to comply with all lawful and reasonable requests made in a government investigation.

9.1.2 The County expects its employees and contractors to provide truthful responses to government inquiries.

9.2 Protection of legal rights is essential

9.2.1 If any employee or contractor receives an inquiry, a subpoena, or other legal document regarding the business of the County, whether at home or in the workplace, from any governmental agency, then it is essential that the legal rights of the County and of the personnel involved be protected.

9.2.2 If an employee or contractor should receive such legal document, then he or she should notify the County Compliance Officer and the County Attorney immediately.

9.3 Investigatory interviews

9.3.1 In conducting investigations pursuant to the Compliance Plan, an assessment must be made of the potential rights or lack thereof, on the part of individual officers, employees, to representation prior to commencing an investigatory interview where such an individual could be suspected of wrongdoing.

9.4 Routine inquiry versus formal investigation

9.4.1 Sometimes, it is difficult to tell when a routine governmental inquiry, audit or review turns into a more formal investigation.

9.4.2 The County will rely on the common sense and alertness of its employees and contractors for making this important discrimination.

9.4.3 In case of any doubt, employees and contractors should consult with his or her immediate supervisor and/or the County Compliance Officer.

9.5 Reporting of compliance issues

9.5.1 If a County employee or contractor has concerns regarding any ethics or compliance issue, including any of the Standards of Conduct, policies, and/or procedures described in the Compliance Program Handbook:

- That employee or contractor should immediately contact one of the following:
 - His or her supervisor.
 - The County Compliance Officer.
 - The County Compliance Helpline: 716-375-5136.

9.5.2 Upon receiving a complaint regarding an ethics or compliance issue, a written report will be generated by the person contacted. This report will be forwarded to the Corporate Compliance Officer within 24 hours of the initial contact. If the

reporting party is not interested in having his or her name placed in this report, then the option of anonymity can be provided.

- 9.5.3 All reports regarding an ethics or compliance issue will be reviewed and investigated by the Compliance Officer.
- 9.5.4 On a periodic basis, the Corporate Compliance Committee will review all reports reviewed/investigated by the Corporate Compliance Officer.
- 9.5.5 All calls to the Compliance Helpline will be treated with confidentiality.

10. Helpline

10.1 Purpose of Helpline

10.1.1 In order to provide employees and contractors with every avenue possible through which to raise their concerns, the County has established a Compliance Helpline at 716-375-5136. This Helpline phone number is available twenty-four hours per day seven days per week and voice messages can be left when directed to do so. The County will not employ any methods to attempt to identify the caller.

10.2 When to use Helpline

10.2.1 If an employee or contractor of the County reasonably suspects or knows of violations including any of the following, then this employee or contractor must immediately contact their immediate supervisor, the Corporate Compliance Officer, or the Compliance Helpline:

- Applicable legal requirements;
- The County standards of conduct and policies and procedures contained in the Compliance Plan or Standards of Conduct;
- Any employee or contractor who acquires information that gives him or her reason to believe that another employee or contractor is engaged in or plans to engage in conduct prohibited by the Compliance Plan or Standards of Conduct;
- Any information indicating that any other person or entity associated with County plans to violate the Compliance Plan, the Standards of Conduct or any other policies and procedures;
- Anyone who is instructed, directed, or requested to engage in conduct prohibited by the Compliance Plan or Standards of Conduct;
- Any other issues about which employees or contractors believe involves questionable activity;
- Other compliance policies and procedures, which may be developed by the County from, time to time.

10.3 Confidentiality of Helpline

10.3.1 All calls received on the Compliance Helpline will be treated as confidentially as possible.

10.3.2 The County will not permit any retaliation against any employee or contractor for such reporting.

10.4 Retaliation against employees or contractors for reporting is prohibited

10.4.1 The County will not permit any retaliation against any employee or contractor for reporting compliance issues; however, abuse of the Helpline will not be tolerated.

11. Whistleblower Protection

11.1 Statutory provisions.

11.1.1 Employees or contractors reporting compliance issues may be covered/protected under various provisions in both State and Federal law. Most notably the Qui Tam provisions of the False Claims Act address these issues. The term “qui tam” means that an individual is bringing suit on behalf of the state and for himself or herself. Other Federal and state laws also incorporate so-called “whistleblower” provisions. For a listing of some of these applicable laws, please refer to the Cattaraugus County policy regarding False Claims, Whistleblowing Protection, Fraud Prevention and Detection on the County’s website at www.cattco.org.

Cattaraugus County

Policy and Procedures

Section 3

Approved: December 8, 2010
By: Act 616-2010 of the Cattaraugus County Legislature
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Compliance Officer Job Description/Primary Responsibilities

NOTE: Designating a Compliance Officer with the appropriate authority is critical to the success of the program, necessitating the appointment of a high-level official in the institution with direct access to the governing body, the County Administrator, all other senior management, and legal counsel. The Compliance Officer should have sufficient funding and staff to perform his or her responsibilities fully. Coordination and communication are the key functions of the Compliance Officer with regard to planning, implementing, and monitoring the compliance program.

Position Summary

The County Privacy, Security and Compliance Officer, created by Act 146-2013, will be the Compliance Officer appointed by the County Legislature. The Compliance Officer has primary responsibility for the development, implementation, and monitoring of the Compliance Program.

Reporting Relationship

The Compliance Officer has direct lines of communication to the County Administrator, the County Legislature, Compliance Committee, and County Attorney.

Duties and Responsibilities

The Compliance Officer's primary responsibilities should include:

- ❑ Overseeing and monitoring the implementation of the compliance program.
- ❑ Developing and implementing compliance policies and procedures (P&P).
- ❑ Updating, periodically, the Compliance Plan as changes occur within County, and/or in the law and regulations or governmental and third party payers.
- ❑ Reporting on a regular basis to the County Legislature, County Administrator, and Compliance Committee on the progress of implementation, and assisting these components in establishing methods to improve the County's quality of service and to reduce vulnerability to fraud, abuse, and waste.
- ❑ Reviewing the employees' acknowledgement that they have received, read, and understood the Standards of Conduct.
- ❑ Developing, coordinating, and participating in a multifaceted educational and training program that focuses on the elements of the compliance program and seeks to ensure that all appropriate employees, contractors, and management are knowledgeable of, and comply with, pertinent Federal and State standards.
- ❑ Using best efforts to ensure that excluded individuals and entities are not employed or retained by the County.
- ❑ Directing County internal audits established to monitor effectiveness of compliance standards.
- ❑ Independently investigating and acting on matters related to compliance, including the flexibility to design and coordinate internal investigations (e.g., responding to reports of problems or

suspected violations) and any resulting corrective action with all departments, providers, and sub-providers, agents and, if appropriate, independent contractors.

- ❑ Coordinating internal investigations and implementing corrective action.
- ❑ Developing policies and programs that encourage managers and employees to report suspected fraud and other improprieties without fear of retaliation.
- ❑ Providing guidance to management, medical/clinical program personnel, and individual departments regarding P&P and governmental laws, rules, and regulations.
- ❑ Maintaining a reporting system (hotline) and responding to concerns, complaints, and questions related to the Compliance Plan.
- ❑ Overseeing efforts to communicate awareness of the existence and contents of the Compliance Plan.
- ❑ Using best efforts to ensure that independent contractors, including, but not limited to, consumer care, vendors, billing services are aware of the requirements of the County's Compliance Plan.
- ❑ Acting as a resourceful leader regarding regulatory compliance issues. Actively seeking up-to-date material and releases regarding regulatory compliance.
- ❑ Continuing the momentum of the compliance program and the accomplishment of its objectives.

The Compliance Officer must have the authority to review all documents and other information that are relevant to compliance activities, including, but not limited to, patient records (where appropriate), billing records, and records concerning the marketing efforts of the County and the County's arrangements with other parties, including employees, professionals on staff, relevant independent contractors, suppliers, agents, supplemental staffing entities, and physicians. This policy enables the Compliance Officer to review contracts and obligations, seeking the advice of legal counsel, where appropriate that may contain referral and payment provisions that could violate statutory or regulatory requirements.

In addition, the Compliance Officer should be copied on the results of all internal audit reports and work closely with key managers to identify aberrant trends in the coding and billing areas. The Compliance Officer should ascertain patterns that require a change in policy and forward these issues to the Compliance Committee to remedy the problem. A Compliance Officer should have full authority to stop the processing of claims that he or she believes are problematic until such time as the issue in question has been resolved.

Qualifications

Education

Bachelor's degree required. Advanced degree (Masters, Law, PhD) and prior compliance experience preferred.

Experience

Minimum 5 years experience in healthcare or related field; experience working with individuals with disabilities preferred.

Experience with regulatory issues, New York Medicaid program requirements, and regulatory requirements of health care compliance.

Policy and Procedure: Compliance
Topic: Business Courtesies for Referrals

Purpose:

The Federal Anti-Kickback law prohibits the offer of payment, solicitation, or receipt of any form of remuneration for the referral of Medicare or Medicaid recipients.

The purpose of this policy is to assure that the County complies with federal Anti-Kickback laws.

For the purpose of this policy, the following definitions apply:

- Business Courtesies: Business courtesies include items of value given to another free of cost. Examples include gifts, entertainment, and/or County sponsored or hosted social events.
- Immediate Family Member: An immediate family member of a person includes:
 - The person's spouse;
 - Natural or adoptive parent, child, or sibling;
 - Stepparent, stepchild, stepbrother, or stepsister;
 - Father-in-law, mother-in-law; son-in-law; daughter-in-law; brother-in-law; or sister-in-law;
 - Grandparent or grandchild; and
 - Spouse of a grandparent or grandchild.
- Potential Referral Source: A potential referral source includes a physician, dentist, or chiropractor who could reasonably be a source of referral of patients to the County for services or treatment.

Policy:

1. It is the policy of Cattaraugus County that gifts, entertainment, and other benefits will not be provided to potential referral sources and/or to his or her immediate family.
2. These guidelines only pertain to relationships with individuals and entities outside Cattaraugus County.
- 3.
4. These guidelines do not pertain to actions between the County and its employees nor actions among Cattaraugus County employees; those actions are covered by New York State Law, the applicable collective bargaining agreements and the County Ethics Code.

Procedures:

County employees may not offer a potential referral source and his or her immediate family members business courtesies.

Policy and Procedure: Compliance
Topic: Conflict of Interest

Purpose and Policy:

Cattaraugus County has adopted an ethics code.
Conflict of Interest issues are addressed in the Cattaraugus County Ethics Code and New York State General Municipal Law Article 18.

Policy and Procedure: Compliance

Topic: Employee, Legislature, and Independent Contractor Compliance Training

Purpose:

The development and implementation of regular, effective education and training seminars is an integral part of the compliance program. Compliance education is divided into two general components. First, all employees, legislature members and independent contractors must receive an introduction to the compliance program. Second, those parties whose work is linked to identified risk areas should receive specialized compliance education pertaining to their function and responsibilities.

Policy:

1. All employees and legislature members will receive training related to the County's overall compliance program.
2. Employees in identified risk areas, and members of the Legislature, will receive more detailed education related to their function and responsibilities.
3. Attendance at training sessions is mandatory and is a condition of continued employment.
4. Independent contractors will be directed to the County's website for copies of the Compliance Plan and Standards of Conduct.

Procedures:

1. The Compliance Officer is responsible for developing the compliance education curriculum and monitoring and ensuring that compliance training and orientation meet the policy standards on this subject.
2. Compliance education seminars must include an explanation of the structure and operation of the compliance program. They will introduce the Compliance Officer to the organization.
3. Compliance education seminars, at a minimum, will include information on the following aspects of the compliance program:
 - Standards of Conduct and other related written guidance;
 - False Claims Act;
 - Whistleblower Provisions;
 - New York False Claims Act;
 - Communication channels (name of Compliance Officer, reporting mechanisms, Helpline);
 - Organizational expectations for reporting problems and concerns; and
 - Non-retaliation policy.
4. Specialized areas for education will include, but not be limited to the following:
 - Improper or fraudulent billing for services;
 - Preparation of inaccurate or incorrect cost reports;
 - Misuse of Cattaraugus County (sometimes referred to as "County" or "the County") funds;
 - Payment or receipt of remuneration or gifts in return for client referrals;
 - Government and private payor reimbursement principles; and
 - Government initiatives related to the services provided by the County.
5. Comprehensive education materials will be developed to facilitate the compliance sessions and ensure that a consistent message is delivered to all employees, and legislature members. Education

protocols and materials must be standardized, so as to evidence that everyone attending a seminar receives the same instruction.

6. As part of his or her initial orientation, each employee and legislature member shall receive a training session within the first ninety (90) days of employment or contracting. Each employee and legislature member will receive an introduction to Cattaraugus County's compliance program and objectives, and a written copy of the Standards of Conduct, Compliance Plan, and compliance policies. Each new employee and legislature member will sign an acknowledgement form (attached to this Policy) that they are aware of, and will abide by, the Compliance Program and Standards of Conduct.
7. All existing employees will receive a training session periodically that includes a review of the existing Compliance Program, the Standards of Conduct, and any applicable policies and procedures. The session will also focus on any changes in Federal or State laws and regulations.
8. All education and training relating to the Compliance Program will be verified by attendance and a signed acknowledgement of receipt of training. The individual conducting the training will take attendance at all training sessions through the use of a sign-in sheet that records the date, start and end time of the session, and the content of the material presented. The Compliance Officer will maintain a file of attendance forms for all training sessions.
9. Employees and legislature members will be provided with the opportunity to seek clarification or more information on any aspect of the compliance program. Trainers who are not able to answer specific questions will arrange for follow-up to be conducted by the Compliance Officer or member of senior management.
10. The Compliance Officer is responsible for coordinating with management to ensure that specialized compliance education occurs in identified risk areas.
11. Managers shall assist the Compliance Officer in identifying areas that require specific training and are responsible for communication of terms of the compliance plan to all independent contractors doing business with the County.
12. Cattaraugus County will use best efforts to ensure that the Compliance Officer has sufficient opportunities to receive training on compliance issues.
13. The Compliance Officer is also responsible for submitting periodic reports to the Compliance Committee and legislature members on all education seminars related to the compliance program.

Policy and Procedure: Compliance
Topic: Employee, Board, and Contractor Exclusion Screening

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) is committed to maintaining high quality care and service as well as integrity in its financial and business operations. Therefore, Cattaraugus County will conduct appropriate screening of key providers, employees, independent contractors, and business vendors to ensure that they have not been sanctioned by a Federal or State law enforcement, regulatory, or licensing agency.

Policy:

1. It is the policy of Cattaraugus County not to employ, contract with, or conduct business with an individual or entity excluded from participation in federally sponsored health care programs, such as Medicare and Medicaid.
2. Cattaraugus County will conduct exclusion (sanction) screening of all current and proposed employees and contractors.
3. Cattaraugus County will verify that individual contractors and entities that provide and/or perform services for the County have not been the subject of adverse governmental actions and/or excluded from the Federal or State healthcare programs.
4. Cattaraugus County will verify that any physician or other healthcare practitioner ordering or prescribing goods or services under a federally sponsored healthcare program, such as Medicaid, has not been excluded from participation from Federal or State healthcare programs.
5. A periodic audit of employment applications and business entities with which Cattaraugus County enters into a contractual relationship will be conducted by the Compliance Officer to verify that this policy is enforced. A report of this audit will be made to the Compliance Committee and County Legislature, along with any recommendations for remedial actions or improvement to the process as part of the periodic compliance report.

Procedures:

Applicable to Employees and Board Members:

1. Cattaraugus County will conduct exclusion checks to verify that all employees and Board members have not been excluded from Federal or State healthcare programs. An exclusion check is a search of the following sources to determine if the individual or entity’s name appears on any of the lists:
 - U. S. Department of Health and Human Services, Office of Inspector General (OIG)’s List of Excluded Individuals and Entities (LEIE) available on the website at <http://exclusions.oig.hhs.gov>
 - The General Services Administration (GSA)’s Excluded Parties List System available on the GSA website at <http://www.epls.gov/>.
 - NYS Medicaid Fraud Database available on the NYS Department of Health website at <http://www.emedny.org/info/disqualified.html>.
2. An exclusion check will be performed on all applicants for employment as part of the pre-employment screening process. If the exclusion check indicates that any individual has been

excluded from Federal or State healthcare programs, then the applicant will not be offered employment.

3. The Compliance Officer will use best efforts to ensure that exclusion screening is conducted on all employees periodically.
4. The Compliance Officer will maintain the results of all exclusion checks.
5. If any County employee is charged with a criminal offense related to healthcare, or is proposed or found to be subject to exclusion from Federal healthcare programs, the employee must be removed from direct responsibility or involvement in any federally funded healthcare program while the matter is pending. If the matter results in conviction or exclusion, Cattaraugus County will immediately terminate the employee's affiliation with the County, subject to the applicable collective bargaining agreements or applicable laws, rules or regulations.
6. In addition to exclusion screening, the credentials of medical/healthcare and other professionals employed by Cattaraugus County will be verified with appropriate licensing and disciplining authorities, including any adverse actions taken against the individuals that might impair his or her performance of duties, or fiduciary responsibilities on behalf of the County. The process is applicable to all employees for which the license/certification is required for the performance of their duties. The screening and verification will be conducted as part of the hiring process and periodically thereafter.

Applicable to Contractors/Vendors:

1. The County Administrator's Office shall conduct exclusion checks prior to entering an agreement with a contractor. If the exclusion check indicates that a contractor has been excluded from Federal or State healthcare programs, then the contract will not be executed. An exclusion check is a search of the following sources to determine if the individual or entity's name appears on any of the lists:
 - U. S. Department of Health and Human Services, Office of Inspector General (OIG)'s List of Excluded Individuals and Entities (LEIE) available on the website at <http://exclusions.oig.hhs.gov>
 - The General Services Administration (GSA)'s Excluded Parties List System available on the GSA website at <http://www.epls.gov/>.
 - NYS Medicaid Fraud Database available on the NYS Department of Health website at <http://www.emedny.org/info/disqualified.html>.
2. All contracts entered into by Cattaraugus County will contain a certification that the contractor and its employees and subcontractors are not excluded by the Federal or State government.
3. The Compliance Officer shall use best efforts to assure that an exclusion check of the contractor is conducted prior to entering a business contract with the vendor and periodically thereafter.
4. If the exclusion check indicates that a contractor has been excluded from Federal or State healthcare programs, then the contract will be terminated.
5. The Compliance Officer shall maintain the results of all exclusion checks.

Applicable to Physicians and Other Healthcare Practitioners:

1. Cattaraugus County will verify that all physicians and healthcare practitioners who order or prescribe Medicaid or Medicare funded goods or services have not been excluded from participation in a Federal or State healthcare program.
2. The Compliance Officer shall assure that an initial exclusion check is conducted on each practitioner who prescribes or orders Medicaid or Medicare funded goods or services. An exclusion check is a search of the following sources to determine if the individual or entity's name appears on any of the lists:
 - U. S. Department of Health and Human Services, Office of Inspector General (OIG)'s List of Excluded Individuals and Entities (LEIE) available on the website at <http://exclusions.oig.hhs.gov>
 - The General Services Administration (GSA)'s Excluded Parties List System available on the GSA website at <http://www.epls.gov/>.
 - NYS Medicaid Fraud Database available on the NYS Department of Health website at <http://www.emedny.org/info/disqualified.html>.
3. The Compliance Officer shall use best efforts to assure that exclusion screening is conducted on a periodic basis thereafter.
4. If the exclusion check indicates that a practitioner has been excluded from Federal or State healthcare programs, then the services or goods will not be billed to Medicaid or Medicare.
5. The Compliance Officer shall maintain the results of all exclusion checks.

Policy and Procedure: Compliance
Topic: Enforcement of Compliance Standards

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) is committed to conducting its business ethically and in conformance with all Federal and State laws, regulations, interpretations thereof, and the County’s Standards of Conduct. To support this commitment, Cattaraugus County has developed procedures for disciplinary actions to be taken for violations of the Compliance Program and/or Standards of Conduct by employees and/or independent contractors.

Policy:

1. Employees and independent contractors who, upon investigation, are found to have committed violations of applicable laws and regulations, the Compliance Program, the Standards of Conduct, or the County’s policies and procedures will be subject to appropriate disciplinary action, up to, and including, termination, in accordance with the applicable collective bargaining agreements or applicable laws, rules or regulations
2. The following actions may result in disciplinary action:
 - Authorization of, or participation in, actions that violate the law, regulations, and Compliance Program, including the Standards of Conduct, and all related policies and procedures;
 - Failure to comply with County’s policies governing the prevention, detection, or reporting of fraud and abuse;
 - Failure to report a violation by a peer or subordinate;
 - Failure to cooperate in an investigation;
 - Retaliation against an individual for reporting a possible violation or participating in an investigation; and
 - Failure to act as an honest, reliable, and trustworthy service provider.
3. Discipline will be appropriately documented in the disciplined employee’s personnel file or in the independent contractor’s file, along with a written statement of reason(s) for imposing such discipline. Such documentation will be considered during regular and promotional evaluations.
4. The Compliance Officer and Director of Human Resources will be responsible for assuring that disciplinary actions related to non-compliance with the law, regulations, and Compliance Program, including the Standards of Conduct, are consistent with actions taken in similar instances of non-compliance.

Procedures:

1. The County shall apply progressive discipline consistent with the violation. Examples of the disciplinary action that may be taken in accordance with the nature and scope of the infraction include, but are not limited to: (a) verbal counseling or warning; (b) counseling with written warning; (c) retraining; (d) reassignment or demotion; (e) suspension without pay; and (f) termination of employment (or arrangement with an independent contractor).

2. To the extent possible, disciplinary action will be taken in accordance with the applicable collective bargaining agreements or applicable laws, rules or regulations.
3. When the determination is made that a compliance violation has occurred, the Compliance Officer will notify the County Administrator and the individual's supervisor or representative for independent contractors. If appropriate, then the Compliance Officer may notify the Legislature or the Compliance Committee before the next regularly scheduled meeting when a full report of compliance-related disciplinary actions would normally be presented.
4. The Compliance Officer and Director of Human Resources shall work in collaboration with the appropriate supervisor/manager in determining disciplinary action related to an instance of non-compliance. The Compliance Officer shall have the discretion to recommend a disciplinary process other than the normal procedure.
5. The Compliance Officer and/or Director of Human Resources shall consult with the County Attorney as necessary to determine the appropriate disciplinary action to be taken.
6. The Director of Human Resources is responsible for reporting disciplinary actions taken as a result of violations of Cattaraugus County's Standards of Conduct and/or Compliance Program to the Compliance Officer.
7. The Compliance Officer will maintain a written record of disciplinary actions, including verbal warnings, and will reference these records when necessary to ensure consistency in application of disciplinary measures.
8. The Compliance Officer shall maintain a record of all disciplinary actions, including verbal warnings, related to compliance violations and report regularly to the Compliance Committee and periodically to the Legislature, regarding such actions.
9. The Compliance Officer will reference the record of disciplinary actions as necessary to ensure consistency in the application of disciplinary measures related to compliance violations.
10. All of these procedures are subject to the provisions of the applicable collective bargaining agreements or applicable laws, rules or regulations.

Policy and Procedure: Compliance

Topic: False Claims Act and Whistleblower Provisions

Purpose:

Cattaraugus County is committed to prompt, complete, and accurate billing of all services provided to individuals. Cattaraugus County and its employees, contractors, and agents shall not make or submit any false or misleading entries on any claim forms. No employee, contractor, or agent shall engage in any arrangement or participate in such arrangement at the direction of another person, including any supervisor or manager, that results in the submission of a false or misleading entry on claims forms or documentation of services that result in the submission of a false claim.

It is the policy of Cattaraugus County to detect and prevent fraud, waste, and abuse in Federal healthcare programs. This Policy explains the Federal False Claims Act (31 U.S.C. §§ 3729 – 3733), the Administrative Remedies For False Claims (31 USC Chapter 38 §§3801-3812), the New York State False Claims Act (State Finance Law §§187-194), and other New York State laws concerning false statements or claims and employee protections against retaliation. This policy also sets forth the procedures Cattaraugus County has put into place to prevent any violations of Federal or New York State laws regarding fraud or abuse in its health care programs.

This policy applies to all employees, including management, contractors, and agents.

For purpose of this policy, a contractor or agent is defined as:

- Any contractor, subcontractor, agent, or other person which or who, on behalf of the County, furnishes, or otherwise authorizes the furnishing of Medicare and/or Medicaid health care items or services, performs billing or coding functions; or
- Any contractor, subcontractor, agent, or other person who provides administrative or consultative services, goods or services that are significant and material, are directly related to health care provision, and/or are included in, or are a necessary component of, providing items or services of Medicaid-funded programs; or
- Any contractor, subcontractor, agent, or other person who is involved in the monitoring of health care provided by the County.

Overview of Relevant Laws:

The False Claims Act (31 U.S.C. §§ 3729-3733)

The False Claims Act is a Federal law designed to prevent and detect fraud, waste, and abuse in Federal healthcare programs, including Medicaid and Medicare. Under the False Claims Act, anyone who “knowingly” submits false claims to the Government is liable for damages up to three times the amount of the erroneous payment plus mandatory penalties of \$5,000 to \$10,000 for each false claim submitted.

The law was revised in 1986 to expand the definition of “knowingly” to include a person who:

- Has actual knowledge of falsity of information in the claim;
- Acts in deliberate ignorance of the truth or falsity of the information in the claim; and
- Acts in reckless disregard of the truth or falsity of the information in a claim.

False Claims suits can be brought against individuals and entities. The False Claims Act does not require proof of a specific intent to defraud the Government. Providers can be prosecuted for a wide variety of conduct that leads to the submission of a false claim.

Some examples include:

- Knowingly making false statements;
- Falsifying records;
- Submitting claims for services never performed or items never furnished;
- Double-billing for items or services;
- Using false records or statements to avoid paying the Government;
- Falsifying time records used to bill Medicaid; or
- Otherwise causing a false claim to be submitted.

Whistleblower or “Qui Tam” Provisions

In order to encourage individuals to come forward and report misconduct involving false claims, the False Claims Act contains a “Qui Tam” or whistleblower provision.

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

Employee Protections

The False Claims Act prohibits discrimination by Cattaraugus County against any employee for taking lawful actions under the False Claims Act. Any employee who is discharged, demoted, harassed, or otherwise discriminated against because of lawful acts by the employee in False Claims actions is entitled to all relief necessary to make the employee whole. Such relief may include reinstatement, double back pay, and compensation for any special damages, including litigation costs and reasonable attorney fees.

Administrative Remedies for False Claims (31 USC Chapter 38. §§3801-3812)

This Federal statute allows for administrative recoveries by Federal agencies including the U.S. Department of Health and Human Services, which operates the Medicare and Medicaid Programs. The law prohibits the submission of a claim or written statement that the person knows, or has reason to know, is false, contains false information, or omits material information. The agency receiving the claim may impose a monetary penalty of up to \$5,500 per claim and damages of twice the amount of the original claim.

Unlike the False Claims Act, a violation of this law occurs when a false claim is submitted, not when it is paid. Also unlike the False Claims Act, the determination of whether a claim is false, and imposition of fines and penalties is made by the administrative agency, and not by prosecution in the Federal court system.

New York State Laws

A. Civil and Administrative Laws

New York State False Claims Act (State Finance Law §§187-194)

The New York State False Claims Act closely tracks the Federal False Claims Act. It imposes fines on individuals and entities that file false or fraudulent claims for payment from any state or local government, including health care programs such as Medicaid. The penalty for filing a false claim is

\$6,000 - \$12,000 per claim and the recoverable damages are between two and three times the value of the amount falsely received. In addition, the false claim filer may be responsible for the government's legal fees.

The Government, or an individual citizen acting on behalf of the Government (a "Relator"), can bring actions under the New York State False Claims Act. If the suit eventually concludes with payments back to the government, the party who initiated the case can recover 15% - 30% of the proceeds, depending upon whether the government participated in the suit. The New York State False Claims Act prohibits discrimination against an employee for taking lawful actions in furtherance of an action under the Act. Any employee who is discharged, demoted, harassed, or otherwise discriminated against because of lawful acts by the employee in furtherance of an action under the False Claims Act is entitled to all relief necessary to make the employee whole.

Social Services Law §145-b False Statements.

It is a violation to knowingly obtain or attempt to obtain payment for items or services furnished under any Social Services program, including Medicaid, by use of a false statement, deliberate concealment or other fraudulent scheme or device. The State or the local Social Services district may recover three times the amount incorrectly paid. In addition, the Department of Health may impose a civil penalty of up to \$2,000 per violation. If repeat violations occur within 5 years, then a penalty up to \$7,500 per violation may be imposed if they involve more serious violations of Medicaid rules, billing for services not rendered or providing excessive services.

Social Service Law §145-c Sanctions

If any person applies for, or receives, public assistance, including Medicaid, by intentionally making a false or misleading statement, or intending to do so, the person's and the person's family needs are not taken into account for a period of six months to five years, depending upon the number of offenses.

B. Criminal Laws

Social Service Law §145 Penalties

Any person who submits false statements or deliberately conceals material information in order to receive public assistance, including Medicaid, is guilty of a misdemeanor.

Social Service Law § 366-b, Penalties for Fraudulent Practices

Any person who, with intent to defraud, presents for payment any false or fraudulent claim for furnishing services or merchandise, knowingly submits false information for the purpose of obtaining Medicaid compensation greater than that to which he/she is legally entitled to, or knowingly submits false information in order to obtain authorization to provide items or services shall be guilty of a Class A misdemeanor.

Any person who obtains or attempts to obtain, for himself or others, medical assistance by means of a false statement, concealment of material facts, impersonation, or other fraudulent means is guilty of a Class A misdemeanor.

Penal Law Article 155, Larceny

The crime of larceny applies to a person who, with intent to deprive another of property, obtains, takes or withholds the property by means of a trick, embezzlement, false pretense, false promise, including a scheme to defraud, or other similar behavior. This law has been applied to Medicaid fraud cases.

Penal Law Article 175, Written False Statements

There are four crimes in this Article that relate to filing false information or claims. Actions include falsifying business records, entering false information, omitting material information, altering a district's business records, or providing a written instrument (including a claim for payment) knowing that it contains false information. Depending upon the action and the intent, a person may be guilty of a Class A misdemeanor or a Class E felony.

Penal Law Article 176, Insurance Fraud

This Article applies to claims for insurance payment, including Medicaid or other health insurance. The six crimes in this Article involve intentionally filing a false insurance claim. Under this article, a person may be guilty of a felony for false claims in excess of \$1,000.

Penal Law Article 177, Health Care Fraud

This Article establishes the crime of Health Care Fraud. A person commits such a crime when, with the intent to defraud Medicaid (or other health plans, including non-governmental plans), he/she knowingly provides false information or omits material information for the purpose of requesting payment for a health care item or service and, as a result of the false information or omission, receives such a payment in an amount to which he/she is not entitled. Health Care Fraud is punished with fines and jail time based on the amount of payment inappropriately received due to the commission of the crime.

New York Labor Law §740

An employer may not take any retaliatory personnel action against an employee if the employee discloses information about the employer's policies, practices, or activities to a regulatory, law enforcement, or other similar agency or public official.

This law offers protection to an employee who:

- discloses, or threatens to disclose, to a supervisor or to a public body an activity, policy, or practice of the employer that is in violation of law, rule, or regulation that presents a substantial and specific danger to the public health or safety, or which constitutes health care fraud (knowingly filing, with intent to defraud, a claim for payment that intentionally has false information or omissions);
- provides information to, or testifies before, any public body conducting an investigation, hearing, or inquiry into any such violation of a law, rule, or regulation by the employer; or
- objects to, or refuses to participate in, any such activity, policy, or practice in violation of a law, rule, or regulation.

The employee's disclosure is protected under this law only if the employee first brought up the matter with a supervisor and gave the employer a reasonable opportunity to correct the alleged violation. The law allows employees who are the subject of a retaliatory action to bring a suit in state court for reinstatement to the same, or an equivalent position, any lost back wages and benefits and attorneys' fees. If the employer is a health care provider and the court finds that the employer's retaliatory action was in bad faith, then it may impose a civil penalty of \$10,000 on the employer.

New York Labor Law §741

Under this law, a health care employer may not take any retaliatory action against an employee if the employee discloses certain information about the employer's policies, practices, or activities to a regulatory, law enforcement, or other similar agency or public official. Protected disclosures are those that assert that, in good faith, the employee believes constitute improper quality of patient care.

The employee's disclosure is protected under this law only if the employee first brought up the matter with a supervisor and gave the employer a reasonable opportunity to correct the alleged violation, unless the danger is imminent to the public or patient and the employee believes in good faith that reporting to a supervisor would not result in corrective action. If the employer takes a retaliatory action against the employee, then the employee may sue in state court for reinstatement to the same, or an equivalent position, any lost back wages and benefits and attorneys' fees. If the employer is a health care provider and the court finds that the employer's retaliatory action was in bad faith, then it may impose a civil penalty of \$10,000 on the employer.

Policy:

1. Cattaraugus County will provide training/education in this policy and procedure to all its employees, contractors, and agents. This training will be provided to all new employees as part of the new employee orientation.
2. Cattaraugus County will perform billing activities in a manner consistent with the regulations and requirements of third party payors, including Medicaid and Medicare.
3. Cattaraugus County will conduct regular auditing and monitoring procedures as part of its efforts to assure compliance with applicable regulations.
4. Any employee, contractor, or agent who has any reason to believe that anyone is engaging in false billing practices or false documentation of services is expected to report the practice according to Cattaraugus County's Reporting of Compliance Concerns and Non-Retaliation Policy and Procedure.
5. Any form of retaliation against any employee who reports a perceived problem or concern in good faith is strictly prohibited.
6. Any employee who commits or condones any form of retaliation will be subject to discipline up to, and including, termination.

Procedures:

1. The Compliance Officer will use his or her best efforts to ensure that all employees and agents receive training/education related to the contents of this policy and the False Claims Act. The Compliance Officer will use his or her best efforts to ensure that records are maintained to document the receipt of training.
2. The Compliance Officer will use his or her best efforts to ensure that this policy and procedure is referenced in any contract with outside contractors or agents, is communicated to vendors as defined by this policy, and is available on the County's web page.
3. This Policy and Procedure will be distributed to County employees via the County's web page. In addition, hard copies will be provided to new employees during the orientation process and current employees in those departments providing Medicaid health care items or services for which Medicaid payments are made.

Policy and Procedure: Compliance
Topic: Internal Auditing and Monitoring

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) developed and implemented a compliance program in an effort to establish, in part, effective internal controls that promote adherence to applicable Federal and State laws and requirements. An important component of the compliance program is the use of audits and/or other evaluation techniques to monitor compliance and assist in the reduction of identified problem areas.

Cattaraugus County recognizes the need for internal controls, but also realizes that resources are limited. Therefore, this policy focuses on the County’s resources to effectively and efficiently audit and monitor risk areas.

Policy:

1. Cattaraugus County will conduct ongoing auditing and monitoring of identified risk areas related to compliance including but not limited to billing, fiscal management, clinical operations, and service provision.
2. The senior management team will ensure that ongoing auditing and monitoring is properly conducted, documented, and reported.
3. The Compliance Officer will be responsible for oversight of the County’s internal auditing system and is authorized to delegate auditing duties to other County personnel, accountants, consultants, and attorneys, as necessary and appropriate.

Procedures:

1. On a periodic basis, the Compliance Officer, in conjunction with the County Administrator, senior management, and Compliance Committee, will determine the scope and format of routine audits of Cattaraugus County’s operations. The Compliance Officer will include all scheduled audits on a work plan that is shared with the Compliance Committee and the County Legislature.
2. The Compliance Officer will recommend and facilitate auditing and monitoring of the identified risk areas related to compliance with laws and regulations, as well as County policies, procedures, and standards of conduct. Risk areas may be identified through the regular course of business, external alerts, or internal reporting channels.
3. The Compliance Officer will facilitate all audits of financial processes or systems with the County Treasurer. The audits will serve to ensure that internal controls are in place so that:
 - Generally Accepted Accounting Principles (GAAP) are followed; and
 - Federal, State, and local laws, regulations, and requirements are met.
4. The Compliance Officer will facilitate all audits of operational and programmatic issues with the County Administrator. The audits will serve to evaluate, at minimum, the following:
 - Compliance with laws, regulations, and related policies and procedures governing County’s programs and operations;
 - Fraud and abuse issues;
 - Third party billing practices;

- Service delivery and documentation practices;
 - Employment practices;
 - Conflict of Interest;
 - Contract review;
 - Employee, independent contractor, and Legislature compliance training and education; and
 - Compliance Plan and related policies.
5. The audits and reviews will examine the County's compliance with specific rules and policies through on-site visits, personnel interviews, general questionnaires submitted to employees and contractors, clinical record reviews to support claims for reimbursement, and documentation reviews. The Compliance Officer will conduct and/or oversee compliance reviews with assistance from management staff and/or quality assurance/internal audit staff with the requisite skills to carry out the audit. Whenever feasible, the Compliance Officer will seek to have audits conducted by Cattaraugus County employees who are not involved in the delivery of services subject to the audit.
 6. The Compliance Officer will determine the sample size and sample criteria prior to each audit. All review tools used will be standardized throughout the County and approved by the Compliance Officer.
 7. Each County program will conduct a review of its compliance with applicable regulations and quality measures on a periodic basis. Senior management staff shall be responsible to identify needs for internal auditing of specific issues under their oversight.
 8. A written report of audit findings will be forwarded to the Compliance Officer and applicable Department Head within seven days from the completion of the internal audit.
 9. Within thirty days of receipt of the written report of findings, the applicable Department Head will submit a written Plan of Corrective Action to the Compliance Officer for review. The Department Head is responsible to ensure that corrective measures are implemented and monitored for effectiveness.
 10. The Compliance Officer will ensure that a post-audit review is scheduled to occur within six months of the completion dates specified in the Plan of Corrective Action.
 11. The results of all internal auditing and monitoring activities, including records reviewed, audits results, and corrective actions, will be recorded and maintained by the Compliance Officer.
 12. Any correspondence from any regulatory agency charged with administering a federally or state-funded program received by any department of the County will be copied and promptly forwarded to the Compliance Officer and County Attorney for review and subsequent discussion by the Compliance Committee.
 13. Program management will immediately notify the Compliance Officer of any visits, audits, investigations, or surveys by any regulatory agency or authority. Results (oral or written) of any visits, audits, investigations, or surveys will be forwarded to the Compliance Officer promptly upon receipt by County personnel.
 14. The Compliance Officer will be responsible to report to the Compliance Committee on the general status of compliance reviews, the outcome of compliance auditing and monitoring, and the corrective actions taken. The reporting will occur at the first regularly scheduled Compliance meeting after the conclusion of the audit

15. The Compliance Officer will be responsible to report the results of auditing and monitoring activities and corrective actions periodically to the Legislature. The report will also include an assessment of any compliance risks to the County.
16. On a year-to-year basis, the Compliance Officer will benchmark audit results and compare results of similar audits to determine whether improvement is occurring.
17. On a periodic basis, the Compliance Officer will monitor the effectiveness of the Compliance Plan and will update compliance policies and procedures, as necessary, to comply with regulatory changes or industry trends. The Compliance Officer will provide a report of this review to the Compliance Committee and the Legislature.

Policy and Procedure: Compliance

Topic: Investigation and Resolution of Compliance Issues

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) implemented a Compliance Program in an effort to establish a culture within the County that promotes prevention, detection, and resolution of misconduct. This is accomplished, in part, by establishing communication channels for employees to report problems and concerns. Employees are encouraged to report issues via the traditional chain of command, Human Resources, Compliance Helpline, or directly to the Compliance Officer. Therefore, the Compliance Officer is responsible for responding to compliance issues that are raised through the various communication channels. This policy is designed to establish a framework for managing and responding to compliance issues that are raised to the Compliance Officer.

Policy:

Cattaraugus County will respond to reports or reasonable indications of suspected non-compliance by commencing a prompt and thorough investigation of the allegations to determine whether a violation has occurred.

Employees who report non-compliance related issues or concerns to the Compliance Officer or the Compliance Helpline will be politely redirected to the appropriate department or individual. In instances where the employee seeks confidentiality or reports anonymously, the Compliance Officer shall redirect the report to the appropriate department or individual while maintaining the request for confidentiality/anonymity.

Procedures:

1. The Compliance Officer will conduct or oversee the conduct of all internal investigations involving compliance-related issues and shall have the authority to engage or other consultants, as needed, subject to budgetary appropriation by the County Legislature. The Compliance Officer will consider whether the investigation should be conducted under attorney/client privilege.
2. Before conducting an investigation of any compliance-related issue, the Compliance Officer shall ensure a full understanding of the relevant laws, regulations, and government issuances.
3. Upon report or notice of alleged non-compliance, the Compliance Officer will conduct an initial inquiry into the alleged situation. The purpose of the initial inquiry is to determine whether there is sufficient evidence of possible non-compliance to warrant further investigation. The initial inquiry may include documentation review, interviews, audit, or other investigative technique. The Compliance Officer should: (a) conduct a fair impartial review of all relevant facts; (b) restrict the inquiry to those necessary to resolve the issues; and (c) conduct the inquiry with as little visibility as possible while gathering pertinent facts relating to the issue.
4. If deemed appropriate, then the Compliance Officer will recommend the cessation of internal activities that may be the cause of, or contribute to the alleged non-compliance.
5. If, during the initial inquiry, the Compliance Officer determines that there is sufficient evidence of possible noncompliance of any criminal, civil, or administrative law to warrant further investigation, the issue should be turned over to the County Attorney. A memorandum to this effect should be directed to the County Attorney with a copy to the County Administrator. The memorandum should state whether the County Attorney or the Compliance Officer will be leading the investigation. All documents produced during the investigation by the county Attorney to be possibly protected from

disclosure should include the notation: “Privileged and Confidential Document; Subject to Attorney-Client Privileges; Attorney Directed Work Product.”

6. The Compliance Officer, in consultation with the County Attorney, the County Administrator, and the Compliance Committee, will evaluate the violation to determine if a voluntary self-disclosure of the violation is appropriate. In the event voluntary disclosure is appropriate or required, then the Compliance Officer will consult with external counsel on the notification of appropriate government officials, private payors, or other entities. Notification shall be made within a reasonable time period from date of discovery and may include restitution of monies paid by the applicable Federal or State agency, payor, or other entity.
7. For investigations that do not involve the County Attorney, the Compliance Officer will determine what personnel possess the requisite skills to examine the particular issue(s) and will assemble a team of investigators, as needed. The Compliance Officer will also decide whether the County has sufficient internal resources to conduct the investigation or whether external resources are necessary.
8. The Compliance Officer shall work with the investigation team to develop a strategy for reviewing and examining the facts surrounding the possible violation. The Compliance Officer will consider the need for an audit of billing practices and determine the scope of interviews.
9. The Compliance Officer will maintain all notes of the interviews and review of documents as part of the investigation file.
10. The Compliance Officer should ensure that the following objectives are accomplished:
 - Fully debrief complainant;
 - Notify appropriate internal parties;
 - Identify cause of problem, desired outcome, affected parties, applicable guidelines, and possible regulatory or financial impact;
 - Provide a complete list of findings and recommendations;
 - Determine the necessary corrective action measures, (e.g., policy changes, operational changes, system changes, personnel changes, training/education); and
 - Document the investigation.
11. Upon receipt of the results of the investigation, depending upon the scope and severity of the identified violations, the Compliance Officer may consult with the County Attorney, the County Administrator, and/or the Compliance Committee to determine: (a) the results of the investigation and the adequacy of recommendations for corrective actions; (b) the completeness, objectivity, and adequacy of recommendations for corrective actions; and/or (c) further actions to be taken as necessary and appropriate.
12. Upon conclusion of the investigation, the Compliance Officer will organize the information in a manner that enables the County to determine if an infraction did, in fact, occur. The Compliance Officer will track the investigation, responsible parties, and due dates in a compliance log. The log will include the resolution of the investigation as closed or fully resolved.
13. The Compliance Officer will be responsible for reporting the results of all investigations to the County Administrator, Compliance Committee, and the County Legislature.

14. The Compliance Officer or Program Director will inform the reporter, if known, of the conclusion of the investigation and the outcome, if appropriate.

Policy and Procedure: Compliance
Topic: Reimbursement Practices and Billing Errors

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) is committed to accuracy and integrity in all its billing, coding, and other reimbursement operations. To reinforce this commitment, the Compliance Officer is responsible for general oversight of billing, coding, and other reimbursement operations in accordance with this policy.

Policy:

Cattaraugus County is committed to ensuring that its reimbursement practices comply with all Federal and State laws, regulations, guidelines, and policies. The County prohibits the intentional submission for reimbursement any claim that is false, fraudulent, or fictitious. Furthermore, the County is committed to ensuring against the accidental submission of any claim that is false or inaccurate.

This commitment includes a policy of ensuring accurate billing of claims for services that are actually rendered and deemed medically necessary. This policy and the following procedures were adopted to ensure that general guidance is available for all employees.

Procedures:

1. The Compliance Officer is responsible for ensuring that all reimbursement and billing procedures contained in this policy are integrated into the operations of the County.
2. All employees will receive compliance training that will reinforce the following policies:
 - Anyone who has knowledge of a problem related to reimbursement, such as submission of a claim that is false or contains false information, must report that problem to management. Employees can report directly to management or use the Helpline.
 - Failure to report a known problem related to reimbursement will subject an employee to disciplinary action.
 - Inaccurate claims submission may subject Cattaraugus County, involved employees, and other representatives to civil or criminal penalties.
 - Anyone reporting a problem or concern in good faith will be protected by the non-retaliation policy.
3. The Compliance Officer is responsible for ensuring that the Standards of Conduct provides adequate general guidance concerning appropriate reimbursement practices.
4. The Compliance Officer is responsible for making sure that the employee compliance training program includes interactive training on reimbursement practices.
5. The Compliance Officer will use best efforts to ensure that specialized training is provided to all reimbursement personnel as part of their new employee orientation.
6. All services rendered to individuals shall be documented in a proper and timely manner so that only accurate and properly documented services are billed.

7. Claims will be submitted only when appropriate documentation supports the claim and only when such documentation is maintained for audit and review. The documentation, which may include service recipients' records, shall include the identity and title or professional certification of the individual providing or ordering the service.
8. Each County program will develop and maintain written procedures for the documentation of services. Procedures will include, at a minimum, the following:
 - Attendance records;
 - Receipt and maintenance of service plans (including but not limited to Individual Education Plans and Treatment Plans);
 - Service documentation requirements specific to the respective program;
 - Definition of contemporaneous documentation;
 - Attestation and review prior to submission to billing personnel; and
 - The forms used for documentation and billing purposes.
9. The Compliance Officer must approve the billing and documentation procedures and/or any revisions to procedures or forms before implementation.
10. Each County program will conduct a periodic review of its documentation practices to verify that practices conform to the written procedures. Results of the review will be presented to the Compliance Officer by the end of the fourth quarter of the calendar year.
11. Program and reimbursement staff shall use their best efforts to communicate effectively and accurately with each other to assure compliance and avoid the potential for billing irregularities and/or errors.
12. The Compliance Officer is responsible for responding, in a timely manner, to all problems, concerns, or questions related to reimbursement practices. The Compliance Officer is also responsible for ensuring that appropriate remedial actions are taken for any irregularities uncovered.
13. If a billing error is discovered, then the billing error should be immediately reported to the County Treasurer and the Compliance Officer.
14. The billing error will be recorded by the Program Director/Manager through the completion of a Void/Adjustment Claim Form (attached to this Policy). The following information will be recorded on the Form:
 - Service Recipient's Name and Medicaid (or other payer identification number);
 - Date(s) of services and units;
 - Type of service;
 - Change requested (void, add, adjust); and
 - Reason for the change.

Completed forms will be forwarded to the applicable County Department Head for review and signature and then forwarded to the County Treasurer and County Administrator.

The County Treasurer will ensure that the adjustment is made and recorded on the Void/Adjustment Claim Form. The completed Form will be maintained in the County Treasurer's Office and a copy forwarded to the Compliance Officer for follow-up and tracking.

15. The Compliance Officer is responsible for the investigation of any billing errors or irregularities. Appropriate steps will be taken to prevent recurrence.
16. Any overpayment received as a result of such billing error will be promptly repaid to the appropriate payer, with interest, if appropriate.
17. A report of irregularities, the results of investigations and the remedial actions will be recorded on the compliance log and reported to the Compliance Committee and, on a periodic basis, to the Legislature.
18. The Compliance Officer will work with the responsible management staff overseeing the reimbursement functions to verify on a periodic basis that all reimbursement and billing manuals and materials are current and accurate.
19. The reimbursement department will conduct a periodic review of internal billing, claims processing, and reimbursement to verify that all billing activities conform to current policies and procedures of the County.
20. The Compliance Officer will conduct a periodic audit and review of the reimbursement activities to evidence that all billing staff have been trained in proper billing and coding procedures and validate that management properly verified reimbursement procedures and practices. A report on the results of this review will be made periodically to the Compliance Committee.

Policy and Procedure: Compliance
Topic: Reporting of Compliance Concerns and Non-Retaliation

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) recognizes that a critical aspect of its compliance program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to Federal and State requirements, as well as the County’s ethical and business policies.

To promote this culture, Cattaraugus County established a compliance reporting process and a strict non-retaliation policy to protect employees and others who report problems and concerns in good faith from retaliation. Any form of retaliation or retribution can undermine the compliance resolution process and result in a failure of communication channels in the County.

Policy:

1. All employees have an affirmative duty and responsibility for promptly reporting any known or suspected misconduct, including actual or potential violations of laws, regulations, policies, procedures, the County’s Compliance Plan, or the County’s Standards of Conduct.
2. An “open-door policy” will be maintained at all levels of management to encourage employees to report problems and concerns.
3. Cattaraugus County will maintain a Compliance Helpline. Employees may report their compliance concerns confidentially to the Compliance Officer through use of the Compliance Helpline.
4. Any form of retaliation against any employee who reports a perceived problem or concern in good faith is strictly prohibited.
5. Any employee who commits or condones any form of retaliation will be subject to discipline up to, and including, termination.
6. Employees cannot exempt themselves from the consequences of their own misconduct by reporting the issue, although self-reporting may be taken into account in determining the appropriate course of action.

Procedures:

Procedures that apply to all employees

1. Knowledge of misconduct, including actual or potential violations of laws, regulations, policies, procedures, or the County’s Standards of Conduct, must be immediately reported to management, Director of Human Resources, the Compliance Officer, or the Compliance Helpline.
2. Employees have the same reporting obligations for actual or suspected violations committed by the County’s vendors or subcontractors.
3. Confidentiality will be maintained to the extent that is practical and allowable by law. Employees should be aware that Cattaraugus County is legally required to report certain types of crimes or potential crimes and infractions to external governmental agencies.
4. Employees may report their compliance concerns confidentially to the Compliance Helpline and provide his or her identity. Callers should be aware, however, that it may not be possible to preserve anonymity if they identify themselves, provide other information that identifies them, the investigation reveals their identity, or if they inform others that they have called the Compliance Helpline.

5. If the caller wishes to make the report anonymously to the Compliance Helpline, then no attempt will be made to trace the source of the call or identify of the person making the call.
6. The Compliance Helpline number will be published and visibly posted in a manner consistent with employee notification in locations frequented by County employees.
7. Cattaraugus County will not impose any disciplinary or other action in retaliation against individuals who make a report or complaint in good faith regarding a practice that the individual believes may violate the County's Compliance Plan, Standards of Conduct, its Compliance Policies and Procedures, or any of the laws, rules, or regulations by which the County is governed. "Good faith" means that the individual believes that the potential violation actually occurred as he or she is actually reporting.
8. Cattaraugus County strictly prohibits its employees from engaging in any act, conduct, or behavior which results in, or is intended to result in, retaliation against any employee for reporting his or her concerns relating to a possible violation of the County's Compliance Plan, Standards of Conduct, its Compliance Policies and Procedures, or any of the laws, rules, or regulations by which the County is governed.
9. If an employee believes in good faith that he has been retaliated against for reporting a compliance complaint or concern or for participating in any investigation of such a report or complaint, then the employee should immediately report the retaliation to the Compliance Officer or the Compliance Helpline. The report should include a thorough account of the incident(s) and should include the names, dates, specific events, the names of any witnesses, and the location or name of any document that supports the alleged retaliation.
10. Knowledge of a violation or potential violation of this policy must be reported directly to the Compliance Officer or the Compliance Hotline.

Procedures that apply to management, which includes administrators, department heads, managers, and supervisors:

1. Any member of management who receives a report of a violation or suspected violation will immediately notify the Compliance Officer and complete a Compliance Issue Report Form (attached to this Policy). The completed Form will be forwarded to the Compliance Officer.
2. Management must take appropriate measures to ensure that all levels of management support this policy and encourage the reporting of problems and concerns. At a minimum, the following actions should be taken and become an ongoing aspect of the management process:
 - Meet with department staff and discuss the main points within this policy; and
 - Provide all department staff with a copy of this policy.

Procedures that apply to the Compliance Officer:

1. The Compliance Officer will ensure that all reports of violations or suspected violations are recorded on the Compliance Issue Report Form.
2. The Compliance Officer will determine the scope of the reported issue and make a determination regarding the course of action, including the investigation process and notifications to be made. Refer to Investigation of Compliance Issues Policy.

3. The Compliance Officer will be responsible for the investigation and follow-up of any reported retaliation against an employee for reporting a compliance concern or participating in the investigation of a compliance concern.
4. The Compliance Officer will report the results of an investigation into suspected retaliation to the governing entity deemed appropriate, such as the Compliance Committee or the County Legislature.

Policy and Procedure: Compliance
Topic: Response to Governmental Investigations

Purpose:

Federal and State law enforcement and regulatory agencies routinely conduct interviews to gather information during audits, inquiries, and investigations. It is important that Cattaraugus County (sometimes referred to as “County” or “the County”) responds to any official requests for information consistently and appropriately. Therefore, this policy is established to provide guidance on how to handle any unannounced visits by government representatives. This policy does not address visits by regulatory agencies to perform program certification or quality assurance functions.

Policy:

1. Cattaraugus County is committed to appropriately responding and not interfering with any lawful audit, inquiry, or investigation.
2. Employees will remain courteous and professional when dealing with investigators or agents.

Procedures:

1. Announcement of an impending visit by any government investigator or auditor should be immediately reported to the County Administrator, who is responsible to notify the Compliance Officer and the County Attorney.
2. Upon receipt of a search warrant or subpoena, contact the County Attorney’s Office.

Visits to any of Cattaraugus County’s facilities:

1. If an individual arrives at any County facility and identifies himself or herself as a government auditor, investigator, or other representative, then treat him or her with respect and courtesy. Request identification (do not attempt to photocopy credentials, as this is a violation of Federal law) and the reason for the visit.
2. Ask the individual to wait in an unused office or a location where business is not conducted.
3. Immediately contact the County Administrator/designee, who will contact the Compliance Officer and the County Attorney. The County Administrator will identify one employee to be responsible for responding to the agent’s questions.
4. Await direction from the County Attorney. Do not submit to questioning or an interview. Do not provide documents or other information.
5. Other than providing information to direct the agents to information requested, do not submit to any form of questioning or interviewing.

Visits to any location outside Cattaraugus County, such as personal residence:

Note: Employees are free to speak to government investigators or auditors; however, you are not required to submit to questioning. The following is provided as general information regarding off-site visits:

1. Individuals have the right to decline an interview or to postpone an interview until they have had an opportunity to seek legal counsel or other advice.

2. Employees who agree to be interviewed should always be truthful. If they do not know the answer to a question, then they should say so.
3. Employees should report any off-site visits by government agents, investigators, or auditors to the County Administrator. The County Administrator will notify the Compliance Officer and the County Attorney.

Policy and Procedure: Compliance

Topic: Role and Responsibilities of the Compliance Committee

Purpose:

Cattaraugus County is committed to the operation of an effective compliance program. Therefore, Cattaraugus County (sometimes referred to as “County” or “the County”) established the Compliance Committee to monitor results of the compliance functions and determine the County’s strategy for promoting compliance.

Policy:

1. The Compliance Committee consists of five members appointed to three-year terms by the Chair of the Legislature, to advise and assist the Compliance Officer with the implementation of the Compliance Plan.
2. The Compliance Committee will provide oversight of the Compliance Officer’s activities.
3. The Compliance Committee will meet on a regular and routine basis. Minutes will be recorded. The Compliance Officer will maintain the minutes of all meetings.

Procedures:

The Compliance Committee shall be responsible for the following:

1. Analyze the regulatory environment where the County does business, including legal requirements with which it must comply;
2. Review and assess existing policies and procedures that address risk areas for possible incorporation into the Compliance Plan;
3. Work with departments to develop standards and policies and procedures that address specific risk areas and to encourage compliance according to legal and ethical requirements;
4. Develop internal systems and controls to carry out compliance standards and policies and procedures;
5. Monitor internal and external audits to identify potential non-compliant issues;
6. Implement corrective and preventative action plans and follow-up to determine effectiveness; and
7. Develop a process to solicit, evaluate, and respond to complaints and problems.

Policy and Procedure: Compliance

Topic: Search Warrants

Purpose:

A search warrant permits agents to immediately seize documents and other types of information. The execution of a search warrant can be seriously disruptive and frightening for many employees. Furthermore, if not handled properly, an organization subject to a search warrant may compound its problems. Therefore, Cattaraugus County (sometimes referred to as “County” or “the County”) has established this policy to advise all employees how to appropriately respond to an official search warrant.

Policy:

1. Employees will remain courteous and professional when dealing with agents executing a search warrant.
2. Employees will not interfere with the lawful execution of a search warrant.
3. The senior staff member present is responsible for contacting the County Attorney who will contact the Compliance Officer and carry out the response procedures.

Procedure:

1. Obtain and record the name of the lead agent and the agency they represent. *Do not attempt to photocopy the credentials of an agent – it is a violation of Federal law.*
2. Request to view and photocopy the search warrant document.
3. Immediately contact the County Attorney and provide him/her with details of the search warrant. The County Attorney will contact the Compliance Officer and provide details of the search warrant. The County Attorney will identify one employee to be responsible for responding to the agent’s questions.
4. Request an “inventory list” of the documents and items seized by the agents. Ensure that it is detailed enough to properly identify the documents and items taken by the agents. Maintain a separate record of the areas searched, listing the documents/items seized from the area.
5. Other than providing information to direct the agents to information requested, do not submit to any form of questioning or interviewing.
6. Always remain present while the agents are conducting the search.

Senior Management Responsibilities

The County Attorney will carefully examine the search warrant to:

- Determine the specific areas or locations it covers;
- Determine that it is being executed during the hours indicated on the document (most warrants should limit the hours they can be executed, e.g., “daylight hours”);
- Determine that it has not expired (all warrants should have an expiration date); and
- Determine that it is signed by a Judge (all warrants should be signed by a Judge).

Politely object if there is any overt flaw in the search warrant (as described above) or if the agents are searching anything deemed to be outside the scope of the warrant. Do not interfere should agents proceed and search. Note the fact for legal counsel to support a future protest.

Policy and Procedure: Compliance

Topic: Subpoenas

Purpose:

A subpoena is an official demand for testimony or the disclosure of documents or other information. They may originate from law enforcement or administrative agencies. Every subpoena requires a careful legal review prior to response. In view of this and the serious legal implications of the receipt of a subpoena, Cattaraugus County (sometimes referred to as “County” or “the County”) has established standing policies and procedures to ensure that legal counsel reviews any subpoena immediately and coordinates the County’s response.

Policy:

This policy refers only to subpoenas related to Cattaraugus County business matters.

The County is committed to full compliance with any lawful subpoena. Employees will remain courteous and professional when dealing with investigators or agents delivering a subpoena. No one is to impede in any way efforts to deliver a subpoena.

Procedures:

1. If a subpoena related to County business is received, either in person or via the mail, then it must be delivered immediately to the County Attorney.
2. If delivered in person, then the senior staff on duty must be provided with any information obtained during the service of the subpoena (e.g., the name, title, and telephone number of the serving agent/investigator, information provided by the agent/investigator).
3. Provide the agent/investigator with direction or information so they may deliver the subpoena to the appropriate or requested individual. Do not volunteer information to an agent/investigator or submit to any form of questioning or interviewing.
4. The County Attorney shall be immediately notified of the receipt or delivery of a subpoena. The County Attorney will promptly notify the Compliance Officer and determine who is most qualified and available to assist in responding to the subpoena.
5. Await direction from the County Attorney.

Policy and Procedure: Compliance

Topic: Standards of Conduct

Purpose:

Cattaraugus County (sometimes referred to as “County” or “the County”) is committed to conducting its business ethically and in conformance with all Federal and State laws, regulations, interpretations thereof, and the Standards of Conduct. To support this commitment, Cattaraugus County will maintain and update as appropriate written Standards of Conduct to provide guidance on employee and organizational responsibilities related to compliance. The Standards of Conduct addresses specific issues related to reimbursement, financial relationships, quality of care, and other critical areas.

Policy:

1. Cattaraugus County will develop, maintain, and update as appropriate written Standards of Conduct to provide employees, independent contractors, and legislature members, with guidance on requirements for conduct related to employment or engagement by Cattaraugus County.
2. The Standards of Conduct will describe important parts of the compliance program including, but not limited to, the problem resolution process, Compliance Helpline, and non-retaliation policy.
3. All employees, and legislature members, will be provided a copy of the Standards of Conduct and participate in training sessions that include a thorough review of the document. Independent contractors will be referred to the County website to review the County’s Standards of Conduct and Compliance Plan.

Procedures:

1. The Compliance Officer is responsible for the development and periodic update of Cattaraugus County’s Standards of Conduct.
2. The County Compliance Committee and the Legislature will be responsible for oversight and final approval of the Standards of Conduct.
3. The Standards of Conduct will be written at a basic reading level, avoiding complex language and legal terminology. At a minimum, it should address critical areas such as compliance with laws and regulations, human resource practices, quality of care/service, conflicts of interest, proprietary rights, confidentiality, safety, and reimbursement practices.
4. The Standards of Conduct will address specific areas of potential fraud or similar wrongdoing, including, but not limited to, claims development, submission processes, and diagnostic/procedural code selections.
5. The Standards of Conduct will address major issues identified by the Federal Sentencing Guidelines and the Office of Inspector General (OIG).
6. The Standards of Conduct will address human resources related compliance issues such as sexual harassment and discrimination, as well as Cattaraugus County’s commitment to quality of care and service.
7. Cattaraugus County’s Compliance Plan, applicable policies, and the Standards of Conduct will be provided to all Legislature members, executive personnel, managers, and employees. Copies will be provided to all new employees as part of the new employee orientation. All recipients of the document will sign and date a receipt (form attached to this Policy) that acknowledges: (a) receiving a

copy of the Compliance Plan and Standards of Conduct, (b) reading and understanding the contents, and (c) agreeing to abide by the provisions of the documents.

8. The Compliance Officer will use best efforts to ensure that all employees and agents receive training related to the contents of the Standards of Conduct to help them understand how it applies to everyday work situations. The Compliance Officer will ensure that records are maintained to document the receipt of training.
9. The Compliance Officer will use best efforts to ensure that each Legislature member is provided with a copy of the Compliance Plan and the Standards of Conduct at the time of legislative orientation and upon re-election to his/her legislature seat.
10. The Compliance Officer will use best efforts to ensure that all independent contractors are directed to the County's website for a copy of the Compliance Plan and Standards of Conduct upon entering into a contractual agreement with Cattaraugus County.
11. The Compliance Officer will include in his or her report to the Corporate Compliance Committee and Legislature the status of training, along with any recommendations for updating or improving the contents of the Standards of Conduct.
12. The Compliance Officer is responsible for investigations of possible violations of the Standards of Conduct and assuring disciplinary action has been taken when necessary.
13. Written confidentiality and non-retaliation policies will be referenced and included as part of the Standards of Conduct for the purpose of encouraging communication and the reporting of incidents of suspected fraud or other wrongdoing.
14. The Standards of Conduct will include instructions to report fraud, abuse, suspected violations of the Standards of Conduct, or other suspected wrongdoing directly to the Compliance Officer or other supervisory personnel.
15. The Standards of Conduct will provide written guidance on how employees and agents may report suspected violations of Federal or State law, regulations, interpretations thereof, or the Standards of Conduct without fear of retribution or retaliation to an organization hotline or other mechanism.
16. The Standards of Conduct will include a description of disciplinary mechanisms utilized by the County and the procedures for addressing disciplinary actions.

CATTARAUGUS COUNTY

Compliance Training - Attendance

Date of Training: _____
Time of Training: Start: _____ End: _____
Location: _____
Instructor: _____

Contents

- Cattaraugus County's Corporate Compliance Plan
- Standards of Conduct
- Federal and State Regulatory Enforcement Agencies and Their Functions
- Regulatory History
- False Claims Act
- NY False Claims Act
- Whistleblower Provisions and Non-retaliation Policy
- Expectations for Reporting Problems and Concerns
- Communication Channels (including name of Compliance Officer and methods to report)
- Questions and Answers

Attendance

Note: Each employee must also sign an acknowledgement of attendance.

Print Name	Title	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CATTARAUGUS COUNTY

Acknowledgement Form - Compliance Training

Date of Training: _____

Time of Training: _____

Location: _____

Instructor: _____

Contents

- Cattaraugus County's Compliance Plan
 - Standards of Conduct
 - Federal and State Regulatory Enforcement Agencies and Their Functions
 - Regulatory History
 - False Claims Act
 - NY False Claims Act
 - Whistleblower Provisions and Non-retaliation Policy
 - Expectations for Reporting Problems and Concerns
 - Communication Channels (including name of Compliance Officer and methods to report)
- I acknowledge that I have attended Compliance training on this date. I have been provided with the opportunity to ask any questions that I may have.
 - I acknowledge that I have received and read a copy of the Compliance Plan and the Standards of Conduct.
 - I understand that I must comply with the Compliance Plan, the Standards of Conduct, all laws, regulations, policies and procedures, and guidance provided.
 - I understand that I must report any instances of possible violations of the Compliance Plan, the Standards of Conduct, laws, regulations, and policies and procedures to a member of management or the Compliance Officer.
 - I understand that Cattaraugus County maintains a hotline for confidential or anonymous reporting of possible violations of the Compliance Plan, the Standards of Conduct, laws, regulations, and policies and procedures.
 - I understand that my failure to comply with the Compliance Plan, the Standards of Conduct, laws, regulations, and policies and procedures or to report possible violations may result in disciplinary action, up to, and including, termination.

Print Name _____

Title _____

Signature _____

Date _____

CATTARAUGUS COUNTY
Acknowledgement Form –
Compliance Plan and Code of Conduct

- I acknowledge that I have received, read, and that I understand Cattaraugus County’s Compliance Plan and Standards of Conduct.
- I understand that I must comply with Cattaraugus County’s Compliance Plan, the Standards of Conduct, and all laws, regulations, policies, procedures, and other guidance applicable to the responsibilities of my position.
- I understand that my failure to report any concerns regarding possible violations of the law, regulations, Compliance Plan or the Standards of Conduct may result in disciplinary action, up to and including termination of employment or engagement with Cattaraugus County.

By placing a checkmark in the boxes above I acknowledge that I have read and understand each statement.

Signature _____

Print Name _____

Title _____

Date _____

VOID CLAIM FORM

The following claim(s) need to be voided or adjusted:

Program: _____
Service Recipient: _____
Date(s) of Service: _____
Units (#, half/full, etc.): _____

REASON (check one and explain):

- Clerical Error or Billing Log _____
- Keying Error in Bus. Office _____
- Documentation does not support claim (details below):

How was the error discovered? _____

Submitted by: _____	Date: _____
Compliance Officer Notified? By: _____	Date: _____
Program Administrator: _____	Date: _____
County Treasurer: _____	Date: _____
County Administrator Notified? By: _____	Date: _____

Business Office Use – Please attach copies of backup and return to Director of Finance (or other title) once void is complete.

\$\$\$ Amount: \$ _____	
Date Voided: _____	Date \$\$\$ Recouped: _____
Invoice # _____	Receipt #: _____
Accounting Manager. (<i>or other title</i>) Signature _____	Date: _____

Reviewed by:

County Treasurer: _____	Date: _____
Compliance Officer _____	Date: _____