



2023  
CORPORATE COMPLIANCE PLAN  
AND  
STANDARDS OF CONDUCT

# **CORPORATE COMPLIANCE PLAN**

In order to maintain the high quality of our services, Select Human Services, a Division of New Hope Community, Inc. (hereafter known as Select Human Services) has created this Corporate Compliance Plan. This will allow Select Human Services to maintain its ongoing commitment to professional integrity and ethics in our relations with individuals, families, contractors, vendors, employees, and volunteers.

## **WHAT IS CORPORATE COMPLIANCE?**

Corporate Compliance is a set of business practices and principles which allow Select Human Services, a Division of New Hope Community, Inc. (hereafter known as Select Human Services) to be in legal conformance with Federal Government guidelines for Medicaid and OPWDD reimbursement of programs and services. It is these practices and principles that make up the Corporate Compliance Plan.

Corporate Compliance is defined as a long-term commitment by an agency to conduct business in a manner that promotes compliance with laws, regulations, and agency-specific standards and that continually monitors itself for compliance. Additionally, it has created systems to allow the agency to respond to changes in the regulatory environment.

Select Human Services will use our best efforts to create a culture where we all operate under the best possible ethical and legal standards. Our Standards of Conduct will guide our policies and procedures to work towards identifying and addressing areas that represent risk.

In an effort to reduce the possibility of unethical, illegal or criminal conduct, Select Human Services, has established policies and procedures encompassing fiscal management, program operations, human resources and compliance. The Compliance Plan and Standards of Conduct will outline these policies and procedures. It is the expectation of Select Human Services that employees and board members will adhere to these standards.

## **STANDARDS OF CONDUCT**

The Standards of Conduct is meant to guide our employees and board members in carrying out their day-to-day responsibilities with regard to legal and ethical standards.

The Standards of Conduct provides a common set of values that will guide us to ensure we are operating legally and ethically, while continuing to provide supports/services that are compassionate and appropriate.

Select Human Services requires every employee and board member to sign a written acknowledgement that he/she/they understand and will follow our Standards of Conduct.

## **POLICIES AND PROCEDURES**

Select Human Services will continually develop policies and procedures (in addition to those already in place) to implement the Corporate Compliance Plan. This will provide the framework by which we will operate in conformance with all applicable laws and regulations. This agency will review, revise, and develop new procedures as necessary to ensure that our operations are conducted with “best practices”. The policies and procedures set forth by OPWDD and those related to human resources and financial operations shall apply broadly to every employee through this Corporate Compliance Plan. Policies and procedures have been established to outline compliance standards and practices, including documentation and billing of supports and services.

## **COMPLIANCE PROGRAM STRUCTURE AND OVERSIGHT RESPONSIBILITIES**

Paul Leib, Corporate Compliance Coordinator has been assigned compliance oversight responsibilities and is responsible for the day-to-day compliance oversight and is empowered to implement the Corporate Compliance Plan, investigate, and report compliance concerns to the Vice President, Compliance Committee, and the New Hope Corporate Compliance Department.

It is incumbent on all individuals to take an active role in identifying and resolving all compliance concerns. This will be viewed as an ongoing process which will be reviewed regularly and refined as needed. Employees of Select Human Services will be knowledgeable about the content and operation of the agency’s Corporate Compliance Plan and will exercise oversight with respect to the implementation and effectiveness of the Corporate Compliance Plan.

## **DUE CARE AND ASSIGNMENT OF RESPONSIBILITIES – BACKGROUND CHECKS**

Select Human Services will use due diligence to avoid hiring or delegating substantial authority to any individual with a propensity to engage in illegal activities. The agency employs every effort to hire individuals who share the same respect for legal and ethical mores and who can contribute to the culture of integrity and caring that has been our reputation throughout the years.

Select Human Services conducts Medicaid Exclusion Screening of all current and proposed employees. Exclusion checks are completed through the Office of Medicaid Inspector General List of Excluded Individuals/Entities.

Select Human Services performs additional background checks including: SEL, CBC, SCR, and MHL 16.34, in addition to both personal and professional reference checks.

## **EDUCATION AND TRAINING**

All employees are trained and kept informed about regulatory requirements and agency policies and procedures. The agency continuously identifies training topics, including those arising as a result of self-monitoring, audits by regulatory agencies, and regulatory developments.

New employees receive training by Select Human Services on its Standards of Conduct, Corporate Compliance Plan, and those policies and procedures relevant to their job responsibilities as part of SHS orientation. Additional training, tailored to the roles and responsibilities of each group of individuals and in a manner that an individual can understand, is provided on a departmental basis.

## **MONITORING AND REPORTING**

### *Monitoring*

Select Human Services is committed to monitoring individual's files/service documentation for regulatory compliance. The agency's QA/QI Coordinator is responsible for auditing these files on a regular basis and reports findings to the appropriate Directors/Managers for resolution as deemed necessary. We believe that a combination of various compliance reviews will permit us to maintain a consistent conformity to relevant laws and regulations, while fulfilling a commitment to identify and share best practices.

### *Reporting Compliance Concerns, Whistle Blower, Anti-Retaliation Policy*

Select Human Services will not intimidate or retaliate against individuals who file reports of perceived illegal and/or dishonest activities, including but not limited to, misrepresentation of services; inappropriate billing/payment activities; illegal actions/activities; misappropriation of funds, supplies or assets; and/or violations of the Agency's Corporate Compliance Plan.

Every employee has a responsibility to report any activity that appears to violate applicable laws, rules, regulations, or the Corporate Compliance Plan. Select Human Services encourages a culture in which all employees feel free to report behaviors or actions which they believe should be reported. The effectiveness of our Corporate

Compliance Plan depends on the willingness and commitment of our employees at all levels of the agency to step forward with questions and concerns.

Employees should feel free to report behaviors or actions they believe should be reported to their immediate supervisor. Employees can also contact the Corporate Compliance Coordinator directly at 914-741-6300 (Ext. 149), phone in an anonymous report to 914-741-6300 ext.150 or place a written notice (may be anonymous) in the secure corporate compliance mailbox on the wall outside the 1<sup>st</sup> Floor Conference Room.

## **DISCIPLINARY ACTION**

Failure to comply with the Corporate Compliance Plan, the Standards of Conduct and/or laws and regulations applicable to Select Human Services may result in disciplinary action. Retraining staff will occur if misconduct is based on a lack of awareness or understanding of a regulatory obligation, policy, or procedure. Resolution of disciplinary issues will be determined through the Corporate Compliance Plan structure with the appropriate manager, QA/QI Coordinator or Vice President. The degree of discipline may range from counseling, verbal warnings, written warnings, recommended change or discontinuation of privileges, termination of a contract/employment, or removal from a particular position or function. The agency will make every effort to be consistent in its approach to discipline with the same disciplinary action for similar offenses.

## **DETECTION AND CORRECTION**

Select Human Services is committed to fostering our culture of compliance through detecting, correcting, and preventing non-compliance behaviors. Through the process of our corporate compliance reporting structure and the articulation of compliance-related roles and responsibilities at every level of the agency, detection, and correction of problems is expedited. If an internal investigation substantiates a reported violation, then it is our policy to engage in a two-fold process:

- 1) to initiate corrective action, including, as appropriate, making prompt restitution of any overpayment amounts, notifying the appropriate governmental agency, instituting whatever disciplinary action is necessary
- 2) implementing systematic changes to prevent a similar violation from recurring in the future

# SELECT HUMAN SERVICES STANDARDS OF CONDUCT

## MISSION STATEMENT

“We challenge ourselves to enhance the lives of people with intellectual and other developmental disabilities.”

## VISION

To provide person-centered care, optimize valued outcomes, and facilitate community inclusion that fuels roles of social value and advances meaningful life experiences.

## CORE VALUES

We believe that...

- All individuals should be treated with dignity and respect
- Services are best provided in a personalized manner designed around the individual's needs and desires
- Working together, in partnership with the community at large, creates the best opportunities for people with developmental disabilities
- Our success is dependent upon having a qualified, caring, and trained staff
- We must be diverse and culturally sensitive
- We must be flexible and seek out opportunities for advancement and growth
- Sound, ethical business practices ensure financial stability and future agency success
- The drive for excellence and continuous quality improvement is part of all we do

## COMMITMENT TO STAKEHOLDERS

*To the individuals we serve:* We are committed to providing the highest quality of person-centered care, in a caring and compassionate manner; conscious of the uniqueness of each individual's needs.

*To the families and communities we serve:* We are committed to understanding the unique needs of the individuals we serve and to providing our quality services in a person-centered, holistic, professional, compassionate, and inclusive manner.

*To our employees:* We are committed to a work setting which is safe, which treats all employees with fairness, dignity, and respect and which affords all employees an opportunity to grow, develop professionally, and to work in a team environment where all ideas are considered and efforts supported.

*To our third party payors:* We are committed to working with our payors in a way that demonstrates our commitment to our contractual obligations and reflects our shared concerns for quality services in an efficient and effective manner. We encourage our payors to adopt their own set of ethical principles that recognize their obligations to the individuals we serve, as well as the need for fairness between providers and payors.

*To our regulators:* We are committed to creating an environment in which compliance with applicable rules, laws and regulations is woven into the fabric of Select Human Services. We accept responsibility to self-govern and monitor adherence to requirements of law and our Standards of Conduct.

*To our suppliers:* We are committed to fair competition among existing and prospective suppliers. We encourage our suppliers to adopt their own set of standards and ethical practices.

## **RULES OF CONDUCT**

We believe that certain rules of conduct must be observed to promote a positive and ethical work environment and pledge to abide by the laws, regulations and Select Human Services policies and procedures, including, but not limited to those related to the Corporate Compliance Plan.

We also understand that, as individuals working for and on behalf of Select Human Services, we have the added responsibility of following specific rules of conduct, as described below:

- To place the interests of the individuals we support and their family members first and foremost in all aspects of what we do
- To treat confidential information related to the agency and those it supports and to respect the privacy of those served and employees
- To work cooperatively and respectfully with all employees and third-parties to provide the highest quality of services
- To conduct all activities in a fiscally responsible manner
- To seek training and assistance in areas that would strengthen the ability to fulfill responsibilities to the individuals supported and Select Human Services
- To work in accordance with applicable laws, regulations, and agency policies
- To conserve agency resources by not engaging in wasteful behavior
- To consult with senior leadership when questions arise as to conduct permitted under applicable laws, regulations, and policies, including the Corporate Compliance Plan
- To respect the role of management and to fully implement their decisions
- To represent Select Human Services positively in the community

- To avoid conflicts of interest, including the acceptance and giving of gifts – any unsolicited gifts of more than \$50.00 should be directed to the Accounting Department
- To bill individuals and third-party payors accurately
- To not submit any false, fraudulent, inaccurate, or fictitious claims for payment or reimbursement – to not bill for goods or services that were never delivered or rendered
- To not make any false entries in any of the agency's records or in any public record
- To maintain an accurate clock in/clock out punch detail – to only clock in immediately prior to the start of services and to clock out immediately after services have concluded
- To correct entries in the correct manner – errors should be crossed out with a single line, initialed and dated (if applicable)
- To not create or participate in the creation of any records that are intended to mislead or to conceal anything that is improper
- To document only the supports/services provided to individuals and their families
- To complete documentation contemporaneously with the provision of services
- To complete documentation of plan implementation in accordance with program identified guidelines and parameters
- To implement plans according to identified frequency
- To ensure documentation includes all required elements, and is completed legibly in permanent black/blue ink (if applicable) and
- To report overpayment to the Government

*Note:* This above list is not intended to be all inclusive

## **BACKGROUND**

### **WHAT IS THE DEFICIT REDUCTION ACT OF 2006?**

The Deficit Reduction Act of 2006 are mandated requirements which are adopted by Medicaid service providers, such as Select Human Services. The purpose of this act is to strengthen the protection against fraud and abuse in the Medicaid program. The basis of this act is the False Claims Act.

### **THE FALSE CLAIMS ACT**

This act (31 U.S.C. § 3729 *et seq*) is designed to discourage fraud and allow for whistleblower protection (*qui tam*) to those who report known or suspected cases of fraud to the Department of Justice. This law applies to any federally funded contract or program with the exception of tax fraud. At Select Human Services, these provisions will apply to employees of the agency, contractors, or agents that have a business relationship with Select Human Services.



The False Claims Act imposes liability on any person who:

1. Knowingly presents or causes to be presented a false or fraudulent claim, payment, or approval
2. Knowingly makes, uses, or causes to be used a false record or statement to get a claim paid or approved by the Government
3. Conspires to defraud the Government by getting a false or fraudulent claim allowed or paid
4. Has possession, custody, or control of property or money used, or to be used, to defraud the Government, or willfully to conceal the property, delivers or causes to be delivered, less property than the amount for the person receives a certificate or receipt
5. Authorize to make or deliver a document certifying receipt of property used, or to be used, by Government and, intending to defraud the Government, makes or delivers the receipt without completely knowing that the information on the receipt is true
6. Knowingly buys, or receives as a pledge of an obligation or debt, public property from any officer or employee of the Government, or a member of the Armed Forces, who lawfully may not sell or pledge the property
7. Knowingly makes, uses, or causes to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the Government

#### **HOW IS “KNOWINGLY” DEFINED?**

For the purposes of this procedure, “knowing or knowingly” are defined as the following:

- Has actual knowledge of the information
- Acts in deliberate ignorance of the truth or falsity of information, or
- Acts in reckless disregard of the truth or falsity of the information, and no proof of specific intent to defraud is required

#### **HOW IS A CLAIM DEFINED?**

A claim refers to any request or demand, whether under contract or otherwise, for money or property, which is made to a contractor, grantee, or other recipient if the federal government provides any portion of the money or property which is requested, demanded, or if the government will reimburse such.

## **REASONS TO “HOLD” OR “VOID” A BILL**

- Level of Care Eligibility Determination (LCED) redetermination has not taken place within the required 365<sup>th</sup> day of previous year’s LCED date
- No documentation of service, including a Monthly Summary
- Daily documentation does not match the Staff Action Plan
- Evidence of fraudulent time keeping
- Evidence of double billing
- Life Plan is not current, incomplete or in error

## **HOW IS “CURRENT” DEFINED?**

A Life Plan is current if it has been reviewed by the close of the 6<sup>th</sup> month following the previous review (unless special circumstances are noted). It must identify the agency as the provider of the identified service. It must be signed by the Care Coordinator/Care Coordinator Supervisor.

## **HOW ARE “FRAUD” AND “ABUSE” DEFINED?**

### *Fraud*

An intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person.

Common examples of fraud: Falsifying a mileage statement, falsifying a timesheet, documenting that a service was provided when it did not take place, falsifying a Business Expense report.

### *Abuse*

Provider practices that are inconsistent with sound fiscal, business, or medical practices and result in an unnecessary cost to the Medicaid Program, or in reimbursement for services that are not medically necessary or that fail to meet professional recognized standards for healthcare.

Common examples of abuse: providing more service than is authorized, insufficient documentation of the service delivery, providing an unauthorized service, or providing far less quality than is agreed upon or required by regulations.

## **WHAT IS MISCONDUCT?**

Any act or omission by an employee, including the failure to report known non-compliance, which could cause financial liability or citations specific to any/all program services being provided by Select Human Services.

## **COURSE OF ACTION**

When an event has been reported, the Corporate Compliance Coordinator makes an initial inquiry and determines if a full investigation is necessary. If necessary, an investigator is assigned, and an investigation as indicated takes place with results being reported to no less than the Vice President and the New Hope Corporate Compliance Department.

## **DISCIPLINARY ACTION**

Any employee found to have committed abuse or fraud may be subject to disciplinary action up to termination. Legal action may also be considered.

***Any questions about Compliance or to report  
a Compliance or Ethical Concern, contact:***

***Paul Leib, Quality Improvement/Corporate Compliance Coordinator  
#914-741-6300, x149***

***OR***

***SHS Compliance Hotline @ #914-741-6300 ext. 150***

***OR***

***Secure Corporate Compliance Mailbox outside the 1<sup>st</sup> Floor Conference Room***