
Category: **CORPORATE COMPLIANCE**
Title: **COMPLIANCE PROGRAM / CODE OF ETHICS**

Prior Approval Date: 08/22/18
Current Approval Date: 04/27/22

Proposed by:  04/27/2022
Chief Executive Officer Date

Approved by: Albert L. Lorenzo 04/27/2022
County Executive Office Date

I. ABSTRACT

This policy establishes the standards of Macomb County Community Mental Health (MCCMH), an official agency of the County of Macomb, regarding its Corporate Compliance Program.

II. APPLICATION

This policy shall apply to all MCCMH and contracted network provider workforce members, including but not limited to employees, independent contractors, and volunteers.

III. POLICY

It is the policy of MCCMH to have an effective Corporate Compliance Program and Board Code of Ethics to prevent, detect, and correct noncompliance with Federal and State laws, rules, regulations, and contracts governing public mental health and substance use providers that furnish specialized services and supports.

IV. DEFINITIONS

MCCMH uses the definitions specified in 42 C.F.R. 438.2 for Managed Care Organization (MCO), Managed Care Entity (MCE), and Pre-Paid Inpatient Health Plan (PIHP).

V. STANDARDS

A. The MCCMH Board Code of Ethics is a key element of the MCCMH Corporate Compliance Program. It lists the activities which workforce members including employees/individual contractors may and may not engage in while employed by or under contract with MCCMH.

- B. The MCCMH Board Code of Ethics disseminates a positive, law-abiding corporate value, creating an atmosphere that discourages wrongdoing; and prevents events of fraud, abuse, and waste in the provision of behavioral health care and substance use treatment.
- C. MCCMH Administrative and Directly Operated Workforce Members

MCCMH's Compliance Officer shall ensure:

1. New workforce members, receive the written MCCMH Corporate Compliance Program and the Board Code of Ethics during the hiring/contracting process and acknowledge receipt in writing.
2. All new and current workforce members agree, in writing, to the Board Code of Ethics as a condition of employment/contract.
3. All new workforce members must complete an initial training about the MCCMH Corporate Compliance Program, Health Insurance Portability and Accountability Act (HIPAA) Compliance, and the Board Code of Ethics within ninety (90) days of hire.
4. All current workforce members annually complete an online refresher training within the learning management system to review the MCCMH Corporate Compliance Program, HIPAA Compliance, and the Board Code of Ethics.
5. Current workforce members complete the initial new hire Corporate Compliance training when completion of the annual refresher does not occur within the required time frame.
6. The MCCMH Training Department documents all training attendance.
7. MCCMH workforce members complete the Medicare Learning Network web-based training (WBT) course designed to provide education on fraud, waste, and abuse in the Medicare Parts C and D program and general compliance concepts. The two-part training can be used to satisfy general compliance training requirements and fulfill the annual fraud, waste, and abuse training requirement for Medicare Parts C and D organizations.
 - a. New workforce members must complete the training within ninety (90) days of hire and current workforce members must complete the training on annual basis.
 - b. Evidence of the training will be documented in a format designated by the MCCMH Training Department.
8. The contact information for reporting fraud, waste, or abuse to MCCMH and/or the Michigan Department of Health and Human Services (MDHHS) – Office of Inspector General (OIG) is disseminated to all workforce members on an annual basis, along with information indicating that such reporting may be done anonymously.

9. The MCCMH Administrative Office shall keep on file a copy of each new and current MCCMH workforce member's Prospective Employee/Contractor Corporate Compliance Program and Code of Ethics Acknowledgement Form (Exhibit C) or Employee/Contractor Corporate Compliance Program and Code of Ethics Acknowledgement Form (Exhibit D).

D. Contracted Organizational Network Provider Workforce Members

1. Contracted Organizational Network Providers shall have a copy of the MCCMH Corporate Compliance Program.
2. Contracted Organizational Network Providers shall develop their own Corporate Compliance Policy and effective Compliance Program consistent with the OIG Compliance Program Guidance for Hospitals or the MCCMH Corporate Compliance Program.
3. The MCCMH Corporate Compliance Officer shall review Contracted Organizational Network Providers' Corporate Compliance Policies and make recommendations to ensure the policies are consistent with MCCMH's standards.
4. The MCCMH Corporate Compliance Officer reserves the right to investigate all incidents and reports of noncompliance it receives from any source.
5. Contracted Organizational Network Providers of Medicare services must ensure that their new and current workforce members annually complete the Medicare Learning Network web-based training (WBT) course designed to provide education on fraud, waste, and abuse in the Medicare Parts C and D program and general compliance concepts. The two-part training can be used to satisfy general compliance training requirements and fulfill the annual fraud, waste, and abuse training requirement for Medicare Parts C and D organizations.
 - a. New workforce members must complete the training within ninety (90) days of hire and current workforce members must complete the training on annual basis.
 - b. Evidence of the training will be documented in a format designated by the MCCMH Training Department.
6. Contact information for reporting fraud, waste, or abuse to MCCMH and/or the MDHHS-OIG shall be disseminated to all MCCMH Contracted Organizational Network Providers on an annual basis, along with information indicating that such reporting may be done anonymously.

E. Program Integrity

1. MCCMH is prohibited from employing or contracting with individuals or entering contracts with organizational providers excluded from participation under either Medicare or Medicaid, or from knowingly employing or contracting with individuals or entering contracts with entities excluded from participating in procurement

activities under the Federal Acquisition Regulation or from participating in activities involving federal financial and non-financial assistance and benefits.

2. As a condition of contracting with MCCMH, organizational providers are obligated to have their own corporate compliance plan, functional program, and investigative processes in place. MCCMH reserves the right to conduct its own investigation into an alleged compliance issue in the event that MCCMH determines that an organizational provider's investigation is incomplete, deficient, or otherwise unsatisfactory. By way of example and without limitation, MCCMH Corporate Compliance may investigate an organizational provider when there are multiple violations of the same nature, the provider has insufficient capacity to investigate, or MCCMH determines circumstances require an investigation.
3. A detailed description of the MCCMH's policy on program integrity can be found in MCCMH MCO 1-010, "Program Integrity".

F. Disclosure of Ownership, Control, and Criminal Convictions

1. Federal regulations require MCCMH to disclose information about individuals with ownership or control interests in MCCMH. These regulations also require MCCMH to identify and report any additional ownership or control interests for those individuals in other entities, as well as identifying when any of the individuals with ownership or control interests have spousal, parent-child, or sibling relationships with each other.
2. MCCMH shall comply with the federal regulations to obtain, maintain, disclose, and furnish required information about ownership and control interests, business transactions, and criminal convictions as specified in 42 C.F.R. §455.104-106.
3. MCCMH shall ensure that individuals with ownership or control interests in MCCMH, contract providers, and vendors submit full disclosures identified in 42 C.F.R. Part 455, Subpart B. Disclosure statements shall include:
 - a. Name and address of any person (individual or corporation) with an ownership or control interest in the disclosing entity. The address for corporate entities must include primary business address, every business location, and P.O. Box location.
 - b. Date of birth and Social Security number of each person with an ownership or control interest in the disclosing entity.
 - c. Other tax identification number (in the case of a corporation) with an ownership or control interest in the disclosing entity or in any subcontractor in which the disclosing entity has a five percent or more interest.
 - d. Whether the person (individual or corporation) with an ownership or control interest in the disclosing entity is related to another person with an ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling or whether the person (individual or corporation) with an

ownership or control interest in any subcontractor in which the disclosing entity has a five percent or more interest is related to another person with ownership or control interest as a spouse, parent, child, or sibling.

- e. The name or any other disclosing entity in which an owner of the disclosing entity has an ownership or control interest.
 - f. The name, address, date of birth, and Social Security number of any managing employee of the disclosing entity.
 - g. The identity of any individual who has an ownership or control interest in the provider or is an agent or managing employee of the provider and has been convicted of a criminal offense related to that person's involvement in any program under Medicare, Medicaid, or the Title XX services program since the inception of those programs.
4. MCCMH, contract providers, and vendors shall ensure that all contracts; agreements; purchase orders; or leases to obtain space, supplies, equipment, or services provided under contract with MDHHS and/or Substance Use Disorder Community Grant Programs Agreement are compliant with 42 C.F.R. §455.104-106.

G. Notification

1. MCCMH shall notify its contract manager at MDHHS, or any applicable MCO, when it terminates, suspends, or declines a provider, subcontractor, practitioner, employee, or any member of its workforce from its organization as a result of fraud, integrity, a quality matter, or any criminal conviction described under Sections 1128(a) and 1128(b)(1), (2), or (3) of the Social Security Act, or assessment of civil monetary penalty under Section 1128A of the Act.
2. MCCMH shall notify its contract manager at MDHHS, or any applicable MCO when a staff member, director, or manager of MCCMH; an individual with a beneficial ownership of five (5) percent or more; or an individual with an employment, consulting, or other arrangement with MCCMH has been convicted of a criminal offense described under Sections 1128(a) and 1128(b)(1), (2), or (3) of the Social Security Act or who has had civil money penalties or assessments imposed under Section 1128A of the Act.
3. MCCMH shall notify any applicable MCO of a compliance concern or potential fraud, waste, or abuse which impacts the MCO.
4. Additional Program Integrity related notification/reporting obligations, with which MCCMH complies, are detailed in MCCMH MCO Policy 1-010, "Program Integrity."

H. Compliance Officer Training:

1. The Compliance Officer shall participate in regular training and education activities in order to ensure knowledge and understanding of the most current, up-to-date standards under applicable law and the PIHP Contract.

2. The Compliance Officer shall attend meetings and other educational events offered by the MDHHS Office of Inspector General, in which he/she will train and discuss fraud, waste, and abuse standards.

VI. PROCEDURES

A. MCCMH Board Corporate Compliance Program and the Code of Ethics

1. When the MCCMH Human Resources Liaison or other clerical staff member sends a letter of confirmation to a new workforce member, he/she shall send to the supervisor at the individual's new work site, along with a memorandum to the supervisor: a copy of the letter, the MCCMH Board Corporate Compliance Program (Exhibit A) and the Code of Ethics (Exhibit B). An individual service contractor shall be provided these documents at the time of their contract signing.
2. Upon reporting to his/her MCCMH work site, each new MCCMH workforce member shall be expected to read and adhere to the MCCMH Board Corporate Compliance Program (Exhibit A) and the Code of Ethics (Exhibit B) and shall sign the Prospective Employee/Contractor Corporate Compliance Program and Code of Ethics Acknowledgment Form (Exhibit C), indicating his/her agreement with the Corporate Compliance Program and Code of Ethics.
3. The supervisor shall forward the acknowledgment forms to the MCCMH Corporate Compliance Officer.
4. The MCCMH Corporate Compliance Officer shall ensure that the workforce member's acknowledgment forms are placed in the workforce member's MCCMH administrative file.

VII. REFERENCES / LEGAL AUTHORITY

- A. Commission on Accreditation Rehabilitation Facilities (CARF) 2020 Standards Manual, §1.E., Legal Requirements, p. 55-56; §1A., Leadership, pp. 31-40
- B. Macomb County Code of Ethics
- C. Section 1128 of the Social Security Act
- D. 42 U.S.C. 1320a-7a, 42 C.F.R. 1001 et seq., 42 C.F.R. 438 et seq., 42 C.F.R. 455.104-106, 42 C.F.R. 422.503-504
- E. MDHHS-MCCMH Medicaid Managed Specialty Supports and Services Concurrent 1915(b)/(c) Waiver Program FY 21 Contract
- F. MCCMH MCO Policy 1-010, "Program Integrity"
- G. MCCMH MCO Policy 1-015, "False Claims Act; Reporting, Investigation, Whistleblower Protections"

VIII. EXHIBITS

- A. MCCMH Corporate Compliance Program
- B. MCCMH Board Code of Ethics
- C. Prospective Employee/Contractor Corporate Compliance Program and Code of Ethics Acknowledgement Form
- D. Employee/Contractor Corporate Compliance Program and Code of Ethics Acknowledgement Form