

**BUTTE COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
POLICY/PROCEDURE**

Subject: Butte County Behavioral Health Compliance Program

**Section: Administration
Sub-Section: Compliance**

**Effective Date: 06/13/06
Review Date: 06/13/08**

POLICY:

It is the policy of Butte County Department of Behavioral Health (BCDBH) to comply with all relevant State/Federal laws/regulations pertaining to the establishment and performance of a Compliance Program. This policy and procedure describes in detail those activities that BCDBH will carry out in order to monitor and prevent financial fraud and abuse. Vital to this policy is the need to promote education to all staff, and to promote ethical conduct.

RATIONALE:

42 CFR, Section 438.608, and contractual agreements entered into with the California State Department of Mental Health, require that the BCDBH have written policies, procedures, and standards of conduct that establishes a comprehensive compliance program designed to prevent fraud and abuse. The BCDBH Compliance Program is organized in accordance with the "Seven Elements" as described in 42 CFR. These "Seven Elements" are:

1. A written commitment to adhere to all relevant State and Federal regulation.
2. An appointed Compliance Officer and Compliance Committee accountable to senior management.
3. A written plan addressing the training needs of the Compliance Officer, and all BCDBH Employees.
4. Open lines of communication between the Compliance Officer and all BCDBH staff.
5. Established standards of conduct and publicized disciplinary guidelines should they be violated.
6. Internal auditing & monitoring activities designed to prevent/detect infractions, and activities that insure the ongoing development of system improvements.
7. Established written timelines and procedures for prompt resolution of detected infractions.

PROCEDURE:

- I. Compliance Program Authority (Element #2)**
 - A. Executive Oversight - The Butte County Board of Supervisors, with general oversight responsibility for the BCDBH, will provide strategic direction to the Compliance Program. The Compliance Officer is a member of the senior management team and communicates regularly with the BCDBH Director. The

Director will communicate relevant compliance issues to the Board of Supervisors during regular meetings.

- B. Behavioral Health Compliance Officer - The BCDBH Compliance Officer is delegated authority for development and day-to-day operation of the Compliance Program. The Compliance Officer shall report directly to the BCDBH Director and will have a working relationship with County Counsel as appropriate. The Compliance Officer will update the BCDBH Director on relevant Compliance Program issues as needed, and at regularly scheduled senior staff meetings.
- C. Compliance Committee - The Compliance Committee will assist the BCDBH Compliance Officer in the development, implementation, and ongoing refinement of the Compliance Program. Membership will be comprised of management representatives through out all sectors of the Department. Meetings will be held a minimum of monthly, with minutes being made available on the BCDBH Compliance Office Website (See Policy and Procedure # 144A – Compliance Committee for more detail)
- D. County Counsel - The BCDBH Compliance Officer will collaborate with the County Counsel on an “as needed” basis when legal issues are in question with regards to compliance program activities and/or investigations. County Counsel shall be responsible for:
 - 1. Providing legal counsel and support to the Compliance Officer as necessary;
 - 2. Participate in training and educational sessions regarding legal elements of the Compliance Program as requested and available; and,
 - 3. If required investigate complaints and issues that are raised during the monitoring of compliance activities.
- E. County Compliance Officer - The Behavioral Health Compliance Officer will collaborate with the County Compliance Officer, in the development and implementation of the Compliance Program as necessary. The County Compliance Officer shall be responsible for:
 - 1. Providing County office support to Behavioral Health Compliance Officer;
 - 2. Attendance as needed to Compliance Committee meetings, and participate in investigations of issues that have county-wide implications that are raised during the monitoring and auditing of compliance activities.

II. Compliance Program Overview:

- A. Compliance Officer and Compliance Committee - The Compliance Officer, with the assistance and support of the Compliance Committee, will be responsible for the development, operation and general management of the Compliance Program as outlined in this and other departmental policies.

- B. Code of Conduct (Element #1) - BCDBH will adhere to its established Code of Conduct as outlined in the booklet "Our System of Caring". This code will govern the proper conduct of all employees, affiliated professionals, and contractors as regards ethical and legal standards.
- C. Compliance Standards (Element #5) - The Compliance Program establishes standards, including policies and procedures, to facilitate adherence to applicable laws and regulations.
1. The Compliance Officer, in consultation with the Compliance Committee, will be responsible to identify those areas where there is a substantial risk for non-compliant conduct.
 2. The Compliance Officer will ensure the development of compliance standards in all billing and clinical areas of service activities.
 3. "Compliance as an element of performance" will be addressed in policy (see BCDBH # 153), and will be addressed in job specifications/descriptions and employee evaluations.
- D. Effective Reporting and Investigative Processes (Element #s 4 & 7) - The Compliance Officer will be responsible for processing reports and conducting investigations of potentially non-compliant practices and conduct.
1. Each employee will be responsible to notify his or her supervisor, in a timely manner, of any violations or suspected violations of the standards for ethics and legal conduct. As an alternative, an employee may follow the reporting procedure under section D) 2) below. Employees will be informed that in some instances, the mere failure to report a suspected violation may itself be basis for disciplinary action against an employee.
 2. A "Compliance Hotline" poster will be posted at all work sites. The poster includes the compliance hotline phone number, information on how to report a compliance concern, and a brief description/example of issues that may be reportable (See BCDBH #147 for more detail).
 3. Employees will not be subject to reprisal for reporting, in good faith, action that they feel violates law or established standards. Any employee engaging in any action of reprisal for any good faith reporting shall be subject to discipline and/or discharge.
- E. Effective Communications and Training Programs to Alert Employees of Their Responsibilities (Element #s 3 & 4) - The Compliance Officer has the general responsibility to oversee the development and implementation of employee communications and training programs to achieve Compliance Program goals. The communication and training programs shall include the following areas:
1. Active participation by the Compliance Officer in training sessions that address documentation and billing standards and practices;

2. New employee compliance training and orientation that will include elements of ethical and legal issues.); Employees shall be informed that their compliance with both the BCDBH Code of Conduct and the Compliance Program in general is a condition of employment;
 3. Department-specific training and educational programs in identified high-risk areas;
 4. Ongoing reviews of ethical and legal issues in departments at substantial risk.
 5. Senior management will support and encourage the Compliance Officer to attend outside educational/training opportunities as they arise, participate in professional organizational meetings (examples include California Privacy Security Compliance Official, CaPSCO; California Quality Assurance Committee, CalQIC; Compliance Consultation Work Group / CMHDA, etc.), purchase training manuals; and subscribe to relevant trade publications, etc.
 6. BCDBH will not employ or retain an employee who is sanctioned for knowingly violating either the Code of Conduct, or the Compliance Program. BCDBH will not knowingly employ any provider who is on either the Federal "List of Excluded Individuals/Entities" or the State Medi-Cal "Ineligible or Suspended" list. Both lists will be reviewed prior to any offer of employment, and at least annually during licensure/certification/contractual renewal processes.
- F. Internal Monitoring and Auditing activities (Element #s 6 & 7)
1. The Compliance Officer will participate in regular internal monitoring and auditing activities designed to detect ethical and/or legal violations. This will include investigations of suspected violations of legal and ethical standards as reported by employees to the Compliance Office.
 2. Sample sizes for auditing activities will be determined by a variety of methods including reports from external auditors, RAT STATs software available through the OIG, and results from internal auditing processes (ASD audits, Quality Management activities, etc.).
 3. Frequency and focus of monitoring/auditing activities will be established at the beginning of each fiscal year by the Compliance Officer and Compliance Committee. These will be recorded in committee meeting minutes and will serve as a guide throughout the year. Factors to be considered when establishing new monitoring/auditing activities, and their frequency, will include review and evaluation of the compliance program's effectiveness over the past year. The Compliance Officer and Compliance Committee shall:
 - a. Identify audits required to verify adherence to, and awareness of, ethics and compliance policies throughout BCDBH as audits are carried out;

- b. Review the results of periodic surveys to test awareness of BCDBH' ethics and legal compliance policies and procedures;
 - c. Conduct special audits as necessary to verify adherence to BCDBH' ethics and compliance policies and procedures. These audits may include 1) on-site visits, 2) interviews with personnel, 3) reviews of written materials and documentation, and 4) trend analysis studies.
- G. Evaluation of the Program - The Compliance Officer will prepare an annual report on Compliance Program activities and overall effectiveness. This report will be presented to both the Compliance Committee and Leadership Team for review and comment. The Compliance Program will be monitored on an on-going basis in order to meet the needs of the Department. It is recognized that the regulatory environment is ever changing, and that ongoing modification is critical to the success of any Compliance Program. Ongoing monitoring activities will include:
- 1. Obtaining employee feedback on how the Compliance Program can be more effective;
 - 2. Identify any areas where compliance efforts break down or pursuit of the seven elements is insufficient or inadequate.

Authority: BCDBH Director; 42 CFR, Section 438.608

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