



North Sound Behavioral Health Organization, LLC

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North Sound BHO Contract Memorandum 2017-005

Date: March 30, 2017

To: Tom Sebastian, Compass Health and Compass Whatcom
Donna Konicki, Bridgeways
Michael Watson, Lake Whatcom RTC
Will Rice, Catholic Community Services Northwest
Claudia D'Allegrì, Sea Mar
Cammy Hart-Anderson, Snohomish County MH/CD/Vets Division Manager
Phil Smith, Volunteers of America
Randy Polidan, Unity Care NW
Sue Closser, Sunrise Services
Robert Sullivan, Pioneer Human Services
Beratta Gomillion, Center for Human Services
Corky Hundahl, Phoenix Recovery Services
Julie Lord, Pioneer Human Services
Linda Grant, Evergreen Recovery Services
Marli Bricker, Therapeutic Health Services

From: Joe Valentine

Subject: Revised Policy

Greetings BHA Providers:

Policy 2001.00 – Business Ethics and Regulatory Compliance Program, Procedures and Plan

This revised administrative policy has been through the review and approval process. The Executive Director signed and approved this policy March 29, 2017.

SUMMARY OF REVISIONS

- A complete policy review as the last update became effective September 2013.
- Update of Code of Federal Regulation (CFR) reference citations.
- Update of Washington Administrative Code (WAC) reference citations.
- With transition to Behavioral Health Organization, April 1, 2017 from Inter-local agreement to Limited Liability Corporation (LLC), change made to support new reporting structure. The Internal Quality Management Committee (IQMC) to serve as the Ethics and Compliance Committee (ECC) for detailed data/case discussion, the Governance and Operations Committee (GOC) to receive aggregate reports, then presented to the County Authorities Executive Committee (CAEC) to be entered into the official record.

- Addition of a new requirement for Behavioral Health Agencies (BHAs) to submit electronically, a monthly attestation statement to attest to conducting regulatory exclusionary checks for all employees, contractors and sub-contractors, per the policy and contract, to enhance compliance and auditing. The attestation will be submitted by the BHA to deliverables@northsoundbho.org no later than the close of the last business day of the month for the preceding month (e.g., January LEIE and EPLS database updates used for Exclusion Attestation for February, due last business day of February). A PDF writeable form has been created for this purpose and will be placed on the BHO web site in the Forms section. The first report using this form is due the last business day of the month of May 2017, for exclusionary checks performed using April 2017 databases.
- Although already existing in the BHO and BHA contracts, clarified in policy that BHAs will report any excluded individuals and entities discovered in the screening within 10 business days of discovery to the BHO. The BHO, in turn, will report any excluded individuals and entities discovered in their screening or reported because of BHA screening within 10 business days of discovery to the Division of Behavioral Health and Recovery (DBHR).
- Updated the Compliance Plan, Attachment A, outlining monitoring and auditing activities that are conducted by the BHO with issues of non-compliance for Program Integrity reported to the Compliance Officer for investigation.

The NM with policy attachments is included below for your convenience.

Please ensure all appropriate staff is notified of this revised policy.

Full implementation of this policy should occur no later than 60 days after this memo.

cc: Cindy Ferraro, Bridgeways
Becky Olson-Hernandez, Compass Health
Kay Burbidge, Lake Whatcom RTC
Pat Morris, Volunteers of America
Katherine Scott, Sea Mar
Richard Sprague, Unity Care NW
Danae Bergman, Center for Human Services
Jackie Henderson, Island County Coordinator
Barbara LaBrash, San Juan County Coordinator
Rebecca Clark, Mental Health Program
Coordinator Skagit County
Anji Jorstad, Snohomish County Coordinator
Anne Deacon, Whatcom County Coordinator
Marsh Kellegrew, Evergreen Recovery Services
Robert Sullivan, Pioneer Human Services
Perry Mowery, Whatcom County
Contract File

Effective Date: 6/17/2008; 1/3/2007; 6/2/2004, 9/25/2012-BOD #04-028
Revised Date: 4/1/2017
Review Date: 4/1/2017

North Sound Behavioral Health Organization

Section 2000 – Compliance: Business Ethics and Regulatory Compliance Program, Procedures & Plan

Authorizing Source: 42 CFR 438.608, 438.610, 455, 1001 - 1008
WAC 388-877-0410

Cancels:

See Also:

Providers must comply with this policy and may develop
Individualized implementation guidelines as needed

Approved By: Executive Director

Responsible Staff: Compliance Officer

Signature:

Date: 3/29/2017

POLICY #2001.00

SUBJECT: BUSINESS ETHICS AND REGULATORY COMPLIANCE PROGRAM, PROCEDURES & PLAN (BERCPPP)

MISSION STATEMENT

The mission of the North Sound Behavioral Health Organization (North Sound BHO) is:
Empowering individuals and families to improve their health and well-being.

The vision of the North Sound BHO is to create:

A system of care that is shaped by the voices of our communities and people using behavioral health services. The people who work in this system are competent, compassionate, empowering and supportive of personal health and wellness.

The North Sound BHO Values are:

1. Integrity: North Sound BHO will nurture an environment of transparency, trust and accountability;
2. Collaboration: North Sound BHO believes every voice matters;
3. Respect: North Sound BHO accepts and appreciates everyone we encounter;
4. Excellence: North Sound BHO strives to be the best in everything we do;
5. Innovation: North Sound BHO endeavors to try new things, be forward thinking, learn from mistakes and be adaptable; and
6. Culture: North Sound BHO endeavors to be culturally educated and responsive.

As North Sound BHO pursues this mission, vision and values, North Sound BHO is committed to conducting all our activities in compliance with applicable laws and regulations and in accordance with the highest ethical standards.

North Sound BHO will maintain a business culture that builds and promotes professional responsibility and encourages colleagues to conduct all North Sound BHO business with honesty and integrity.

North Sound BHO's commitment to Compliance includes:

1. Communicating to all employees, consultants, independent contractors and subcontractors' clear ethical guidelines;
2. Providing training and education regarding applicable State and Federal laws, regulations and policies; and
3. Providing assistance and conducting monitoring and oversight to help ensure we meet our Compliance Commitment.

North Sound BHO promotes open and free communication regarding our ethical and compliance standards and provides work environment free from retaliation.

PURPOSE

The purpose of this policy is to outline and define the scope, responsibilities, operational guidelines, controls and activities employed by North Sound BHO to ensure that we maintain an environment that facilitates ethical decision making and that we act in accordance with the laws and regulations that govern North Sound BHO.

POLICY

It is the policy of the North Sound BHO to ensure that through the BERCPPT it will comply with the laws, regulations, principles and policies that govern us and maintain an active program to correct problems that arise. The Compliance Program is implemented throughout North Sound BHO's internal operations and external provider network through:

1. Development of policies and procedures;
2. Appointment of a Compliance Officer and alternate(s) in writing;
3. An ethics and compliance committee (ECC);
4. Training and education;
5. Effective lines of communication;
6. Monitoring and auditing functions;
7. Enforcement standards and response mechanisms; and
8. Ongoing risk assessment and mitigation.

STANDARDS OF CONDUCT AND COMPLIANCE PROGRAM PROCEDURES

North Sound BHO is committed to conducting its business with honesty and integrity and in compliance with all applicable laws. North Sound BHO has developed and maintains a Code of Conduct. The purpose of this guidance is to communicate to all North Sound BHO employees, contractors and subcontractors an expectation and requirement of ethical compliance with all applicable laws, policies, rules and regulations. North Sound BHO's Code of Conduct is intended to establish clear, over-arching guidance and should be regarded as a set of guiding principles that apply to every North Sound BHO employee. It does not address in detail every specific compliance issue that might arise. It does provide a framework for seeking guidance and for decision-making. North Sound BHO requires all employees to sign an acknowledgement confirming they have received the Code of Conduct, understand it represents policies of North Sound BHO and agree to abide by it. Further guidance as to the Code of conduct is addressed in the North Sound BHO Personnel Policy.

North Sound BHO also has the following policies and contract language regarding standards of conduct and compliance:

1. Policy 3502.00 – Personnel Policy & Procedures
2. Policy 3003.00 – Audits
3. Policy 4513.00 – Advisory Board Allowed and Disallowed Expenses

DEFINITIONS

Abuse

Provider and/or business practices that are inconsistent with sound fiscal, business, or healthcare practices and result in an unnecessary cost to North Sound BHO and/or Department of Social and Health Services (DSHS)/Division of Behavioral Health and Recovery (DBHR) Medicaid program or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for healthcare (42 CFR 455.2).

Fraud

An intentional deception or misrepresentation made by a person with the knowledge the deception or misrepresentation could result in some unauthorized benefit to the person or some other person(s) (42 CFR 455.2). State statute defines fraud as an attempt to obtain more benefits or payments than one is entitled to, by means of willful false statement, willful misrepresentation, by concealing material facts, or fraudulent scheme (74.09.210 RCW).

Compliance Officer

The person appointed by North Sound BHO to fulfill this position in compliance with a Federal program integrity requirement and State contractual requirement (42 CFR 438.608(b)(2), DBHR/Behavioral Health Organization (BHO)/Prepaid Inpatient Health Plan (PIHP) Contract).

Ethics and Compliance Committee (ECC)

North Sound BHO Internal Quality Management Committee (IQMC) serves as described by their charter in the role of the ECC in compliance with Federal program integrity requirements and State contractual requirements (42 CFR 438.608(b) (2), DBHR/BHO/PIHP). Aggregate data will be reported by the Compliance Officer to the Governance and Operations Committee (GOC) as appointed by North Sound BHO County Authorities Executive Committee (CAEC) to fulfill an oversight role. Minutes from the GOC will be presented to the CAEC.

Medicaid Managed Care Abuse

Practices in a capitated Managed Care Organization (MCO), Primary Care Case Management (PCCM) program, or other managed care setting that are inconsistent with sound fiscal, business, medical practices, or federal regulations and result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary, or fail to meet professionally recognized standards or contractual obligations for healthcare.

Federal Compliance Officer

An employee of DBHR, who serves as its Federal Compliance Officer and operates its fraud and abuse telephone hotline.

Office of Inspector General (OIG) Exclusion Program

A Federal program and database that identifies the OIG Exclusion Program called the List of Excluded Individuals and Entities (LEIE), which identifies persons and other entities, which have been excluded from participation and payment in Federal healthcare programs.

Excluded Parties List System

A Federal program under the System for Awards Management (SAM) with a database Excluded Parties List System (EPLS) identifies parties that have been excluded from receiving Federal contracts, certain subcontracts and certain types of Federal financial and non-financial assistance and benefits.

Medicaid Managed Care Fraud

Any type of intentional deception or misrepresentation made by an entity or person in a capitated MCO, PCCM program, or other managed care setting with the knowledge the deception could result in some unauthorized benefit to the entity, himself, or some other person.

Provider

Any individual, community behavioral health agency (BHA), or entity providing North Sound BHO funded public behavioral health services or other associated services through contractual agreement with North Sound BHO and the CAEC.

COMPLIANCE ORGANIZATION AND OVERSIGHT

1. North Sound BHO CAEC has ultimate responsibility for North Sound BHO's BERCPMP.
2. North Sound BHO Executive Director will appoint a Compliance Officer and alternates in writing. The Compliance Officer is also known as the Program Integrity Officer under the Medicaid program and North Sound BHO IQMC will serve as the ECC. Together the ECC and Compliance Officer maintain primary responsibility to oversee and coordinate the BERCPMP. The Compliance Officer, through the ECC reports to the GOC and ultimately North Sound BHO CAEC. The Compliance Officer participates as a member of the IQMC and presents the detailed reports to this body for discussion and to consider opportunities for continuous quality improvement. While the Compliance Officer generally reports to the ECC, when circumstances warrant as determined by the Compliance Officer, the Compliance Officer has the authority to meet directly with the Executive Director, GOC, CAEC and/or North Sound BHO legal counsel/attorney.
3. The Compliance Officer's duties and authority include the following:
 - a. Implement and monitor North Sound BHO compliance activities.
 - b. Report to the IQMC to present reports, data, remedial findings and Corrective Action Plans (CAPs) for discussion and to consider opportunities for continuous quality improvement.

- c. Report to the ECC on, at least, a quarterly basis regarding all compliance activities including policy development, training, monitoring, business and ethical issues addressed and reports of suspected non-compliance. This includes reporting to the ECC on the progress of implementation of BERCPMP; the Compliance Officer, as a member of the ECC will, in turn, provide an aggregate report to the GOC. The GOC reports to the CAEC and may ask the Compliance Officer to provide the report to this body.
- d. Develop policies and procedures that are designed to address substantive regulatory compliance risk areas.
- e. Develop and implement annual education and training programs for employees to specifically include:

Fraud and abuse policies and procedures including:

- i. False Claims Act,
 - ii. Deficit Reduction Act, and
 - iii. Whistle Blower reporting of improper governmental action and protections against retaliation
- f. Receive reports of possible violations of BERCPMP.
- g. Research and provide answers to business ethics and regulatory questions that arise.
- h. Investigate all potential incidents of non-compliance, including reviews of relevant documents and interviews of relevant people, involving internal staff as needed for their expertise as a resource to the investigation.
- i. In consultation with North Sound BHO staff designated as a resource to the investigation from members of the ECC, provide direction for the development of Corrective Action Plans (CAPs) for remedial findings to correct compliance violations, prevent future incidents of non-compliance and steps for monitoring progress.
- j. Develop a reporting process that is clearly defined and communicated to employees, contractors and consumers.
- k. Implement measures developed by the Executive Director, ECC, GOC and CAEC, which are designed to create an environment where employees, contractors, providers and consumers are encouraged to raise ethical questions, report potential incidents of non-compliance and report suspected fraud and abuse without fear of retaliation.
- l. Assist the Executive Director, ECC, GOC and CAEC in reviewing North Sound BHO functions as they relate to fraud and abuse prevention, detection and reporting and in establishing methods to reduce North Sound BHO vulnerability to incidents of fraud and abuse.
- m. Review processes to ensure the North Sound BHO Human Resources/Contracts Team implements procedures to screen employees, contractors and subcontractors prior to interview/hiring or consideration for contract, monthly and as directed by contract, including elected and delegated members of Governing Boards/Committees, and other Board members able to influence funds. Documentation of initial exclusionary checks are to be maintained in individual employee, contractor and subcontractor files by Human Resource/Contracts and are subject to periodic audit.

- n. Maintain a tracking system for business ethical issues, questions about regulatory compliance, reports of potential non-compliance and reports of suspected fraud and abuse and develop and present a quarterly status report to the ECC.
- o. Ensure that appropriate contract provisions are in place that requires contractors and subcontractors to have a Compliance Program.
- p. Refer potential fraud to one or more of the appropriate authorities including, but not limited to:
 - i. DSHS/DBHR;
 - ii. Health Care Authority (HCA);
 - iii. WA State Auditor's Office;
 - iv. WA State Medicaid Fraud Control Unit (MFCU)/Office of Attorney General (AG);
 - v. Office of Civil Rights (OCR);
 - vi. Department of Health and Human Services (DHHS)/Office of Inspector General (OIG); and/or
 - vii. Center for Medicare and Medicaid Services (CMS) Regional Fraud and Abuse Coordinator.
 - viii. Director of the Managed Care Contracting Division of the Department of Health Care Policy and Financing.
- q. North Sound BHO will assist various governmental agencies as practical in providing information and other resources during investigations of potential fraud or abuse. These agencies include, but are not limited to, those listed in "Compliance Organization and Oversight" above.
- r. All information identified, researched, or obtained for, or as part of, a potential fraud and abuse investigation is considered confidential by North Sound BHO and the participating investigative governmental agencies. Any information shared among and/or developed by participants in the investigation of a potential fraud and abuse occurrence is maintained solely for this specific purpose and no other.
- s. North Sound BHO will implement processes that comply with specific reporting procedures developed by DSHS/DBHR and with processes establishing and administering penalties and sanctions for fraud and abuse.
- t. The ECC has direct access to the Compliance Officer, North Sound BHO Executive Director, GOC, and North Sound BHO CAEC. The ECC duties include the following:
 - i. Ensure that BERCPPP is designed to provide an ethical framework for decision-making.
 - ii. Ensure that BERCPPP is designed to prevent and/or detect violations of the law and North Sound BHO's policies and procedures.
 - iii. Oversee the development and revision of the Code of Conduct and policies and procedures that implement BERCPPP.
 - iv. Together with the Compliance Officer, periodically review and revise BERCPPP to meet changing regulations or trends and submit the revised BERCPPP to the CAEC for review following Executive Director signature approval.

- v. Receive reports on investigations being conducted by the Compliance Officer, including review of Corrective Action Plans (CAPs), unless such reports would potentially compromise an investigation.
 - vi. Participate as subject matter experts for investigations at the request of the Compliance Officer.
 - vii. Receive status reports from the Compliance Officer on a quarterly basis and take such steps as may be necessary to resolve any problems that prevent action or limit the effectiveness of the program and consider trends for mitigation and continuous quality improvement.
 - viii. Together with the Compliance Officer ensure communication of BERCPMP and associated activities to all employees including changes in laws, regulations, or policies, as necessary, to assure continued compliance.
 - ix. Make efforts to create an environment where employees, contractors, providers and consumers are encouraged to raise ethical questions, report potential incidents of non-compliance and report suspected fraud and abuse without fear of retaliation.
- u. Any potential fraud and/or abuse occurrences identified by individuals or consumers, or by providers or North Sound BHO employees during performance of their duties are reported to North Sound BHO Compliance Officer as outlined in section IX (Effective Lines of Communication for Reporting and Clarifying Policy) of BERCPMP. The Compliance Officer may:
- i. Investigate to verify such items as:
 - 1) The source of the complaint,
 - 2) Type of provider,
 - 3) Nature of fraud or abuse complaint,
 - 4) Approximate dollars involved, and
 - 5) The legal and administrative disposition of the case.
 - ii. The Compliance Officer reviews the report with North Sound BHO's Executive Director and legal counsel and, if appropriate, the report is forwarded to one or more of the authorities listed in (3.p.) of this program.
 - iii. The Compliance Officer is authorized to exercise independent discretion in reporting suspected fraud and/or abuse to all appropriate authorities.

TRAINING AND EDUCATION

North Sound BHO is committed to communicating our standards for ethical conduct, compliance awareness and compliance policies to all employees. All North Sound BHO employees receive copies of North Sound BHO's Code of Conduct and mandatory annual training on North Sound BHO's BERCPMP. Training may include, but is not limited to, the following topics:

1. Clarification of roles and responsibilities of North Sound BHO, State and Federal resources and contacts (i.e., Compliance Officer, ECC, MFCU, State Auditor's Office, OIG, etc.).
2. The specific components of North Sound BHO BERCP, including North Sound BHO's standards for ethical business conduct.
3. An overview of what constitutes fraud and abuse in a Medicaid Managed Care environment, including fraud and abuse policies and procedures, the False Claims Act and the Deficit Reduction Act.
4. Employee's responsibility to know and comply with State and Federal laws and regulations and North Sound BHO policies that apply to their job and to ask questions when the correct course of action is unclear.
5. How to raise questions about ethical behavior and regulatory compliance and how to report suspected violations and questionable conduct.
6. A review of specific State contract requirements applicable to North Sound BHO business.
7. The consequences of failing to comply with applicable law and North Sound BHO's compliance standards.
8. As new developments or concerns arise, North Sound BHO's Compliance Officer will ensure the information is disseminated to all employees and to contractor management for dissemination to contractor staff and subcontractors.

As outlined in North Sound BHO Agreement General Terms and Conditions each BHA provider is required to participate in annual Medicaid fraud and abuse training. North Sound BHO will notify BHA providers of applicable fraud and abuse training opportunities offered through Centers for Medicare and Medicaid Services (CMS), Washington State Attorney General's MFCU, Washington State Auditor's Office, DBHR, North Sound BHO, or any other relevant entity.

COMPLIANCE PLAN - MONITORING AND AUDITING

Risk Assessment and Mitigation

North Sound BHO maintains a system of monitoring that is based on identifying opportunities for improvement through analysis and measurement while also instituting specific controls to mitigate potential risk. North Sound BHO's Compliance Program is responsible for coordinating the development and overseeing the implementation of a comprehensive risk assessment that identifies all potential risks in accordance with the OIG.

1. North Sound BHO currently has a risk management process that includes an internal and external assessment of risk.
2. The external assessment is completed by a contracted agency that evaluates the risk of North Sound BHO's IS/IT system. A contracted agency or tool is used to perform an assessment of the overall risk of the organization's entire scope of work.
3. The internal assessment is developed/reviewed annually and agreed upon by North Sound BHO's Leadership Team and contains the risk areas that are deemed to be most relevant to North Sound BHO.
4. The outcome of the identification of risks through both the internal and external process is an annual risk mitigation plan monitored as part of the overall Compliance Plan.

North Sound BHO's Compliance Program, Procedures and Plan provide further guidance on specific compliance risk areas. At a minimum, North Sound BHO will develop and maintain policies to address the relevant risk areas identified by the OIG in its "Compliance Guidance to Medicare + Choice Organizations," which are:

1. Marketing Materials and Personnel (Policy #3502; 5502);
2. Selective Marketing and Enrollment (Policy #1503; 3045; 5502);
3. Dis-enrollment (A function of DSHS). The BHO tracks enrollment and dis-enrollment in eligibility data obtained from Medicaid Management Information System (MMIS)/ProviderOne;
4. Underutilization and Quality of Care (Policy #5502);
5. Data Collection and Submission Policies (Policy #2004; 4200 Series; 4015; 5502);
6. Anti-Kickback Statute and Other Inducements (Policy #s 2002; 2003); and
7. Emergency Services – North Sound BHO does not participate in the provision of emergency services as defined by the OIG guidance.

Detection and prevention of fraud and abuse is performed by North Sound BHO through a variety of auditing and monitoring procedures and processes including review and oversight activities, which comprise the Compliance Plan. North Sound's BHO Plan and contracts are the work plan that includes activities designed to ensure BHA provider compliance. North Sound BHO's biennial Administrative and Fiscal audits and annual Quality Assurance/Performance Improvement (QA/PI) and Encounter Data Validation (EDV) on-site provider contract reviews are designed to ensure contractor compliance. Results that fall outside benchmarks, are suspect or do not represent sound business practices are reported to IQMC and the Compliance Officer. A list of the tools used for this monitoring and audit function are reviewed and updated annually, with the most current version of the list included as Attachment A. Other fiscal policies and audits ensure compliance with payment standards that apply to North Sound BHO. At a minimum, North Sound BHO will conduct monitoring activities that encompass the relevant risk areas identified by the OIG in its Compliance Guidance to Medicare + Choice Organizations (see section IV).

EFFECTIVE LINES OF COMMUNICATION FOR SEEKING GUIDANCE AND REPORTING PROBLEMS

North Sound BHO employees and contractor agencies have a responsibility to raise questions about business ethics and regulatory compliance, to report incidents of potential non-compliance and to report suspected fraud and abuse identified during performing work responsibilities to North Sound BHO Compliance Officer.

North Sound BHO and contractor employees may report any potential fraud or abuse to their supervisors who must then report the suspected misconduct to their agency's Compliance Officer, who in turn reports to North Sound BHO Compliance Officer.

A report may be made by individuals, BHA providers or their employees, or North Sound BHO employees to North Sound BHO Compliance Officer using one of the following options:

1. In person, to North Sound BHO Compliance Officer;
2. Faxing a report to North Sound BHO Compliance Officer at (360) 416-7017;
3. Anonymously and confidentially calling North Sound BHO Compliance Officer at (360) 416-7013 Extension 617 or (800) 684-3555 Extension 617;
4. By E-mail to Compliance Officer at compliance_officer@northsoundbho.org; or
5. Mailing a written concern or report to:

Compliance Officer
North Sound Behavioral Health Organization
301 Valley Mall Way, Suite 110
Mt. Vernon, WA 98273
(Please identify as Confidential on outside of envelope)

This contact information, as well as additional avenues for reporting suspected fraud and abuse, is also listed on the North Sound BHO website: <http://www.northsoundbho.org>.

All contacts that cannot be resolved in one conversation are documented to track and monitor reported concerns to resolution. All known reporting persons are advised they may call back later to receive an update on their reports.

In making a report of suspected/potential fraud, sufficient detail is needed as to the specific events that are believed to be fraudulent. Specifically, a description of the services that were or were not received that are believed to be fraudulent. The following information is helpful to begin the investigation: Agency name, dates of services, type of service and any other specific details that can be provided, such as, the individual providing the service, etc.

It is best for this detailed information to be provided in writing, either by letter or E-mail, to the North Sound BHO Compliance Officer as listed above.

Any information provided, including the identity of the person making the report, will be kept in confidence between the Compliance Officer, North Sound BHO attorneys and senior management to the extent legal and feasible. However, should government authorities become involved, in the case of a lawsuit, or if the need otherwise arises for North Sound BHO to disclose the information as required by law, such information may be disclosed.

There is a zero-tolerance policy against any retaliation for reporting potential compliance violations or requesting assistance from the Compliance Officer, even if the individual reporting mistakenly reports what they reasonably believe to be an act of wrongdoing. However, knowingly fabricating, distorting, exaggerating, or minimizing a report of wrongdoing to injure someone else or protect the individual reporting may result in action against them.

INVESTIGATIONS, CORRECTIVE ACTION PLANS (CAP) AND OTHER RESPONSES

- A. All reports of potential violations of laws, regulations, policies, or questionable conduct from any source shall be logged and reviewed by North Sound BHO Compliance Officer. If after initial investigation and consultation with North Sound BHO Executive Director and/or legal counsel, the Compliance Officer determines there are genuine compliance concerns, the Compliance Officer will inform the ECC and forward reports of potential fraud and abuse to DSHS/DBHR and all other appropriate regulatory authorities.
1. When an instance of non-compliance requiring remedial action has been determined, either at the BHA or BHO, and confirmed by North Sound BHO, the Compliance Officer: Develops and recommends remedial action for an initial CAP involving members of the IQMC and/or other BHO Staff in development as needed for their expertise;
 2. Upon consensus, the Compliance Officer will finalize the remedial action and recommendations for the CAP for review by the designated members of the IQMC;
 3. Upon approval, the Compliance Officer and designated members of IQMC will develop a strategy for implementation of the CAP, with the advice and guidance of North Sound BHO Executive Director and legal counsel, as necessary;
 4. The CAP will focus on implementing changes designed to ensure the specific violation is addressed and, to the extent possible, improve, prevent, or detect any additional compliance inadequacies;
 5. The CAP may include one (1) or all the following areas:
 - i Specific areas requiring compliance attention;
 - ii Requirements of additional training and education;
 - iii Further audit and/or investigation;
 - iv Monetary recoupment;
 - v Disciplinary Action; or
 - vi Monitoring the results.
- B. If the initial investigation reveals possible criminal activity, the CAP will include:
1. Immediate cessation of the activity until the CAP is in place;
 2. Initiation of appropriate disciplinary action against the person(s) involved in the activity;
 3. Notification to such law enforcement and regulatory authorities as North Sound BHO legal counsel advises, which, at a minimum, if it includes Medicaid Fraud, notification to the Washington Attorney General's Office MFCU and the Director of Managed Care Contracting, Division of the Department of Health Care Policy and Financing;
 4. Specific requirements for additional training and education of employees to prevent future similar occurrences; and
 5. Initiation of any necessary action to ensure no individuals are placed at clinical risk.

- C. Any threat of reprisal/retaliation against a person who makes a good faith report under BERCPPT is against North Sound BHO policy. Reprisal/retaliation, if found to be substantiated, is subject to appropriate discipline, up to and including termination as outlined in North Sound BHO Personnel Manual, Policy 3502.00.
- D. North Sound BHO, at the request of a reporting person, shall provide such anonymity to the reporting person as is possible under the circumstances in the judgment of the Compliance Officer, consistent with North Sound BHO obligation to investigate concerns and take necessary corrective action. Anonymous reporting persons are advised that while they may remain anonymous, the content of their reports is not confidential.
- E. If the identity of the complainant is known and a request is made, the Compliance Officer provides a written report to the reporting individual that an investigation has been completed and, if appropriate, the corrective action that has been taken.

ENFORCEMENT AND DISCIPLINARY MECHANISMS

A. Employee Disciplinary Action

North Sound BHO will initiate appropriate disciplinary action against its employees who fail to comply with applicable laws, regulations and policies. The seriousness of the violation will determine the level of the discipline. Options for disciplinary measures are outlined in the Personnel Policy. In resolving Medicaid fraud, written notification to the Washington State Department of Health (DOH) is a step in the process in the case of any employee termination for this reason. This is a special emphasis by CMS to connect perpetrators of Medicaid fraud with a personnel action to ensure confirmed violators are prevented from becoming re-employed with an unsuspecting employer through lack of inclusion on the List of Excluded Individuals and Entities (LEIE).

B. Contractor Discipline/Termination

North Sound BHO contracts require BHA providers comply with all North Sound BHO policies and procedures that impact the prevention and detection of fraud and abuse, including North Sound BHO BERCPPT. The contracts clearly state breach of these provisions will be events for assignment of remedial action requiring a CAP or termination of the contract after failure to cure. In resolving Medicaid fraud, contractors will make written notification to the Washington State DOH in the case of any employee termination for this reason and provide a copy of the notification to the North Sound BHO Compliance Officer as part of their CAP.

PROVIDER RESPONSIBILITIES

- A. North Sound BHO's direct contracts require BHA providers develop and implement administrative and management procedures that are designed to ensure regulatory compliance including:
 - 1. The adoption of a mandatory Compliance Program, procedures and plan that includes the first seven (7) components recommended by the Federal Sentencing Guidelines (see Section IV);

2. Participation by the BHA provider and any subcontractors in Medicaid fraud and abuse training conducted by the Washington State Attorney General's MFCU;
3. Reporting of fraud and/or abuse information of the provider or subcontractors to North Sound BHO as soon as it is discovered or suspected, including the individual's name/identification (ID) number, if applicable, the source of the complaint, type of, nature of fraud or abuse complaint, approximate dollars involved and the legal and administrative disposition of the case;
4. North Sound BHO includes the requirement to report suspected incidents of fraud and abuse into its direct contracts and requires its BHA providers, in turn, to pass those requirements to their subcontractors;
5. North Sound BHO's direct contracts require BHA providers comply with all North Sound BHO Policies and Procedures including those that impact the prevention and detection of fraud and abuse. Likewise, BHA providers are required to include compliance with North Sound BHO Policies and Procedures as a contract term in their subcontracts;
6. North Sound BHO requires BHA providers to implement procedures to screen its employees, contractors and subcontractors prior to hiring or contracting, monthly and as directed by contract, including members of Governing Boards/Committees and members of other Boards able to influence funds. Documentation of exclusionary checks is to be maintained in individual employee, contractor and subcontractor files and is subject to periodic audit. Employees or subcontractors of BHA providers in the North Sound BHO will assign and maintain a contact on the North Sound BHO's compliance/exclusions E-mail distribution list. This requirement is to ensure review of new releases, to determine whether employees and/or contractors have been listed by a state or federal agency as debarred, excluded, or otherwise ineligible for state or federal program participation as verified through:

- i. Washington State DOH new release – <http://www.doh.wa.gov/Newsroom/> (Current Year News Releases);
- ii. United States Health and Human Services (HHS), OIG and LEIE website database – <http://oig.hhs.gov/exclusions/index.asp>
- iii. System for Awards Management Excluded Parties Listing System (SAM EPLS) website search – <https://www.sam.gov/index.html/#1>

B. Specifically, these required exclusionary checks are to determine whether employees and/or contractors have been:

1. Sanctioned by state actions taken to revoke and/or suspend licenses, certifications, registrations of health care providers;
2. Convicted of a criminal offense related to healthcare; or
3. Convicted of other criminal offences that exclude the individual or agency from legally participating in providing healthcare under current regulations, or

4. Listed by a federal agency as debarred, excluded, or otherwise ineligible for federal program participation as verified through the United States HHS website for LEIE (A.6.ii above) and the SAM EPLS (A.6.iii above);
5. Employees or subcontractors found to have a conviction or sanction or found to be under investigation for any criminal offense related to healthcare are to be removed from direct responsibility for, or involvement with, North Sound BHO funded services;
6. BHA providers will report any excluded individuals and entities discovered in the screening within 10 business days to the BHO;
7. BHAs will provide the following as applicable to the North Sound BHO Compliance Officer by secure E-mail to: compliance_officer@northsoundbho.org on discovery of exclusion: individual/entity name, date of birth, social security number, job position title/type of business, date of hire, date of exclusionary screening check showing the exclusion and name of database used, business address and location employee/entity is providing service;
8. The BHO, in turn, will report any excluded individuals and entities discovered in their screening or reported because of BHA screening within 10 business days of discovery to DBHR; and
9. All North Sound BHO BHA network providers will submit electronically a monthly attestation statement to attest to performing exclusionary checks of all employees, contractors and subcontractors prior to hiring or contracting, monthly and as directed by contract, including members of Governing Boards/Committees and members of other Boards able to influence funds, to the North Sound BHO contract deliverables E-mail address (deliverables@northsoundbho.org) no later than the close of the last business day of the month for the preceding month (e.g., January LEIE and EPLS database updates used for Exclusion Attestation for February, due last business day of February). **Attachment B** is provided for this purpose and is available as a writeable form on the BHO website in the Forms section at: <http://northsoundbho.org/forms/>.

ATTACHMENTS

- A. North Sound BHO's biennial Administrative and Fiscal audits and annual Quality Assurance/Performance Improvement (QA/PI) and Encounter Data Validation (EDV) on-site provider contract review tool list. North Sound BHO Monthly BHA Exclusions Attestation Statement.
- B. North Sound BHO – Exclusion Attestation Statement

MONITORING AND AUDITING TOOL LIST**1) 2017 AUDIT TOOL**

Provider self-assessment tool

2) ADMINISTRATIVE

- a. Audit letter and schedule;
- b. Audit entrance sign-in sheet;
- c. Audit exit sign-in sheet;
- d. Facility check list;
- e. Personnel check list; and
- f. Final audit report template.

3) ENCOUNTER VALIDATION

Data set tool

4) FISCAL

- a) Fiscal Federal block grant (FBG) tool; and
- b) Fiscal Programs to Aid in the Transition from Homelessness (PATH) tool.

5) QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT

- a) Compliance Program tool;
- b) Crisis tools;
- c) Early Periodic Screening, Diagnosis and Treatment (EPSDT) tool;
- d) Encounter Data Validation tool;
- e) Evaluation and Treatment (E&T) tools;
- f) Grievance System tools;
- g) Intensive Outpatient (IOP) tools;
- h) Mobile Outreach tools;
- i) Program of Assertive Community Treatment (PACT) tool;
- j) Programs to Aid in the Transition from Homelessness (PATH) tool;
- k) Supported Employment tools;
- l) Triage tools; and
- m) Wraparound/Wraparound with Intensive Services (WiSe) tools.

6) RISK ASSESSMENT

- a) Organizational Risk Assessment tool;
- b) Compliance Risk Assessment tool; and
- c) OCR HIPAA Security Risk Assessment tool.