

POLICY/PROCEDURE TITLE: Corporate Compliance Program POLICY/PROCEDURE: 901 Section: Corporate Compliance & HIPAA Developed and maintained by: Corporate Compliance Officer Scope: <input checked="" type="checkbox"/> OnPoint Personnel <input checked="" type="checkbox"/> MH/IDD, <input checked="" type="checkbox"/> Housing, <input checked="" type="checkbox"/> SUD, <input checked="" type="checkbox"/> Integrated Health, <input checked="" type="checkbox"/> OnPoint Contract Providers <input type="checkbox"/> Other _____	Approved By: <u>Mark Anello</u> (Chief Executive Officer)	
	Approved By _____ (Medical Director; as applicable)	
	DATES	
	First Effective	02/2013
Revised	11/2024	
Supersedes	06/2021	

PURPOSE

To establish a Corporate Compliance Program that provides the framework to ensure OnPoint conducts all aspects of service delivery and administration with honesty, integrity, and in conformance with the highest standards of accountability and applicable laws, while utilizing sound business practices, through the development of and adherence to its Compliance Program, guaranteeing the highest standards of excellence. And, to support OnPoint’s commitment to prevent, detect, and mitigate any fraud, waste, and abuse either known or suspected.

DEFINITIONS

Refer to Attachment [901.5 Compliance Related Definitions and Terms](#)
 Access via OnPoint Intranet at: [Policies & Procedures- Compliance](#)
 Access via OnPoint Website at: [Providers – OnPoint](#)

POLICY

OnPoint will deliver services and conduct business in strict conformance to the highest ethical standards of accountability for administration, programs, services, business, marketing, human services, and financial management as it pertains to compliance and regulatory management. OnPoint is committed to the prevention and detection of fraud, waste, and abuse and to the adherence of all federal and state laws, rules, and regulations as well as regional and local policy. OnPoint will manage and maintain a Corporate Compliance Program and related processes that address all required elements of an effective compliance program as established by the Department of Health and Human Services/Office of Inspector General Office. If federal, state, regional or accreditation standards conflict, OnPoint will follow the most stringent requirements. OnPoint’s Board of Directors has adopted and supports OnPoint’s Corporate Compliance Plan which provides an overview of its Corporate Compliance Program which is made up of the Plan and all associated policies and procedures.

STANDARDS

OnPoint’s Corporate Compliance Program provides the framework for OnPoint Personnel and Contract Providers to comply with applicable statutes, rules, regulations, and program requirements.

1. Specific standards include, but are not limited to, the following:

- A. OnPoint’s Corporate Compliance Plan encompasses, at minimum, the seven elements of an effective compliance program as outlined in the OIG Compliance Program Guidance and referenced in the Federal Sentencing Guidelines, Chapter 8, with the addition of an annual

Compliance Program Risk Assessment. Each element is stated in the OnPoint Corporate Compliance Plan which is reviewed and approved annually by the OnPoint Board of Directors.

- B. OnPoint's Corporate Compliance Plan and all associated policies and procedures, including the Code of Conduct and Ethics establish the Compliance Program.
- C. All OnPoint staff will be trained on the Compliance Plan upon hire and when changes occur. Annual training on various compliance related topics is also required and will be determined by results of risk assessments, reports, audits, and monitoring and/or changes in rules, regulations, contract, or policy.
- D. Contract Providers shall have policies and procedures necessary to comply with OnPoint's Corporate Compliance Program and shall ensure effective processes for identifying and reporting known or suspected fraud, waste, and abuse and to ensure response to detected offenses in a timely manner with appropriate corrective action, as necessary.
- E. Contract Providers shall identify a Compliance Officer or other high-ranking staff responsible for compliance activities.
- F. OnPoint and Contract Providers shall provide staff training on compliance and the Corporate Compliance Program and will maintain records of staff attendance, training hours, trainer, and date of training. Training shall include but is not limited to the Federal and Michigan False Claims Acts and Whistleblowers Protection Acts.
- G. OnPoint Personnel and Contract Providers must comply with Corporate Compliance Program requirements including any necessary reporting to other agencies.
- H. Corporate Compliance Program documents and activities are to be reviewed at least annually.
- I. OnPoint Personnel shall conduct themselves in such a way as to avoid situations where prejudice, bias, or opportunity for personal or familial gain could influence, or have the appearance of influencing, professional or business decisions.
- J. OnPoint Personnel and Contract Providers and their respective personnel are required to report known or suspected compliance issues to their Compliance Officer, and/or immediate supervisor, and/or OnPoint Compliance Officer.
- K. OnPoint Personnel and Contract Providers must adhere to the Whistleblower's Protection Act.

2. Contract Compliance & Coordination with Lakeshore Regional Entity (LRE).

- A. OnPoint personnel and contract providers must comply with the terms of the contract between the LRE and OnPoint and applicable LRE standards, policies and procedures.
- B. In addition to general LRE contract compliance requirements, OnPoint is subject to the terms and conditions of the MDHHS/PIHP Master Contract together with attachments all of which are incorporated herein by reference.

3. Compliance and a Culture of Continuous Quality Improvement

- A. Compliance at its essence is simply putting out the sufficient effort to meet the minimum requirements and measuring compliance against the law or other requirements. Quality, on the other hand, is derived from a systematic continuous improvement process whereby management, resources, consumer services, measurement systems are aligned and operated in such a way that continuous improvement and compliance are an inescapable outcome. An organization will never achieve those benefits with a compliance-only approach.
- B. Monitoring and tracking compliance and quality/performance can be beneficial by:
 - a) Ensuring you identify potential compliance issues and resolve them quickly.
 - b) Reducing your risk of missing any compliance obligations.
 - c) Improving how your business is run and giving your employees more certainty over how to do their job.
 - d) Reducing your risk if your business is subject to any legal issues or claims.
 - e) Increasing the efficiency of your business by spending less resources fixing mistakes.

- C. OnPoint is also committed to using a learning organization model in addressing compliance matters where there are opportunities for improvement. This approach creates a focus on group problem solving using the systems thinking method. (Reference: *The Fifth Discipline: The Art and Practice of the Learning Organization*, by Peter Senge.)

4. Procedures

- A. OnPoint requires Contract Providers that makes or receives payment of \$5 million or more in Medicaid annually to make provision for written policies for all employees of the entity that provide detailed information about the False Claims Act and other Federal and State laws described in Section 1902(a)(68) of the Act, including information about rights of employees to be protected as whistleblowers. [Provision of the Deficit Reduction Act of 2005, Feb. 8, 2006.] Contract Providers meeting this threshold must also comply with Section 6032 of the Deficit Reduction Act (DRA) of 2005.
 - a) Contract providers not meeting this threshold are expected to have compliance efforts documented and implemented that include, at minimum monthly exclusion checks, process to collect Disclosure of Ownership/Controlling Interest/Criminal Convictions, as required, and processes to assist in the prevention and detection of fraud, waste, and abuse of public funding.
- B. OnPoint ensures all reported violations are reviewed and/or investigated, depending on the nature of the report.
- C. OnPoint Personnel and Contract Providers are not to violate any provision of the Corporate Compliance Program nor are they to condone any such violation by others.
- D. Any OnPoint Personnel or Contract Provider with knowledge of information concerning suspected violation of law or any provision of the Compliance Program relating to fraud, waste, or abuse are required to report promptly such violations in accordance with *OnPoint 911 Reporting Responsibilities for Compliance Violations and Wrongdoing Policy*.
- E. OnPoint Personnel who violate any provision of the Corporate Compliance Program, including the duty to report suspected or known violations, shall be subject to disciplinary action in accordance with OnPoint's personnel policies using the Corporate Compliance Plan and the *910 Enforcement and Discipline Policy* as guidelines.

5. Compliance monitoring and controls include, but are not limited to the following:

- A. Environmental Compliance – Internal and external health and safety inspections are conducted at least annually at all OnPoint sites.
- B. Contractual Obligations to OnPoint – Provider reviews are conducted at least annually.
- C. Financial Systems Reliability and Integrity – A comprehensive financial audit is completed following each fiscal year.
- D. Information Systems Reliability and Security - OnPoint Information Technology Services monitors at least annually the reliability, security and integrity of the electronic information system, including but not limited to ensuring the following:
 - a) The security, integrity, and protection of consumer confidentiality.
 - b) At least twice yearly, there is controlled access to electronic data and that all employees have the appropriate roles, access, and software necessary to perform their job functions effectively while being limited to the minimum necessary data to facilitate HIPAA compliance and protect consumer data.
 - c) The reliability, validity, and accuracy of data.
 - d) That procedures are being followed on the confidentiality of electronic information pursuant to HIPAA, HITECH, the Michigan Mental Health Code, 42 CFR Part 2, and other applicable laws and regulations.

- E. HIPAA Privacy Reviews. At least annually, a HIPAA privacy walkthrough will be conducted to ensure the privacy of protected health information. (Refer to OnPoint policy *902 HIPAA Privacy and Security* and policy *908 Breach Notification and Oversight*)
- F. Quality Record Management Reviews. OnPoint provides ongoing monitoring of the quality, appropriateness, and utilization of the services primarily through a systematic review process. (Refer to OnPoint policy *902 HIPAA Privacy and Security*)
- G. LRE Audits/Reviews. Reviews that include Medicaid Services Verification, Annual Site Review, and Provider Reviews.
- H. Accreditation. OnPoint is accredited by a recognized international organization (CARF). An accreditation survey is conducted at least every three years.
- I. Attestations. All OnPoint Personnel must sign an attestation agreeing to:
 - a) Conducting themselves in a manner that complies with OnPoint's Code of Conduct/Ethics.
 - b) Immediately report suspected wrongdoing to OnPoint Compliance Office, the designated regional Compliance Officer or hotline.
- J. OnPoint provides the necessary follow-up for each of the above through corrective action plans and/or quality improvement plans.

6. Corrective Action

- A. Monitoring and auditing activities, failure to meet contract and/or performance standards, and reports of questionable practices may form the basis for imposing corrective action.
- B. Corrective action may be imposed as a means of facilitating the overall goal of full compliance. Corrective action shall be sufficient to reflect the severity of the incident and address the instance of noncompliance.
- C. Corrective action plans should also assist with understanding specific issues and reduce the likelihood of future noncompliance.
- D. Elements of a Corrective Action Plan (CAP) shall include:
 - a) A resolution for specific problem(s) identified,
 - b) A recommendation to repay or not bill inappropriate claims or reverse encounters reported or not report encounters.
 - c) Report to appropriate government authorities about the noncompliance, as appropriate.
 - d) A recommendation to change policy, procedures, or business practices to remediate or reduce the likelihood of recurrence and to monitor the adoption of compliance with recommendations.
 - e) Additional mandatory education and training for staff who are the subject of the Corrective Action (CA).
 - f) Identification of responsible party/parties for the CA and target date for completion, and
 - g) Other corrective measures, as needed to ensure full compliance.
- E. OnPoint's site review/monitoring team/staff, Provider Network Management, Compliance Officer and/or Compliance Committee, CEO, and/or Management Team, depending on the situation, will review and accept CAPs or request further action or clarifications. CAPs will be monitored at least annually.
- F. Ramifications for failure to implement CA are outlined in contract language and OnPoint's Sanction Policy.

REFERENCES/LEGAL AUTHORITY (Not an all-inclusive list)

- A. Laws
 - 1. 42 CFR Part 2 relative to substance abuse services
 - 2. 42 CFR, Chapter IV, Subchapter C, Part 455 – Program Integrity: Medicaid
 - 3. 42 CFR, Parts 400 and 438.608 (Balanced Budget Act) – Program Integrity Requirements
 - 4. American Recovery and Reinvestment Act of 2009
 - 5. Deficit Reduction Act of 2005, United States Code, Vol. 42, Sec. 1396a (a)(68) and Section

- 6032.
 6. False Claims Act, United States Code, Vol. 31, Sec. 3729-3733
 7. Health Information Technology for Economic and Clinical Health (HITECH) Act of the
 8. Health Insurance and Portability Accountability Act (HIPAA)
 9. LRE/OnPoint Medicaid Specialty Supports and Services Contract
 10. MCL- Section 330.1748 Confidentiality
 11. MDHHS Credentialing and Re-credentialing Policy
 12. MDHHS Medicaid Provider Manual
 13. MDHHS/OnPoint General Fund Contract
 14. MDHHS/PIHP Medicaid Specialty Supports and Services Contract
 15. Program Fraud and Civil Remedies Act, United States Code, Vol. 31, Sec. 3801-3812 (Program Fraud Civil Remedies Act of 1986)
 16. Anti-Kickback Statute 42 USC1320e-7b(b)
 17. United States Organizational Sentencing Guidelines (1991)
 18. Stark Laws I (1989) and Stark Laws II (1993)
 19. Health Insurance Portability and Accountability Act of 1996 (HIPAA)
 20. Balance Budget Act of 1997 (BBA)
 21. Social Security Act, specifically 1903(m)(95)(i)
 22. Affordable Care Act (Public Law 111-148; 111-152 of 2010)
 23. Whistleblowers Protection Act of 1980
 24. HITECH Act of 2009
 25. 42 CFR, Parts 400 and 438.608 (Balanced Budget Act) – Program Integrity Requirements
 26. 45 CFR Part 164 (Health Information Portability and Accountability Act)
 27. Medicaid False Claims Act, Michigan Compiled Laws, Annotated Sections 400.601-613
 28. HIPAA Privacy Rule Preemption Analysis Matrix for the Michigan Medical Records Access Act, Public Act 47 of 2004 (revised 11/04)
 29. Michigan Mental Health Code, PA 258, as amended
 30. Michigan Public Health Code, PA 368, as amended
 31. Michigan Whistleblowers Protection Act (Act 469 of 1980)
- B. OnPoint Compliance Plan and Policies
1. Access via OnPoint Intranet at: [Policies, Procedures and Guidelines - Home](#)
 2. Access via OnPoint Website at: [Providers – OnPoint](#)
- C. The OnPoint Compliance Program is written to be in congruence and in conjunction with Lakeshore Regional Entity Corporate Compliance Plan - [Corporate-Compliance-Plan.pdf](#)