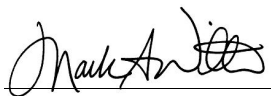


Policy & Procedure



POLICY/PROCEDURE TITLE: Enforcement and Discipline – Compliance Related Offenses POLICY/PROCEDURE #: 910 Section: Corporate Compliance and HIPAA	Approved By:  (Chief Executive Officer)	
	Approved By: (Medical Director; as applicable)	
Developed and maintained by: Corporate Compliance Officer	DATES	
	First Effective	12/1/2024
Scope: <input checked="" type="checkbox"/> OnPoint Staff <input checked="" type="checkbox"/> MH/IDD <input checked="" type="checkbox"/> Housing <input checked="" type="checkbox"/> SUD <input checked="" type="checkbox"/> Integrated Health <input type="checkbox"/> OnPoint Contract Providers <input type="checkbox"/> Other _____	Revised	03/2025
	Reviewed	03/2025

PURPOSE

To articulate OnPoint’s commitment to the guidelines contained and/or referenced in its Corporate Compliance Plan regarding enforcement and discipline in relation to non-compliance with State and federal laws and regulations, Medicaid program requirements, Lakeshore Regional Entity (LRE) and Michigan Department of Health and Human Services (MDHHS) contractual obligations or OnPoint policy.

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

Through its commitment to have an effective compliance program, OnPoint and Contract Providers will establish appropriate consequences for instances of noncompliance. Disciplinary guidelines outlined below identify possible consequences for violating requirements of State and federal laws and regulations, Medicaid program requirements, OnPoint, LRE and MDHHS obligations or the organization’s standards of conduct, contract, or policy.

PROCEDURES

1. Consequences, as used here, are the result of noncompliant actions. Consequences may be educational or remedial and non-punitive, they may be punitive [disciplinary] sanctions, or they may involve both.
2. Enforcement and discipline or consequences are to be applied in a fair, equitable, and consistent manner through appropriate disciplinary channels. Therefore, supervisors, managers, and human resources will coordinate any disciplinary and performance evaluation policies and procedures to assure that they are consistent between departments.
3. There shall be fair and uniform mechanisms for the discipline. The Chief Executive Officer (CEO) and Human Resource Director, the Chief Administrative Officer in consultation with the Compliance Officer (CO) and/or Compliance Committee, as appropriate, shall:

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- a. Assure that there is a uniform procedure for determining if a regulatory compliance policy has been violated.
 - b. Identify the range of discipline for violating these policies.
 - c. Identify factors that may affect the degree of discipline.
 - d. Describe the operational procedures for finding a violation and determining application of the discipline, including a reasonable dispute resolution process and/or fair opportunity for appeal. See policy #615 Employee Compliant/Grievance Policy.
4. There shall be consequences and/or discipline for those who (whether negligently, recklessly, or intentionally) fail to detect an offense committed by a subordinate. This includes discipline of personnel responsible or otherwise accountable for failure to detect an offense.
 5. There shall be consequences and/or discipline for those who commit an offense, and such discipline will vary in proportion to the severity and/or extent/volume of the infraction(s). See policy #616 Disciplinary Action Policy.
 6. The administration of discipline for violations of OnPoint’s Compliance Program shall be administered in accordance with personnel policies otherwise applicable.
 7. The CO will monitor investigations and resulting discipline to ensure consistency.
 8. Managers and supervisors will be made aware that they have a responsibility to impose consequences for noncompliant behavior in an appropriate consistent manner.
 9. The following disciplinary action guidelines will be used to promote fair and consistent disciplinary action.

Violation	Possible Action
<p>Knowingly and willfully committing fraud and/or violation of a federal or state billing or documentation practice(s). Knowingly and willfully providing false or misleading information in a compliance context to OnPoint, governmental agency, person served, or MDHHS. (e.g. billing for services not performed, forging documentation or signatures, upcoding, kickbacks, bribes)</p>	<p>First Offense –</p> <ol style="list-style-type: none"> 1. Termination of employee. 2. Claim/Encounter adjustments - identification of any False Claims to a third-party payor, as required. 3. Restitution will occur, as required. 4. Related individual(s) potentially could be barred from Medicaid service provision or administrative activity.
<p>Unknowingly violating federal or state billing of documentation practice(s).</p>	<p>First Offense –</p> <ol style="list-style-type: none"> 1. Written notice of noncompliance. 2. Claim/Encounter adjustments - identification of any False Claims to a third-party payor, as required. 3. Restitution will occur, as required. 4. Corrective Action/Performance Plan required of staff to the OnPoint Compliance Officer. 5. Possible Corrective Action Plan to the LRE Compliance Officer by OnPoint Compliance Officer. 6. Disciplinary action, typically less than termination. 7. Related individual(s) potentially could be barred from Medicaid service provision or administrative activity. <p>Second Offense –</p> <ol style="list-style-type: none"> 1. Additional disciplinary action, up to and including termination.

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<p>Knowingly violating policies and/or procedures as set forth in the Compliance Program/Plan.</p>	<p>First Offense –</p> <ol style="list-style-type: none"> 1. Written notice of noncompliance. 2. Correction Action Plan required of staff to the OnPoint Compliance Officer. 3. Possible Correction Action Plan to the LRE Compliance Officer by the OnPoint Compliance Officer. 4. Disciplinary action, typically less than termination. 5. Related individual(s) potentially could be barred from Medicaid service provision or administrative activity. <p>Second Offense –</p> <ol style="list-style-type: none"> 1. Additional disciplinary action, up to and including termination.
<p>Detection of, but failure to report or failure to detect substantive violations of federal and state mandates in duties where a reasonable person could be expected to detect violation(s).</p>	<p>First Offense –</p> <ol style="list-style-type: none"> 1. Written notice of noncompliance. 2. Correction Action Plan required of staff to the OnPoint Compliance Officer. 3. Correction Action Plan to the LRE Compliance Officer by the OnPoint Compliance Officer. 4. Disciplinary action, typically less than termination. 5. Related individual(s) potentially could be barred from Medicaid service provision or administrative activity. <p>Second Offense –</p> <ol style="list-style-type: none"> 1. Additional disciplinary action, up to and including termination.

REFERENCES

- 42 CFR 438.608
- US DHHS OIG – General Compliance Program Guidance, Nov 2023
- LRE/CMHSP Contract
- LRE Compliance Plan and Policies
- OnPoint Corporate Compliance Plan and Policies
 1. Access via OnPoint Intranet at: [Policies, Procedures and Guidelines - Home](#)
 2. Access via OnPoint Website at: [Providers – OnPoint](#)
- Policy 615 Employee Complaint/Grievance
- Policy 616 Disciplinary Action