

# **Region 3 Behavioral Health Services Compliance Plan**



## Compliance Plan Overview

Region 3 Behavioral Health Services (Region 3) is committed to consumers, employees and volunteers, contractual providers, and the community to ensure business is conducted with integrity, in compliance with the requirements of applicable laws and sound business practices, and with the highest standards of excellence.

The Compliance Plan (“The Plan”) of Region 3 is designed to prevent, detect, and correct any instances of noncompliance with applicable federal and state law and program requirements set out in federal and state programs. Every employee and volunteer at Region 3 has important responsibilities identified in The Plan, including a duty to report any compliance concerns as explained in The Plan.

The Plan is also designed to be consistent with the Federal Department of Health and Human Services Office of Inspector General Compliance Program Guidelines. As regulatory guidance and applicable laws change, The Plan will be modified as necessary to incorporate these changes. The Plan is to be reviewed on an annual basis by the Compliance Committee. The outcome of said review will be forwarded to the Regional Administrator for approval. Amendments will be submitted to the Region 3 Governing Board by the Compliance Officer and the Regional Administrator for approval.

### Compliance Plan Goals and Objectives:

- Maintenance of a working environment that promotes ethical values, exemplary behavior, and compliance with the letter and spirit of all applicable laws and regulations.
- Development of a Compliance Program that encourages employees and volunteers, network providers and their employees to demonstrate the highest ethical standards in performing their daily tasks.
- Establishment of Standards of Conduct.
- Oversight of a disclosure system (telephone and e-mail Compliance Hotline) that requires Region 3 to respond to reports by employees and volunteers or others of a suspected violation of law or regulation or the principles of the Compliance Program.
- Identification of those situations in which the laws, rules, and standards of state and/or federal programs or other applicable laws and regulations may have not been followed and facilitation of the correction of any such practices.
- Implementation of procedures to ensure future compliance with all laws and regulations.
- Training and communication that ensures employees and volunteers, and network providers understand and comply with all state and federal laws and regulations and Nebraska Department of Health and Human Services policies and procedures and reduces the likelihood that violations will occur through appropriate screening of potential employees and volunteers of Region 3.
- Assurance that documents are retained and kept secure, as required by state and federal law and regulation, for the appropriate length of time.
- Establishment of disciplinary policies that are prompt, effective, consistent and will discipline employees and volunteers based on the severity of the violation, and not on the basis of their position, title, or length of service with Region 3.
- Assurance that government inspections and audits proceed in a smooth and professional manner and that all requests and concerns are addressed promptly and appropriately.

## **The Compliance Plan includes seven major elements:**

- Written Compliance Standards, Standards of Conduct, and Policies and Procedures
- Compliance Officer
- Education and Training
- Communication
- Auditing and Monitoring
- Investigations and Corrective Action
- Disciplinary Actions

## **Compliance Standards, Policies, and Procedures**

### ***Principles of Compliance***

Region 3 adopts these principles of compliance as the foundation of the Region 3 compliance policy:

- Region 3 employees and volunteers will comply with all applicable federal, state, and local laws and regulations.
- Region 3 employees and volunteers will conduct themselves in a manner that is consistent with the provisions of the Region 3 Code of Ethics.
  - Each employee and volunteer, including new employees and volunteers, shall acknowledge in writing that he or she has received, read, understand and will abide by the Code of Ethics.
- Region 3 employees and volunteers will conduct themselves in a manner that is consistent with the provisions of any professional code of ethics identified by their certification, licensing body or state policy/standards and by those set out in contracts with funding sources.
- Region 3 employees and volunteers who are staff in a program providing services to consumers will conduct themselves in a manner consistent with the program's policies.
- Region 3 employees and volunteers will endeavor to properly bill all funding sources. Specifically, Region 3 will:
  - Only bill for services rendered and provided as claimed;
  - Document services provided with required detail to support the claim for payment and ensure proper documentation is complete;
  - Submit claims only for services that are reasonable and necessary, including expense reimbursement claims for allowable costs only;
  - Not double bill for services resulting in duplicate payment;
  - Not bill for non-covered services as if covered;
  - Not knowingly misuse provider identification numbers, which result in improper billing;
  - Not unbundle services (billing for each component of the service instead of billing or using an all-inclusive code);
  - Properly use coding modifiers, should they become applicable;
  - Not up-code, or otherwise bill, for a level of service other than the level of service provided; and
  - Promptly refund any overpayments that may occur.
- Region 3 employees and volunteers will endeavor to properly bill the Nebraska Department of Health and Human Services, Division of Behavioral Health, for the services provided by the

- other members of the Region 3 Provider Network.
- Region 3 will endeavor to ensure compliance with all state and federal regulatory agency standards and applicable laws and regulations.
- In compliance with the federal and state Anti-kickback statutes, Region 3 board members, employees, and volunteers will not offer, provide, solicit, or accept anything of value from any person in return for the referral of consumers to or from Region 3, or in return for influencing or engaging in any related business transaction, directly or indirectly, involving the care or services provided to Region 3 consumers.

### ***Standards of Conduct***

Region 3 is committed to conducting its delivery of services and business operations in an honest and lawful manner that is consistent with its Mission, Vision and Values. As such, Region 3 minimally establishes the following Standards of Conduct. All Region 3 employees and volunteers will endeavor to:

- Comply with the Region 3 Code of Ethics policy;
- Not create fraudulent documents;
- Provide high quality services consistent with the Region 3 Mission, Vision, and Values;
- Provide high quality services consistent with contractual requirements, national accreditation standards, Region 3 policies, and Region 3 program specific policies;
- Exercise honesty and integrity in the workplace and the other behaviors Region 3 believes to be required, as set out in Organizational Clarity;
- Comply with applicable federal and state laws and professional standards;
- Assist with the prevention of fraud and abuse;
- Report suspected fraudulent practices;
- Refrain from committing waste, fraud, or misuse of Region 3 funds or equipment;
- Refrain from knowingly participating in illegal activities;
- Report any actual or suspected violation of The Plan, agency policies or procedures, or other conduct that is known or suspected to be illegal;
- Forward any request for compliance information received to the Compliance Officer, including subpoenas, warrants, other written requests, or phone calls.
- Provide accurate information to federal, state, and local authorities and regulatory agencies as applicable;
- Promote confidentiality and safeguard all confidential information according to policy, law, and regulations;
- Practice ethical behavior regarding relationships with co-workers, consumers, funding sources, service providers, and other system partners;
- Seek to continually maintain and improve work-related knowledge, skills, and competency; and
- Actively support a safe and healthy work environment, free from harassment of any kind.

### ***Policies and Procedures that Address Compliance***

Region 3 shall maintain policies and procedures that provide guidance to employees and volunteers with respect to compliance obligations in addition to the guidance provided in The Plan. A list of such policies and procedures shall be maintained by the Compliance Officer and updated on an ongoing basis. Relevant policies will be incorporated into The Plan as they are approved by the Compliance Committee. The policies and procedures may include but are not limited to the following:

- Mission, Vision, Guiding Principles, Core Values, and Behaviors

- Hiring Process
- Consumer Rights
- Code of Ethics
- False Claims Act and Whistleblower Protections
- HIPAA Privacy (compliance with state privacy requirements) and Security Regulations
- Documentation Standards-Incident Report;
- Consumer Documentation Standards (services provided);
- Audit Policies – Program and Billing
- Confidentiality
- Duty to Warn; and Child/Adult Abuse and Neglect Reporting
- Employment Standards

## **Compliance Officer**

The Region 3 Regional Governing Board has authorized the Regional Administrator to designate a Compliance Officer who shall be responsible for the implementation, operation, and continuous monitoring of the Region 3 Compliance Plan. The Compliance Officer may delegate tasks as appropriate, but will maintain responsibility to ensure the integrity of The Plan. Region 3's Compliance Officer shall report to the Regional Administrator, but is ultimately responsible to the Regional Governing Board and is authorized to communicate to the Regional Governing Board, the Board Chairperson, and/or its Legal Counsel and shall be free to conduct such investigations as necessary and appropriate to ensure the continuing implementation of The Plan.

The Compliance Officer is principally responsible with overseeing and monitoring the implementation of The Plan. The Compliance Officer presents The Plan to the Regional Governing Board for approval and works with the Compliance Committee to track and monitor implementation of The Plan. The Compliance Committee will review The Plan annually. Revisions to The Plan will be presented to Leadership Team for input and approval. Reports of the identification of suspected noncompliance, will be maintained by the Compliance Officer and shared with the Regional Administrator and with the Regional Governing Board at Governing Board meetings, or sooner with Governing Board Executive Committee if a non-compliance issue is detected. Monitoring techniques will include:

- Compliance audits focused on those areas within Region 3 that have potential exposure to government enforcement actions as identified in (i) Special Fraud Alerts issued by the Office of Inspector General (OIG) , (ii) OIG annual work plan, (iii) initiatives or requests from the Center for Medicare and Medicaid Services, and (iv) law enforcement initiatives. The Compliance Officer shall recommend updates to The Plan, policies and procedures, principles of compliance, and standards of conduct to the Regional Governing Board on a periodic basis to reflect any changes in Region 3's risk profile and applicable laws and regulations.
- Bench-marking analyses which provide operational snapshots from a compliance perspective and identifies the need for further assessment, study, or investigation.
- Periodic reviews in the areas of The Plan dissemination, communication of Region 3's compliance standards and Standards of Conduct including Code of Ethics, availability of online compliance reporting capabilities, adequacy of compliance training and education to ensure that The Plan elements have been satisfied, and that The Plan encourages employees and volunteers to report potential compliance problems without fear of retaliation. The review process may be conducted through on-site interviews and survey questionnaire completion by employees and volunteers.
- Subsequent reviews to ensure that corrective actions have been effectively and completely

implemented.

When a compliance issue has been identified that requires remedial action, the Compliance Officer will develop a corrective action plan specifying the tasks to be completed, completion dates, and responsible parties. Legal counsel and other appropriate Region 3 employees and volunteers will be consulted as appropriate. Each corrective action plan must be approved by the Regional Administrator or his/her designee prior to implementation. Corrective action plans may require that compliance issues be handled in a designated way, that relevant training takes place, that restrictions be imposed on particular employees and or volunteers, or that the matter be disclosed externally. Sanctions or discipline, in accordance with the standard disciplinary policies and procedures of Region 3, may also be recommended.

The Compliance Officer will present significant revisions to the Regional Governing Board. The Regional Governing Board will advise the Compliance Officer and give input on The Plan and approve the implementation and revisions of The Plan.

## **Education and Training**

### ***Policy***

Formal compliance education shall be provided to employees and volunteers and network providers associated with Region 3, as appropriate, to ensure material compliance with The Plan and applicable laws.

### ***Scope of Education and Training***

#### **Employee and Volunteer Education/Training:**

- All new Region 3 employees and volunteers shall receive appropriate compliance education/training as a part of orientation.
- Plan education/training shall be conducted to inform Region 3 employees and volunteers of The Plan, its purpose, and its requirements. Employees and volunteers shall be specifically educated regarding their responsibility to report misconduct and the consequences of failing to comply with The Plan in accordance with the False Claims Act.
- All employees and volunteers must acknowledge in writing that they have read, understand, and agree to abide by The Plan.
- Employee and volunteer compliance education/training shall be conducted as appropriate, but at least on an annual basis.

#### **Employee and Volunteer Attendance and Documentation**

- Employee and volunteer attendance and participation in mandatory education/training opportunities shall be a condition of continued employment or volunteer work.
- The Operations Manager at Region 3 will be responsible for maintaining the documentation of The Plan education/training and providing such documentation to the Compliance Officer.
- The documentation shall include the name of the employee or volunteer, the date, duration of the education/training activity, and a brief description of the subject matter regarding the education/training activity.

#### **Compliance Education/Training Topics:**

- False Claims Act education/training;

- Who the Compliance Officer is;
- The role of the Compliance Officer;
- Who the members of the Compliance Committee are;
- Where the Compliance Plan is located;
- How to report a compliance issue (internal reporting system/procedure(s));
- Anonymous reporting;
- Who to report compliance concerns to;
- What will be reported (anything unusual);
- What fraud, abuse, waste, and error are and what to do if these happen;
- How to document in the report the issues and concerns of violations and noncompliance;
- What to do if you receive a records subpoena, warrant, questions, audits and who to notify;
- The systems that are in place for compliance so problems are prevented or identified before it goes too far;
- What the expectations of employees and volunteers are regarding compliance;
- What disciplinary procedures may take place prior to/following investigations;
- Non-retaliation policy; and
- Confidentiality and HIPAA privacy and security regulations

#### **Network Providers:**

- All Network Provider organizations shall be advised The Plan is available on the Region 3 website.
- Region 3 will share education and training materials with Network Provider organizations.
- Network Providers shall acknowledge in writing, through the signed contract with Region 3, that they have read and understand the Region 3 Plan, and that they shall develop and implement a plan for their organization.
- Region 3's Compliance Officer shall be accessible for Network Providers' employees and volunteers and consumers to report allegations of misconduct by the Network Provider organization or its employees via telephone, email, and by postal service mail. The reporting options will be set out on the Region 3 website with a direct link to an email address that will be received by the Region 3 Compliance Officer.

## **Communication**

### ***Policy***

The elements of The Plan shall be communicated to employees and volunteers and the Regional Governing Board. An internal reporting system will be in place for employees and volunteers to report issues and concerns regarding violations and noncompliance within Region 3 anonymously and without fear of retaliation or retribution. This internal reporting system shall establish a method of communication between the reporting person and the Compliance Officer to encourage reporting of incidents, potential violations, and compliance issues.

### ***Scope of Communication***

#### **Communication of The Plan shall consist of the following:**

- The Plan shall be distributed to all employees and volunteers after approval by the Regional Governing Board, and after each subsequent approved revision to The Plan. New employees and volunteers will receive a copy of The Plan during orientation.

- All personnel shall acknowledge in writing that they have read, understand, and agreed to abide by The Plan and all appropriate compliance standards, policies, and procedures.
- Contracts with network providers will include standard compliance provisions.

### **Employee and Volunteer Responsibility and Internal Reporting System**

- All employees and volunteers are required to promptly report to the Compliance Officer any instances of noncompliance with The Plan. An employee or volunteer who fails to report instances of noncompliance or who knowingly falsifies a report of noncompliance shall be subject to disciplinary action as described in the Disciplinary Actions section. Employees and volunteers may report via email, in-person, or with the option to be anonymous, via telephone, or a written note.

Internal reporting guidelines shall consist of the following:

- The reporting options to the Region 3 Compliance Officer will be set out on the Region 3 website including a direct link to an email address that will be received by the Region 3 Compliance Officer.
- In addition to reporting to the Compliance Office, employees and volunteers are encouraged to report concerns regarding violations of compliance to his/her immediate supervisor.
- Specific information regarding the confidentiality and non-retaliatory aspects of The Plan shall be communicated to employees and volunteers to encourage reporting of compliance concerns.
- There will not be any retaliation for a report made that is not knowingly false. Any threat of retaliation or retribution against the reporting employee or volunteer or network provider shall result in disciplinary action.
- The Compliance Officer documenting incoming reports shall maintain a log and all other forms of communication regarding compliance issues, the nature of the concern, investigations, and the results of the investigation.
- Steps shall be followed to maintain confidentiality to the extent reasonably possible regarding all report logs, reports, and other documentation maintained by the Compliance Officer. Individuals reporting concerns cannot be guaranteed confidentiality as a proper investigation by Region 3 and any investigation by the government may require additional information from and access to the individuals involved.
- Employees and volunteers are encouraged to ask for clarification if they have a question regarding the compliance standards, policies, or procedures.
- Supervisors/managers may be disciplined for failing to detect compliance violations in their departments, and any employee or volunteer may be disciplined for failing to detect compliance violations in their areas of responsibility, if reasonable diligence on their part would have led to the discovery of the problem and given Region 3 the opportunity to address the issues at the earliest possible time.

### **External Reporting System**

- Other stakeholders are encouraged to report, with an option to be anonymous, concerns regarding violations of compliance to the Region 3 Compliance Officer via telephone, email, and by postal service mail. The reporting options will be set out on the Region 3 website with a direct link to an email address that will be received by the Region 3 Compliance Officer.

### **Auditing and Monitoring**

- Regular audits of billings and documentation, including service standards documentation, will be performed internally by the Compliance Officer and/or designee(s).



- Network Providers' billings also will be included in the audit procedure. Audit deficiencies will be communicated to provider's billing department and the provider's executive director with a request for a written corrective action plan to be submitted to the Region 3 Compliance Officer.
- During an audit process, the Compliance Officer or designee(s) will perform follow-up procedures such as focused audits, retraining, procedural changes, work-flow studies, etc. to remedy any weaknesses identified. Such reporting units will be monitored periodically by the Compliance Officer or designee(s) to ensure subsequent compliance.
- Upon completion of each audit, the audit results and written comments regarding deficiencies noted during the audit will be delivered to the responsible supervisor/manager.
- The Compliance Officer will work with the supervisor/manager to determine the appropriate corrective action to take in response to compliance violations.

## **Investigations and Corrective Action**

### ***Investigation Obligation and Approach***

- The Compliance Officer, or designee(s), shall within three working days commence investigation of any allegations or reports of noncompliance with The Plan as well as REGION 3 policies and procedures.
- The Compliance Officer shall consult with legal counsel: (1) to obtain guidance on the appropriate scope and documentation of the investigative process if the nature of the alleged violation is such that liability, criminal, civil, or financial liability might result, and (2) to seek to preserve the attorney-client, and work product privilege to the extent the same are available under the law.
- Investigations shall be undertaken promptly and in a manner to determine whether a material violation has in fact occurred so Region 3 can take appropriate corrective action and fulfill any applicable reporting requirements.
- The investigation shall use techniques consistent with applicable laws and which support a rapid resolution of the situation.
- Due respect shall be shown for the rights of individuals who may be involved, either as sources of information or as possible violators. Employees and volunteers shall cooperate in all investigations related to compliance.
- If Region 3 determines the integrity of an investigation may be compromised because of the presence of employee(s) and or volunteer(s) under investigation, the Regional Administrator may remove such employee(s) and or volunteer(s) from their responsibilities pending completion of the investigation.
- If the object of a report is the Regional Administrator, the Compliance Officer shall make the report to the Regional Governing Board.

### ***Documentation and Record Retention***

Documentation of the alleged violation, interview notes, a description of the investigation process, any documents reviewed, reports of the investigation results, and corrective action plans shall be maintained by the Compliance Officer for seven years.

### ***Corrective Action***

- The Compliance Officer shall promptly report the results of investigations to the Regional

- Administrator and the Regional Governing Board.
- In situations where an investigation confirms a violation occurred, a corrective action plan shall be developed and immediate action shall be taken to correct the problem. Such actions may include return of improperly billed amounts to the appropriate funding source, remedial training of individuals involved, oral warnings, written reprimands, probation, suspension, or immediate termination depending upon the nature of the violation.
- Region 3 shall report any violations to funding source or government or law enforcement agencies, as required by law.
- If the investigation determines the actions in question were consistent with applicable laws then corrective action is not necessary and those involved in reporting the action will be provided with education/training as appropriate to avoid future confusion regarding the subject matter of the investigation.

## **Disciplinary Actions**

### ***Policy***

First and foremost, Region 3 expects all personnel including unpaid interns and mentors (herein after referred to as “personnel”) to abide by all standards, laws, regulations, policies and procedures whether they are Federal or State, and those of Region 3. However, in the event of a report of a compliance violation or suspected violation, appropriate disciplinary action shall be taken against any personnel who recklessly or intentionally fail to comply with Region 3’s Compliance Plan.

- Supervisors shall be responsible for implementation of The Plan with respect to personnel under their supervision.
- Disciplinary actions for failure to comply with the Compliance Plan, standards, laws, and policies and procedures shall apply to all personnel of Region 3.
- Region 3 has a policy of progressive discipline for infractions committed by personnel, except where immediate termination is justified due to the nature of the infraction.
- Disciplinary actions shall be consistently enforced to personnel who engage in activity which equates to noncompliance or misconduct, and for all personnel who are responsible for and fail to detect or report noncompliance or misconduct.
- Region 3 personnel shall be informed of the disciplinary standards for noncompliance and that certain actions prohibited by these guidelines may also violate criminal laws that may result in personal criminal prosecution and fines and/or imprisonment upon conviction.
- Applicable contracts and agreements with Region 3 network providers shall contain compliance requirements and provisions for appropriate sanctions should violations occur.
- Every disciplinary action related to The Plan must be reported to the Regional Administrator and Compliance Officer.
- Region 3 will neither knowingly employ nor contract with individuals or businesses that are listed by a federal or state agency as debarred, excluded, or ineligible for participation in federally or state funded programs.
- Personnel involved in a violation of The Plan may be subject to disciplinary action in accordance with Region 3’s policies and procedures and may include remedial education/training, oral warning, written warnings, work improvement plans, suspension, or immediate termination, depending upon the nature of the violation.
- Intentional, reckless, or repetitive noncompliance will subject personnel to significant disciplinary action up to and including termination.

- Pursuant to policy, if disciplinary actions are taken the documentation included in the personnel file are any (1) written warnings, (2) work improvement plans, and (3) written suspension(s) notice.
- Network providers involved in a confirmed violation may be subject to significant sanctions in accordance with contract terms and conditions, including termination of the contract when warranted.
- Retribution related to reporting of compliance concerns is prohibited as a provision of the False Claim Act and anyone who engages in such prohibited activity will be subject to disciplinary action.

### **Table of Revisions**

Reviewed/Revised by the Region 3 Compliance Committee: 10/28/14, 1/9/15, 11/19/16, 12/8/17, 8/27/18, 9/20/19, 10/07/20, 9/3/21

Approved by Leadership Team: 1/12/15

Adopted by the Regional Governing Board: 1/23/15



Behavioral Health Services

## Compliance Plan Receipt and Acknowledgement Form

1. I have received The Compliance Plan Reviewed/Revised dated 9/03/21 , and I have retained a copy for my guidance.
2. I represent that I understand that violation of The Compliance Plan and its Code of Conduct may be grounds for disciplinary action as described in The Plan.
3. I represent that I am in compliance with The Plan's requirements with the following possible exceptions: (include a statement concerning any personal business situation, conflict of interest, or other matter which should be disclosed). **(If none, state "none")**

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1. I agree to immediately report to the Compliance Officer any changes (e.g. those listed under question 3) that may potentially be a violation of The Plan.
4. I am aware of the following compliance issues (such as violations, questionable activities or practices or misuse/destruction/theft of property/equipment). **(If none, state "none")**

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6. I agree that I will report any suspected or known violation of The Plan to the Compliance Officer or my immediate supervisor.

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*To be placed in Employee's or Volunteer's Personnel File*