Section XI Subject A – 1a Established: (April 2007) Revised: August 2023



Corporate Compliance Plan

Corporate Compliance Officer

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389 Elmwood Avenue Buffalo, New York 14222

Revised August 14, 2023

CORPORATE COMPLIANCE PLAN

I. The Purpose of the Compliance Plan and Program.

Transitional Services, Inc. ("<u>TSI</u>") has adopted a Corporate Compliance Program (the "<u>Compliance Program</u>") to promote TSI's compliance with all applicable laws, regulations, and ethical standards. Our Compliance Program is described in this Corporate Compliance Plan (the "<u>Compliance Plan</u>"). This Plan provides guidance to all persons who are affected by our Compliance Risk Areas (as defined herein), including our employees, contractors, and Board of Directors ("<u>Board</u>") members on how to conduct themselves when working for TSI. The goals of TSI's Compliance Program are to:

- 1. Prevent fraud, waste, abuse, and other improper or unethical conduct;⁵
- 2. Detect any improper or unethical conduct at an early stage before it creates a substantial risk of liability for TSI; and
- 3. Respond swiftly to compliance problems through investigation, disciplinary, and corrective action.

All employees, contractors, and Board members of TSI have a personal obligation to assist in making the Compliance Program successful. Employees, contractors, and Board members are expected to:

- 1. Familiarize themselves with this Compliance Plan;
- 2. Review and understand the key compliance policies governing their particular functions and responsibilities;
- 3. Report any fraud, waste, abuse, or other improper or unethical conduct by using the methods described in this Compliance Plan;
- 4. Cooperate in any audits and investigations of TSI; and
- 5. Carry out their responsibilities in a manner that demonstrates a commitment to honesty, integrity, and compliance with the law.

¹ The "Corporate Compliance Plan" is this document that provides an overview of TSI's Corporate Compliance Program. The Corporate Compliance Program is TSI's implementation of the Compliance Plan and includes all of TSI's compliance activities.

² In this Compliance Plan, "employees" includes TSI's employees, Executive Director, senior administrators, managers, interns, and volunteers who are affected by TSI's Compliance Risk Areas, as defined herein.

³ In this Compliance Plan, "contractors" includes TSI's contractors, agents, subcontractors, and independent contractors who are affected by TSI's Compliance Risk Areas, as defined herein.

⁴ In this Compliance Plan, "Board of Directors and Board of Managers members" includes TSI's Board of Directors, Board of Managers, and corporate officers who are affected by TSI's Compliance Risk Areas, as defined herein.

⁵ Note that personnel issues are not compliance issues unless an employee believes that they have been intimidated or retaliated against for reporting a compliance issue, in which case they should contact the Corporate Compliance Officer. Other personnel issues should be reported to the Director of Human Resources.

The Compliance Plan and Compliance Program are reviewed at least annually to address new compliance challenges and maximize the use of TSI's resources, and to determine whether:

- 1. The Compliance Plan, Compliance Program, and Standards of Conduct have been implemented;
- 2. Employees, contractors, and Board members are following the policies, procedures, and Standards of Conduct;
- 3. The policies, procedures, and Standards of Conduct are effective; and
- 4. Any updates are required.

Employees, contractors, and Board members are encouraged to provide input on how the Compliance Program might be improved.

II. The Elements of the Compliance Program.

The Compliance Program is based on the compliance laws, regulations, and guidance from Federal and State governmental entities that TSI is required to comply with.⁶ The key elements of the Compliance Program, which are discussed in greater detail in the sections referenced below, are as follows:

- 1. General Responsibilities (Section III page 3);
- 2. Standards of Conduct and Key Policies and Procedures (Section IV page 6);
- 3. Corporate Compliance Officer and Committee (Section V page 8);
- 4. Compliance Training (Section VI page 11);
- 5. Process for Reporting Compliance Issues (Section VII page 11);
- 6. Internal Investigations (Section VIII page 13);
- 7. Corrective Action (Section IX Page 14);
- 8. Good faith Participation and Disciplinary Measures (Section X page 15);
- 9. Non-Retaliation and Non-Intimidation (Section XI page 15);
- 10. Government Audits and Investigations (Section XII page 16);
- 11. Routine Identification of Compliance Risks and Internal Compliance Audits (Section XIII page 17);
- 12. System for responding to Compliance Issues (Section XIV page 19)
- 13. Conflict of Interest Policy (Section XV page 20);

⁶ This includes Section 363-d of the New York Social Services Law, Part 521 of Title 18 of the New York State Codes, Rules and Regulations, and guidance issued by the New York State Office of Medicaid Inspector General ("OMIG") and the U.S. Department of Health and Human Services Office of Inspector General ("HHS-OIG").

- 14. Laws Regarding the Prevention of Fraud, Waste, and Abuse (Section XVI page 22)
- 15. Other related Policies and Procedures (Section XVII page 23)
- 16. Summary (Section XVIII -page 23).

III. General Responsibilities.

TSI recognizes that operating in an ethical and legal manner is not only an obligation of TSI, but is an obligation of <u>each</u> individual providing services on its behalf. The following responsibilities apply to employees, contractors, and Board members, respectively.

A. Responsibilities of Employees.

1. Duty to Know and Comply with Applicable Requirements.

Employees are obligated to know the following information, to the extent it is applicable to the employee's daily responsibilities:

- Medicaid, Medicare, and other payer and service delivery requirements;
- b. The prohibitions against fraud, waste, abuse, and improper conduct;
- c. TSI's Compliance Risk Areas, as defined herein; and
- d. TSI's Compliance Program.

Employees are also required to comply with TSI's *Exclusion Screening Policy*. (See Section XI Subject A-10) Employees, including the Corporate Compliance Officer and senior administrators, are obligated to attend periodic training related to their job responsibilities.

2. Duty to Report.

Employees are obligated to report instances of actual or possible fraud, waste, abuse, and other improper and unethical conduct to one of the following below. Employees can find more information in TSI's *Duty to Report Policy* and *Fraud Prevention Policy*. (See Employee Handbook, as well as Section XI Subject A- 4 and Subject 11 respectively)

- a. TSI's Compliance Hotline (716-553-4010);
- b. TSI's Corporate Compliance Officer by telephone (716-874-8182), email (CCO@tsiwny.org), inter-office mail, or mail to Attn: Compliance Office, Transitional Services, Inc., 389 Elmwood Avenue, Buffalo, New York 14222;
- c. The employee's supervisor or any supervisor or Program Supervisor;
- d. Any member of the Compliance Committee; or
- e. The Compliance Dropbox is located outside the front door of the Administrative Offices at 250 Cooper Ave Suite 110. Tonawanda, NY 14150;

Employees are encouraged to <u>first</u> report their concerns directly to TSI to allow TSI the opportunity to quickly address potential problems. Employees shall cooperate in internal and external audits or investigations regarding possible fraud, waste, abuse, or other improper or unethical conduct.

3. Duty to Respond.

Employees are obligated to respond appropriately to reports of actual or possible fraud, waste, abuse, or other improper or unethical conduct that are reported to them by other employees, contractors, and Board members. Such response should include following the procedure set forth in Sections VIII and IX of this Compliance Plan, below, relating to investigating and responding to actual or suspected noncompliance.

4. Duty to Promote Organizational Compliance.

Employees shall promote their commitment to compliance with Medicaid, , and other payer and service delivery requirements, and the prohibitions against fraud, waste, and abuse and other improper or unethical conduct. Employees shall cooperate with and assist the Corporate Compliance Officer in the performance of their responsibilities.

B. Responsibilities of Contractors.

1. Duty to Know and Comply with Applicable Requirements.

Contractors are obligated to know the following information, to the extent it is applicable to the service they provide to TSI:

- a. Medicaid, and other payer and service delivery requirements;
- b. The prohibitions against fraud, waste, abuse, and other improper and unethical conduct;
- c. TSI's Compliance Risk Areas, as defined herein; and
- d. TSI's Compliance Program.

Contractors are also required to comply with TSI's *Vendor Relations Policy*. (See Section XI Subject A-12), *Exclusion Screening Policy*. (See Section XI Subject A-10), and *Fraud Prevention Policy* (Employee Handbook, and Section XI Subject A-11)

2. Duty to Report.

Contractors shall report instances of actual or possible fraud, waste, abuse, and other improper or unethical conduct to the following below. Contractors can find more information in TSI's *Duty to Report Policy*. (See Section XI Subject A- 4)

- a. TSI's Compliance Hotline (716-553-4010); See page 15 of this document for additional details.
- b. TSI's Corporate Compliance Officer by telephone (716-874-8182), email (CCO@tsiwny.org), inter-office mail, or mail to Attn: Compliance Office, Transitional Services, Inc., 389 Elmwood Avenue, Buffalo, New York 14222;

- c. Any member of the Compliance Committee; or
- d. The Compliance Dropbox is located outside the front door of the Administrative Offices at 250 Cooper Ave Suite 110. Tonawanda, NY 14150.

C. Responsibilities of Board Members.

1. Duty to Know and Comply with Applicable Requirements.

Board members are obligated to attend annual compliance training, to review and certify adherence to the Compliance Plan, and to know the following information:

- a. The prohibitions against fraud, waste, abuse, and other improper or unethical conduct;
- b. TSI's Compliance Risk Areas, as defined herein; and
- c. TSI's Compliance Program.

2. Duty to Report.

Board members shall report instances of actual or possible fraud, waste, abuse, and other improper or unethical conduct in the following ways below. Board members can find more information in TSI's *Duty to Report Policy* (Section XI Subject A- 4) and *Fraud Prevention Policy*. (Employee Handbook, and Section XI Subject A- 11)

- a. TSI's Compliance Hotline (716-553-4010); See page 15 of this document for additional details.
- b. TSI's Corporate Compliance Officer by telephone (716-874-8182), email (CCO@tsiwny.org), inter-office mail, or mail to Attn: Compliance Office, Transitional Services, Inc., 389 Elmwood Avenue, Buffalo, New York 14222;
- c. Any member of the Compliance Committee;
- d. TSI's Executive Director; or
- e. The Compliance Dropbox is located outside the front door of the Administrative Offices at 250 Cooper Ave Suite 110. Tonawanda, NY 14150.

3. Duty to Promote Organizational Compliance.

Board members shall promote and demonstrate their commitment to TSI's Compliance Program. Board members are responsible for overseeing the development, implementation, operation, and evaluation of the Compliance Program. The Board shall periodically receive updates and reports from the Corporate Compliance Officer on compliance-related initiatives and activities.

4. Duty to Respond.

Board members are obligated to respond appropriately to reports or other indications of actual or possible fraud, waste, abuse, or other improper or unethical conduct. Such response should include ensuring that TSI follows the procedures set forth in Sections VIII and IX of this Compliance Plan, below, relating to investigating

and appropriately responding to reports of fraud, waste, abuse, or other improper or unethical conduct.

Board Members are obligated to cooperate in any internal or external audits or investigations by duly authorized internal or external auditors or investigators regarding possible fraud, waste, abuse, or other improper or unethical conduct.

IV. Standards of Conduct and Key Policies and Procedures.

A. Standards of Conduct.

These Standards of Conduct set forth the basic principles that guide TSI's decisions and actions. The Standards of Conduct are not intended to address every potential compliance issue that may arise in the course of TSI's business. All employees, contractors, and Board members are expected to familiarize themselves with the Code of Conduct and comply with it in carrying out their duties.

1. Comply With Applicable Laws.

All employees, contractors, and Board members must be aware of and comply with all laws and regulations applicable to their functions.

2. Conduct Affairs in Accordance With High Ethical Standards.

All employees, contractors, and Board members shall conduct themselves in accordance with high ethical standards of the community and their respective professions.

3. Conflicts of Interest.

All employees, contractors, and Board members must faithfully conduct their duties solely for the purpose, benefit, and interest of TSI and those individuals it serves. All employees, contractors, and Board members have a duty to avoid conflicts with the interests of TSI and may not use their positions and affiliations with TSI for personal benefit. Employees, contractors, and Board members must avoid not only actual conflicts of interest but also the appearance of conflicts of interest.

4. Provide High Quality of Care.

All employees and contractors are expected to provide high quality services and Board members shall support this standard of care. The care provided must be reasonable and necessary to the care of each individual and be provided by properly qualified individuals.

5. Provide Equal Opportunity For All Recipients.

TSI is committed to providing services for persons, without regard to age, creed, disability, religion, gender identity or expression, familial status, marital status, military status, national origin, race, color, sex, sexual orientation, human research subject, or source of payment. All employees, contractors, and Board members shall treat all individuals receiving services with respect and dignity. Discrimination in any form will not be tolerated.

6. Confidentiality.

Employees, contractors, and Board members have access to a variety of sensitive and proprietary information of TSI, the confidentiality of which must be protected. All employees, contractors, and Board members must ensure that confidential and proprietary information is properly maintained in accordance with laws, regulations, policies, and procedures, and that sensitive and proprietary information is not disclosed without proper authorization or a legal basis.

7. Integrity with Payer Sources.

Employees and contractors shall ensure that all requests for payment for services are reasonable, necessary, and appropriate, are issued by properly qualified persons, and are billed in the correct amount with appropriate supporting documentation.

8. Honesty and Integrity.

Employees, contractors, and Board members must be honest and truthful in all of their dealings. They must avoid doing anything that is, or might be, against the law.

9. Dignity and Respect.

Employees, contractors, and Board members shall respect and value each other, the diversity of TSI's work force, and the individuals they serve.

B. Key Policies and Procedures. (See Section XI Subject A for details)

The development and distribution of policies and procedures are essential components of an effective compliance program. All employees, contractors, and Board members are required to review and carry out their duties in accordance with the policies applicable to their functions and responsibilities. TSI's Compliance Program policies and procedures include the following:

- 1. Duty to Report Policy;
- 2. Non-Retaliation and Non-Intimidation Policy;
- 3. Compliance Training Policy;
- 4. Disciplinary Policy;
- 5. Compliance Investigations Policy;
- 6. Auditing and Monitoring Policy;
- 7. Vendor Relations Policy;
- 8. Exclusion Screening Policy;
- 9. Fraud Prevention Policy;
- 10. Conflict of Interest Policy;

- 11. Whistleblower Policy; and
- 12. Compliance Committee Charter.

V. Corporate Compliance Officer and Compliance Committee.

A. Corporate Compliance Officer.

The Corporate Compliance Officer is responsible for overseeing the implementation of the Compliance Program, and for carrying out the Compliance Program's day-to-day activities. The Compliance Officer (CO) at TSI, who also performs the function of Quality Management Director, is Mark Kraus. His contact information is:

Corporate Compliance email: CCO@tsiwny.org

Corporate Compliance Hotline Number: 716-533-4010. If one wishes to remain anonymous, first dial*67. See page 15 of this document for additional details.

Mailing Address: Transitional Services, Inc. 389 Elmwood Avenue, Buffalo, NY 14222.

Correspondence may also be placed in The Compliance Dropbox located outside the front door of the Administrative Offices at 250 Cooper Ave Suite 110. Tonawanda, NY 14150.

The Corporate Compliance Officer's duties include, but are not limited to, the following:

- 1. Overseeing and monitoring the adoption, implementation, and maintenance of the Compliance Plan and Compliance Program, including drafting, revising, and approving the written policies and procedures required, in accordance with agency Policy Development Procedures Section IX Subject Q-1);
- 2. Evaluating the effectiveness of the Compliance Plan and Compliance Program;
- 3. Reviewing and updating the Compliance Plan and compliance policies, and developing new compliance policies as needed;
- 4. Overseeing operation of the Compliance Hotline and promptly take appropriate action;
- 5. Evaluating, investigating, and independently acting on compliance-related questions, concerns, and complaints, including designing and coordinating internal investigations, and documenting, reporting, coordinating, and pursuing any resulting corrective action, including self-disclosure if appropriate;
- 6. Ensuring proper reporting of violations to duly authorized regulatory agencies as appropriate or required;
- 7. Working with the Director of Human Resources and others as appropriate to develop the compliance training program described in Section VI of this Compliance Plan, below;
- 8. Establishing and maintaining open lines of communication with members of the Compliance Committee, TSI's employees, managers, Board members, downstream and related entities, programs, and departments to ensure effective and efficient compliance policies and procedures;

- 9. Ensuring the distribution of information about the Compliance Program to contractors to the extent they are affected by this plan;
- 10. Conducting and facilitating internal audits to evaluate compliance and assess internal controls;
- 11. Responding to government audits and investigations and other inquiries;
- 12. Distributing compliance responsibilities throughout TSI;
- 13. Developing an annual work plan that outlines TSI's proposed strategies for meeting the applicable statutory and regulatory requirements for the coming year, including internal audits, with the assistance of Program Managers, Supervisors and the Compliance Committee;
- 14. Assisting TSI in establishing methods to improve its efficiency, quality of services, and reducing TSI's vulnerability to fraud, waste, and abuse;
- 15. Ensuring the Human Resources Department is screening prospective and current employees, contractors, and Board members
- 16. Maintaining appropriate Compliance Program documentation
- 17. Chairing the Corporate Compliance Committee.

The Corporate Compliance Officer reports directly to, and is accountable to, the Executive Director for reporting purposes. TSI will ensure that the Corporate Compliance Officer is allocated sufficient staff and resources to satisfactorily perform the responsibilities for the day-to-day operation of the Compliance Program based on TSI's Compliance Risk areas and organizational experience, and that the Corporate Compliance Officer and appropriate personnel have access to all records, documents, information, facilities, and employees, contractors, and Board members that are relevant to carrying out the Compliance Program responsibilities.

The Corporate Compliance Officer will report to the Board, Executive Director, and Compliance Committee on the progress of adopting, implementing, and maintaining the Compliance Program on a regular basis, and no less frequently then quarterly. In addition, the Corporate Compliance Officer shall prepare a written report to the Board annually describing the compliance efforts undertaken during the preceding year and identifying any changes necessary to improve the Compliance Program. In the event of suspected or actual improper conduct on the part of the Executive Director, the Corporate Compliance Officer is required to report such conduct directly to the Board.

B. <u>Compliance Committee.</u>

⁷ As used in this Compliance plan, "<u>organizational experience</u>" means TSI's: (1) knowledge, skill, practice, and understanding in operating its Compliance Program; (2) identification of any issues or risk areas in the course of its internal monitoring and auditing activities; (3) experience, knowledge, skill, practice, and understanding of its participation in the Medicaid Program and the results of any audits, investigations, or reviews it has been the subject of; or (4) awareness of any issues it should have reasonably become aware of for its categories of service.

The Compliance Committee is responsible for coordinating with the Corporate Compliance Officer to ensure that TSI is conducting its business in an ethical and responsible manner, consistent with its Compliance Program.

• The Corporate Compliance Officer shall be a member of the Compliance Committee and serve as the Chair of the Committee. The Executive Director shall appoint additional members to the Compliance Committee, to include the Associate Director, Director of Financial Services, Assistant Director of Financial Services, HR Manager, Intake Supervisor and the Quality Improvement Clerk, Quality Improvement Specialist, and EHR Analyst. Additional staff are assigned, as necessary.

. The Compliance Committee meets at least quarterly, and the duties, responsibilities, and members of the Compliance Committee are reviewed at least annually.

The Compliance Committee reports directly, and is accountable to, Corporate Compliance Officer, Executive Director and the Board, through the Corporate Compliance Officer. The Compliance Committee's functions include, but are not limited to, the following:

- 1. Review regular reports from the Corporate Compliance Officer on the implementation of the Compliance Program;
- 2. Identify Compliance Risk Areas, as defined herein;
- 3. Assist with the development of and approving the annual work plan carried out under the Compliance Program;
- 4. Coordinate with the Corporate Compliance Officer to draft, revise, and approve the written policies and procedures required, and to ensure that written policies, procedures, and the Standards of Conduct are current, accurate, and complete;
- 5. Approve the compliance training program provided to all employees, contractors, and Board members and re-evaluating as appropriate;
- 6. Coordinate with the Corporate Compliance Officer to ensure that all compliance training program requirements are completed in a timely manner;
- 7. Review reports from the Corporate Compliance Officer or designees of investigations of actual or suspected fraud, waste, abuse, or other improper or unethical conduct and any corrective action taken as a result of such investigations;
- 8. Coordinate with the Corporate Compliance Officer to ensure communication and cooperation by employees, contractors, and Board members on compliance-related issues, internal or external audits, or any other Compliance Program-related functions or activities;
- 9. Recommend and approving any changes to the Compliance Plan, Compliance Program, and compliance policies; and
- 10. Develop and evaluate strategies to promote compliance and detection of fraud, waste, abuse, and other improper or unethical conduct.

C. Board Members.

The Board has ultimate authority for governance of TSI, including oversight of TSI's Compliance Program. The Board will receive reports on the operation of the Compliance Program directly from the Corporate Compliance Officer at least quarterly. The Corporate Compliance Officer is authorized to bring matters directly to the Board at any time.

VI. Compliance Training.

TSI will take reasonable steps to ensure the Corporate Compliance Officer and all Board members, staff, volunteers and vendors receive effective training regarding the Code of Conduct and the Compliance Program. A refresher training will be held with the Board of Directors, management staff, and current staff annually in May. New affected individuals, to include Board members will be trained within 30 days of involvement with TSI. The CO's Annual Work Plan will include the plan for training.

. Training and education will be provided in a form and format that is accessible and understandable to all employees, contractors, and Board members, consistent with Federal and State language and other access laws, rules, or policies. Training will be scheduled by the Human Resources Manager and/or their designee as part of their responsibility to oversee general orientation for new employees and annual refresher training. The basic compliance training session shall cover the key elements of the Compliance Program.

Employees may also be required to participate in targeted compliance training sessions recommended by the Corporate Compliance Officer, Administrative Staff, or Program Supervisors. Targeted training is designed to focus on the specific compliance issues associated with an employee's functions.

After all compliance trainings, Board Members and employees must acknowledge in writing that they have received training and agree to fulfill their obligations under the Compliance Plan and policies.

Contractors must participate in compliance training either prior to contracting with TSI or within thirty (30) days of contracting with TSI. Such training may consist of TSI providing the contractor with TSI's Fraud Prevention Policy and a copy of the Compliance Plan or a link to access the Compliance Plan.

All individuals and entities required to receive training must be afforded an opportunity to ask questions and receive responses to such questions. Additional information on compliance training can be found in TSI's *Compliance Training Policy*. (Section XI Subject A- 2)

VII. Process for Reporting Compliance Issues.

TSI is committed to providing a prompt response to compliance issues reported or identified through audits. The agency is also committed to timely corrective action when issues are verified through investigation. If fraud, waste or abuse is discovered, the agency will report it to the NYS Office of Medicaid Inspector General and refund overpayments. In the case of the discoveries of errors made in billing, the agency will void the inaccurate claims and complete a Self-Disclosure to the Office of Medicaid Inspector General (OMIG), as required. As a consequence of compliance issues that arise, the agency may need to amend its policies and procedures to reduce the potential for reoccurrence.

TSI recognizes that an open line of communication between the CO, Corporate Compliance Committee and affected individuals is critical to the success of the Program. In addition to using the Corporate Compliance Hotline, staff is strongly encouraged to report incidents of potential fraud or to seek clarification regarding legal or ethical concerns directly to the CO. Reports made to a Corporate Compliance Committee member are reported by the member to the Compliance Officer.

To encourage reporting, the CO's photo, Corporate Compliance hotline (533-4010), mailing address: (Transitional Services, Inc. 389 Elmwood Ave, Buffalo, NY 14222) and email address (CCO@tsiwny.org) will be posted in every staff office. The names of the back-ups to the Compliance Officer will be included on the poster.

A. Reporting Options.

In accordance with its *Duty to Report Policy*, (Section XI Subject A- 1) TSI maintains open lines of communication for the reporting of actual or suspected improper or unethical conduct. Employees, contractors, and Board members shall promptly report any such conduct of which they become aware in any one of the following ways:

- 1. Through the Compliance Hotline at 716-553-4010; (See VII B below for details)
- 2. Notifying the Corporate Compliance Officer by telephone (716-874-8182), email (CCO@tsiwny.org), inter-office mail, or in writing to Attn: Compliance Officer, Transitional Services, Inc., 389 Elmwood Avenue, Buffalo, New York 14222;
- 3. Notifying a Supervisor or Program Manager;
- 4. Notifying any member of the Compliance Committee; or
- 5. In writing through the Compliance Dropbox located outside the front door of the Administrative Offices at 250 Cooper Ave Suite 110. Tonawanda, NY 14150.

These lines of communication are publicized by TSI, and will be made available to all employees, contractors, Board members, and service recipients who are Medicaid Program beneficiaries. Employees, contractors, and Board members may also use these reporting methods to ask compliance-related questions and communicate directly with the Corporate Compliance Officer.

A Corporate Compliance Violation Report is completed for each incident (TS 184). In addition, a log will be maintained of all reported issues whether written or by phone (TS 185). The CO will provide a written acknowledgment of a report within 5 business days. The investigation may include interviews and record/document review. See **Compliance Investigation Policy** for details (Section XI Subject A- 5)

B. Compliance Hotline.

The Compliance Hotline may be accessed by dialing 716-533-4010 to report a complaint. Employees, contractors, and Board members have the option of reporting a complaint on the Compliance Hotline anonymously by dialing *67 prior to dialing the Compliance Hotline number to disable the caller-identification function. Note: the *67 function will only work from landline or cellular telephones outside of the agency. The system will log the extension of calls made within TSI.

All messages are recorded. After the caller hangs up, the recording is sent simultaneously to the Corporate Compliance Officer, QI Specialist and EHR Analyst. The Corporate Compliance Officer (or designee) is responsible for reviewing all Compliance Hotline reports and assessing whether they warrant further investigation. This number is available seven days per week, twenty-four hours per day. This voice mailbox will be checked daily during Administrative Office Business Hours (Monday through Friday) to ensure prompt action.

Note: the Compliance Hotline is designed solely for the good faith reporting of fraud, waste, abuse, and other compliance problems; it is not intended for complaints relating to the terms and conditions of an employee's employment. Any such calls received will be directed the Human Resources Manager, the employee's Supervisor, or Program Manager.

However, if an employee believes that they were retaliated against or intimidated for reporting a compliance concern, the employee's complaint may be reported on the Compliance Hotline or to the employee's supervisor or Human Resources Manager. However, if the employee reports retaliation or intimidation on the Compliance Hotline, the employee should disclose their identity in order for the Corporate Compliance Officer to be able to investigate the matter.

C. Confidentiality.

TSI will ensure that the confidentially of persons reporting compliance issues is maintained unless the matter is subject to a disciplinary proceeding, referred to, or under investigation by the New York State Attorney General's Medicaid Fraud Control Unit ("MFCU"). OMIG, or law enforcement, or disclosure is required during a legal proceeding. All persons reporting compliance issues will be protected from non-intimidation and non-retaliation pursuant to TSI's *Non-Retaliation and Non-Intimidation Policy*. (Section XI Subject A- 7) Individuals are encouraged to identify themselves when making such reports so that an investigation can be conducted with a full factual background.

VIII. <u>Internal Investigations</u>.

All reports of fraud, waste, abuse, or other improper or unethical conduct, as well as any potential compliance problems identified in the course of internal auditing and monitoring, shall be promptly reviewed and evaluated by the Corporate Compliance Officer. The Corporate Compliance Officer determines, in consultation with other personnel and legal counsel of TSI, as necessary, whether the report warrants an internal investigation. If warranted, the Corporate Compliance Officer will coordinate the investigation and determine whether any outside advisors such as attorneys, accountants, or other advisors are needed. If the Corporate Compliance Officer and/or senior management determine it is in the best interests of TSI to keep the contents and/or findings of the investigation confidential and not subject to disclosure to third parties, the Corporate Compliance Officer shall arrange for legal counsel to conduct and/or supervise the investigation under the attorney-client and attorney work product privileges.

In accordance with TSI's *Compliance Investigations Policy* (Section XI Subject A- 6), employees, contractors, and Board members are required to cooperate fully in all audits and investigations. Although individuals have a right not to incriminate themselves, any employee who fails to provide such cooperation will be subject to disciplinary action, up to and including termination of employment. Any Board member who fails to provide such cooperation will be subject to sanctions as set forth in TSI's Bylaws and policies, as well as applicable laws and regulations. Any contractor who fails to provide such cooperation will be subject to termination of contract or the relationship.

Investigations consist of interviews and document reviews as necessary. The investigation of the compliance issue will be documented, including any alleged violations, a description of the investigation process, and copies of interview notes and any other documents essential for demonstrating that a thorough investigation of the issue was completed. Any disciplinary action taken and the corrective action implemented will also be documented.

All investigations will conclude with a written report of findings and recommendations for corrective action to correct the problem and prevent future occurrence. The written report may be subject to the attorney-client privilege if it is prepared by TSI's outside legal counsel. The Corporate Compliance Officer and/or legal counsel shall present the written report or a summary thereof to the Compliance Committee and Executive Director. The Corporate Compliance Officer shall oversee the corrective action to ensure it is completed. The Corporate Compliance Officer shall update the Compliance Committee on the status of internal investigations and corrective action.

The Corporate Compliance Officer shall work with the Executive Director, Board President in conjunction with corporate council, and outside advisors, as appropriate, to determine the type of disciplinary action to be taken and whether the conduct that is the subject of the investigation should be disclosed to law enforcement, regulatory agencies and/or payers. If the Compliance Officer credibly believes or credible evidence is identified that a State or Federal law, rule, or regulation has been violated, TSI will promptly report or self-disclose the violation to the appropriate governmental entity, such as the NYS Office of Medicaid Inspector General in the case of fraud, waste or abuse, and the agency will take the steps necessary to refund the overpayment. The Corporate Compliance Officer shall receive copies of any reports submitted to governmental entities.

If it is determined during the investigation that the employee intentionally did not comply with the standards of the facility or has broken the law, significant disciplinary reactions will result, including but not limited to oral or written warnings, suspension, termination, financial penalties or prosecution. Action may also be imposed against any employee who fails to cooperate in the investigation, who enabled the noncompliant behavior or was aware of the noncompliant behavior and did not report it.

IX. Corrective Action.

TSI is committed to taking prompt and thorough corrective action to address any fraud, waste, abuse, or other improper or unethical conduct identified through internal audits, investigations, reports by employees, or other means. The Corporate Compliance Officer is independently responsible for reviewing and approving all corrective action plans. The Corporate Compliance Officer may consult with the Executive Director and others regarding corrective action plans, as appropriate. However, the Corporate Compliance Officer is authorized to

recommend corrective action directly to the Board if the Corporate Compliance Officer believes, in good faith, that the Executive Director is not promptly acting upon such a recommendation or acting in the best interests of TSI. In cases involving clear fraud or illegality, the Corporate Compliance Officer also has the authority to order interim measures, such as a suspension of billing, while a recommendation of corrective action is pending. Corrective action may include, but not be limited to, any of the following steps:

- 1. Modifying TSI's existing policies, procedures, and/or business practices;
- 2. Providing additional training or other guidance to employees, contractors, or Board members;
- 3. Seeking interpretive guidance of laws and regulations from government agencies and/or legal counsel;
- 4. Disciplining employees, terminating contractors, and sanctioning Board members as described more fully in Section X of this Compliance Plan, below;
- 5. Notifying government agencies of improper conduct by employees, contractors, Board members, or others; and/or
- 6. Facilitating the reporting and returning overpayments or other funds to which TSI is not entitled to the appropriate government agency or payer, including through OMIG's voluntary self-disclosure program, if applicable.

X. Good Faith Participation and Disciplinary Measure.

To support and encourage good faith reporting and participation in the Corporate Compliance Program, TSI has disciplinary policies in effect to address violations of its compliance standards including TSI's *Disciplinary Policy*. (Section XI Subject A- 8) TSI's disciplinary standards are enforced fairly and consistently, and the same disciplinary actions apply to all levels of personnel.

Employees, contractors, and Board members are subject to disciplinary action in accordance with TSI's disciplinary policies when the employee, contractor, or Board Member:

- 1. Engages in, encourages, directs, facilitates, or permits improper or unethical conduct;
- 2. Fails to report actual or suspected improper or unethical conduct; or
- 3. Violates TSI's Compliance Plan or a TSI policy designed to detect or prevent improper or unethical conduct.

The Corporate Compliance Officer will promptly notify the Executive Director and Human Resources Manager of any improper or unethical conduct of an employee that may warrant discipline. The Human Resources Manager, in consultation with the Corporate Compliance Officer and Executive Director, will be responsible for determining the appropriate discipline for employees, in accordance with TSI's standard employment policies.

Contractor sanctions shall range from written admonition, financial penalties (if applicable), and in the most extreme cases, termination of the contractor's relationship with TSI. The Corporate Compliance Officer shall make a recommendation to the Executive Director with respect to such sanctions.

Board Member sanctions can range from written admonition to, in the most extreme cases, removal from the Board, in accordance with TSI's Bylaws and policies, as well as applicable laws and regulations. The Corporate Compliance Officer shall make a recommendation to the Board with respect to such sanctions.

The Compliance Officer will ensure that the written policies and procedures for taking disciplinary actions are published and disseminated to all employees, contractors, and Board members, and are incorporated into TSI's training plan, as set forth in its *Compliance Training Policy*. (Section XI Subject A- 2)

XI. Non-Retaliation and Non-Intimidation.

In accordance with TSI's *Non-Retaliation and Non-Intimidation Policy*, (Section XI Subject A- 7). *and Whistleblower Policy* (Section XI Subject A- 5) TSI prohibits intimidation and retaliation for good faith participation in the Compliance Program, including for reporting or threatening to report potential issues, investigating issues, and reporting to appropriate officials. No employee, contractor, or Board member who files a report of, or threatens to report, actual or suspected fraud, waste, abuse, or other improper or unethical conduct based on a reasonable belief will be subject to retaliation or intimidation by TSI in any form.

With respect to employees, prohibited retaliation and intimidation includes, but is not limited to, terminating, suspending, demoting, failing to consider for promotion, harassing, reducing the compensation of any employee, or adversely changing working conditions due to the employee's intended or actual filing of a report. Employees, contractors, and Board members should immediately report any perceived retaliation or intimidation to the Corporate Compliance Officer. However, if an employee has participated in a violation of law and/or a policy of TSI, TSI has the right to take appropriate action against them. While TSI requires its employees to report such concerns directly to TSI, certain laws provide that individuals may also bring their concerns to the government.

XII. Government Audits and Investigations.

A. Contact By Government Officials.

Employees, contractors, and Board members are required to cooperate fully in all government audits and investigations. If contacted by governmental investigators or auditors, all employees are expected to request the following information:

- 1. The name, agency, business telephone number, and address of all investigators or auditors;
- 2. The reason for the contact; and
- 3. If the contact is in person, the investigators' or auditors' business cards.

Employees shall direct the investigators or auditors to the Corporate Compliance Officer, and the Executive Director. If neither are available, the employee shall contact the Director of Financial Services.

B. Subpoenas and Document Requests.

Employees may receive subpoenas and other written or verbal requests for documents from government agencies. Subpoenas that are outside the normal course of TSI's business and written or verbal requests for

documents from government agencies must immediately be forwarded to the Corporate Compliance Officer, and the Executive Director. The Corporate Compliance Officer and Executive Director, in conjunction with TSI's legal counsel, will evaluate the subpoena or written request, and if appropriate, coordinate the production of documents to the government agency. It is TSI's policy to respond only to written requests for documents, and to cooperate with all appropriate written requests for documents from government agencies.

C. <u>Prohibition on Altering or Destroying Records.</u>

Employees, contractors, and Board members are strictly prohibited from altering, removing, destroying, or otherwise making inaccessible any paper or electronic documents, records, or information relating to the subject matter of any government subpoena, information request, or search warrant during the course of an audit or investigation. This prohibition shall override any record destruction that would otherwise be carried out under TSI's ordinary record retention and destruction policies. Employees, contractors, and Board members are also barred from directing or encouraging another person to alter, remove, destroy, or otherwise making inaccessible any such paper or electronic documents, records, or information.

D. Request For Interviews.

If an employee, contractor, or Board member receives a request from a government official to provide an interview in the course of a government audit or investigation, the individual should immediately contact the Corporate Compliance Officer and the Executive Director. The Corporate Compliance Officer and Executive Director will, as appropriate, seek advice from legal counsel. If the request is deemed to be appropriate, the Corporate Compliance Officer, Executive Director, or legal counsel will coordinate and schedule all interview requests with the relevant government agency.

Employees, contractors, and Board members are required to reasonably cooperate with government officials, including providing them with timely access to facilities and records upon reasonable notice, and being truthful and complete in their communications. Although individuals have the right not to incriminate themselves, any failure by an employee to provide cooperation or follow the requirements set forth in this Compliance Plan will be subject to disciplinary action up to and including termination of employment. Any Board member who fails to provide such cooperation will be subject to sanctions as set forth in TSI's Bylaws and policies, as well as applicable laws and regulations. Any contractor who fails to provide such cooperation may be subject to termination of its contract.

XIII. Routine Identification of Compliance Risks and Internal Compliance Audits.

TSI seeks to identify compliance issues at an early stage before they develop into significant legal problems by establishing a system for routine identification and evaluation of compliance risk areas. Additional information on risk identification and internal auditing can be found in the *Auditing and Monitoring Policy*. (Section XI Subject A- 6)

A. Identification of Key Risk Areas.

Risk areas are identified through regular compliance audits of a sampling of records focusing on those areas within TSI that have potential exposure to government enforcement actions, such as the accuracy and validity of service documentation, medical necessity, quality of care and billing. Auditing techniques may involve the monthly inspection of services records as they relate to medical billing, the investigation of invoice submissions that were disapproved, and if needed, interviews with employees involved in management, billing, resident care, service and case management, documentation and others. Contractual arrangements with vendors may also be reviewed, with several transactions being inspected to determine compliance.

Key risk areas include, but are not limited to, the following:8

- 1. Billing for individuals not actually served by TSI;
- 2. Billing for services rendered to individuals that are not properly documented;
- 3. Billing the same service twice;
- 4. Billing at a rate in excess of the rate permitted under the applicable program;
- 5. Billing for services that are knowingly also being billed to the government by another health care provider;
- 6. Failing to properly coordinate an individual's benefits among Medicare, Medicaid, and other third party payers;
- 7. Submitting cost reports that are inaccurate or incomplete;
- 8. Ordering unnecessary or excessive services;
- 9. Failing to properly document the provision of ordered services;
- 10. Determining if billing and payment system weaknesses are being identified and corrected as necessary;
- 11. Providing medically unnecessary services;
- 12. Failing to properly credential licensed health care professionals as required by NYS (OMH,DOH or Medicaid Regulations);
- 13. Employing an excluded individual or company or billing for services provided by an excluded individual or company;
- 14. Failing to properly oversee contractors, subcontractors, agents, and independent contractors; and
- 15. Ensuring compliance with applicable mandatory reporting obligations.

Additional risk areas can be identified through benchmark analysis that provides operational "snapshots" from a compliance perspective that identify the need for further assessment, study or investigation; staff exit

⁸ These risk areas include the ten (10) areas identified 18 § NYCRR 521-1.3(d) including: (1) billings; (2) payments; (3) ordered services; (4) medical necessity; (5) quality of care; (6) governance; (7) mandatory reporting; (8) credentialing; (9) contractor, subcontractor, agent, or independent contractor oversight; and (10) other risk areas that are or should reasonably be identified by TSI through its organizational experience.

interviews, review of external audits performed by governmental agencies, payers, and credentialing bodies, and through the Completion of an OMIG self-evaluation tool. Risk areas may also be identified by reviewing of the annual work plans and other resources from OMIG, HHS-OIG, and other regulatory agencies,

B. Performance of Internal Audits and Compliance Reviews.

TSI's Compliance Officer, in conjunction with the Compliance Committee, will develop audit tools and procedures for carrying out internal audits and routine monitoring, and develop a schedule of internal audits for the upcoming year. The audits will cover aspects of TSI's operations that pose a heightened risk of noncompliance, and will focus on TSI's Compliance Risk Areas. Ongoing audits will be performed by internal or external auditors who have expertise in State and Federal Medicaid Program requirements and applicable laws, rules, and regulations, or who have expertise in the subject area of the audit. TSI will also annually review the effectiveness of its Compliance Program, including a determination as to whether any revision or corrective action is required, on at least an annual basis. Any revisions to written policies and procedures related to the Compliance Program will be presented by the Corporate Compliance Officer to the Board for approval.

The Corporate Compliance Officer may contract with outside companies to perform certain auditing functions. The Corporate Compliance Officer will oversee the services provided by outside companies. If the Corporate Compliance Officer determines it is in the best interests of TSI to keep the contents and/or findings of an audit confidential, the Corporate Compliance Officer shall arrange for legal counsel to conduct and/or supervise the audit under the attorney-client privilege. A written report shall be prepared summarizing the design, implementation, and results of each audit, and recommending any corrective action. The corrective action shall be designed to reduce the potential for recurrence and ensure ongoing compliance with the requirements of Medicaid, and other payers.

The Corporate Compliance Officer shall present the audit findings or summaries thereof, as appropriate, to the Compliance Committee, Executive Director, and the Board. If requested by a Program Manager, the Corporate Compliance Officer will work with the Program Manager and unit Supervisor to implement any corrective action. The Program Manager shall report to the Corporate Compliance Officer when implementation is completed.

All employees and contractors are required to participate in and cooperate with internal and external audits as requested by the Corporate Compliance Officer. This includes assisting in the production of documents, explaining program operations or rules to auditors, and implementing any corrective action plans.

XIV. A System for Responding to Compliance Issues

TSI is committed to providing a prompt response to compliance issues reported or identified through audits. The agency is also committed to timely corrective action when issues are verified through investigation. If fraud, waste or abuse is discovered, the agency will report it to the NYS Office of Medicaid Inspector General and refund overpayments. In the case of the discoveries of errors made in billing, the agency will void the inaccurate claims. As a consequence of compliance issues that arise, the agency may need to amend its policies and procedures to reduce the potential for reoccurrence

When Errors Are Identified Through Internal Audits

When a compliance issue requires remedial action, a corrective plan of action will be developed by the staff responsible for the error, the Supervisors or managers responsible for the program or department. The plan will be submitted to the Corporate Compliance Committee for review and approval. The CO will continue to monitor the situation until it has been corrected. If it appears that the practice may lead to criminal or civil liability, the Executive Director and Board President will be notified and corporate counsel will be contacted. Further action will be determined in conjunction with their recommendations.

The action plan should ensure to the greatest extent possible that the specific issue is addressed and that similar problems will not occur at other programs.

When an External Entity Completes an Audit

The CO will be provided the results of all audits conducted by outside entities, such as OMIG, NYSOMH, NYSDOH, and lead Health Homes. The CO will then add to the Compliance Work Plan risk areas identified by the external auditors, and a plan for monitoring these risk areas to reduce the potential for re-occurrence.

Timeliness of Responses

The CO and any other staff assigned to investigate non-compliant behavior or errors will respond quickly to conduct the investigation, document it and make recommendations for disciplinary action, corrective actions, refunding of overpayments and changes to agency policies and procedures.

XV. Conflict of Interest Policies.

TSI seeks to protect its interests when it is considering a transaction with a Board member, employee, or officer that might also benefit the personal interests of those individuals. TSI's *Conflict of Interest Policy* (Section XI Subject A- 9) describes such conflicts and disclosure of conflicts in detail. Board members and officers owe a fiduciary duty of loyalty to TSI and must disclose any actual or potential conflicts of interest to TSI promptly upon learning of such conflict and on an annual basis.

XVI. Laws Regarding the Prevention of Fraud, Waste, and Abuse.

A. Federal Laws.

1. Civil and Criminal False Claims Act.

Any person who knowingly and/or willfully submits a false claim for payment to the Federal government shall be subject to civil or criminal penalties, including imprisonment, repayment, civil monetary penalties per claim, treble damages. and exclusion from participating in Medicare and Medicaid. Examples of prohibited conduct include billing for services not rendered, upcoding claims, double billing, misrepresenting services that were rendered, falsely certifying that services were medically necessary, making false statements to the government, failing to comply with conditions of payment, and failing to refund overpayments made by a Federal health care program. Individuals may be entitled to bring an action under this Act and share in a percentage of any recovery. However, if the action has no merit and/or is for the purpose of harassing TSI, the individual may have to pay TSI for its legal fees and costs.

2. Anti-Kickback Law.

Individuals/entities shall not knowingly offer, pay, solicit, or receive remuneration to induce referrals for items paid for by Medicare, Medicaid, or other Federal health care program unless the transaction fits within a safe harbor. This applies to any form of remuneration to induce or reward referrals for Federal health care program business (money, free or discounted items or services, overpayments or underpayments, waivers of copays or deductibles, low interest loans or subsidies, or business opportunities that are not commercially reasonable). Criminal or civil penalties include imprisonment, fines, treble damages, and exclusion from participating in Medicare/Medicaid.

3. Ethics in Patient Referrals Act ("Stark Law").

Physicians⁹ (including psychologists) or their family member who have an ownership or compensation relationship with an entity that provides "designated health services" shall not refer a patient in need of designated health services for which payment may be made under Medicare or Medicaid to such entities unless that ownership or compensation arrangement is structured to fit within a regulatory exception. Penalties include repayment of Medicare or Medicaid reimbursement and civil penalties.

4. Civil Monetary Penalties Law.

Individuals are prohibited from specified conduct including submitting false or fraudulent claims or misrepresenting facts, receiving or offering kickbacks, offering inducements to Medicare/Medicaid beneficiaries, offering inducements to physicians to limit services, submitting claims for services ordered by, or contracting with, an excluded entity, failing to report and repay an overpayment, and failing to grant government timely access. Penalties include fines, treble damages, denial of payment, repayment of amounts improperly paid, and exclusion from participating in the Medicare/Medicaid Programs.

B. State Laws.

New York has laws that are similar to the Federal laws listed above. These include the New York False Claims Act, False Statements Law, Anti-Kickback Law, Self-Referral Prohibition Law, Health Care and Insurance Fraud Penal Law, and anti-fee-splitting law. Individuals may be entitled to bring an action under the New York False Claims Act and share in a percentage of any recovery. However, if the action has no merit and/or is for the purpose of harassing TSI, the individual may have to pay TSI for its legal fees and costs.

C. Whistleblower Protections.

⁹ Physicians include medical doctors, doctors of osteopathy, psychologists, oral surgeons, dentists, podiatrists, optometrists, and chiropractors.

Designated health services are any of the following services, other than those provided as emergency physician services furnished outside of the United States, that are payable in whole or in part by the Medicare Program: (1) clinical laboratory services; (2) physical therapy, occupational therapy, and outpatient speech-language pathology services; (3) radiology and certain other imaging services; (4) radiation therapy services and supplies; (5) durable medical equipment and supplies; (6) parenteral and enteral nutrients, equipment, and supplies; (7) prosthetics, orthotics, and prosthetic devices and supplies; (8) home health services; (9) outpatient prescription drugs; and (10) inpatient and outpatient hospital services. See 42 CFR § 411.351.

1. Federal Whistleblower Protection.

An employee who is discharged, demoted, suspended, threatened, harassed, or discriminated against because of the employee's lawful acts conducted in furtherance of a False Claims Act action may bring an action against the employer. However, if the employee's action has no basis in law or fact or is primarily for harassment, the employee may have to pay TSI its fees and costs.

2. New York State Whistleblower Protection.

Employees who, in good faith, report a false claim are protected against discharge, demotion, suspension, threats, harassment, and other discrimination by their employer. Remedies include reinstatement, two (2) times back pay plus interest, litigation costs, and attorneys' fees.

3. New York State Labor Laws.

An employee is protected from retaliation or intimidation by an employer if the employee discloses or threatens to disclose an activity, policy, or practice of the employer that the employee reasonably believes is in violation of any law, rule, or regulation or reasonably believes poses a substantial and specific danger to the public health or safety, to a supervisor or public body. An employee is also protected from retaliation or intimidation by an employer if the employee provides information to, or testifies before, any public body conducting an investigation, hearing, or inquiry into any such activity, policy, or practice, or who objects to, or refuses to participate in, any such activity, policy, or practice. The employee's disclosure or threat of disclosure is only protected if the employee has made a good faith effort to notify the employer by bringing the activity, policy, or practice to the attention of a supervisor and has afforded the employer a reasonable opportunity to correct the activity, policy, or practice.

XVI. Other Related Policies and Procedures.

There are various additional personnel and program-related policies and procedures that are relevant to TSI's Compliance Plan and Compliance Program. These policies and procedures are contained in TSI's *Policy* and *Procedure Manual*.

A. Personnel-Related Policies and Procedures.

The following personnel-related policies and procedures contained in TSI's Employee Handbook and TSI Policy and Procedure Manual are relevant to TSI's Compliance Plan and Compliance Program:

Post Offer Procedures	Section III, Subject C
Confidentiality	Section III, Subject C
Harassment	Section III, Subject C
Rules of Conduct	Section III, Subject C
Tips Gratuities and Gifts	Section III. Subject C

Performance Reviews	Section III, Subject C	
Involuntary Separation from Employment	Section III, Subject C	
Identity Theft Prevention and Management	Section III, Subject C, Addendum B	
The Purpose of Performance Appraisals	Section III, Subject D-1	
The Advisory and Supervision File	Section III, Subject D-2	
Performance Appraisal Report	Section III, Subject D-3	
Staff Advancement Recommendation	Section III, Subject D-4	
Progressive Disciplinary Policy	Section III, Subject D-5	
Staff Orientation and Training	Section III, Subject F-1	
NYS Justice Center Code of Conduct	Section XII, Subject H-1	
Staff Code of Conduct	Employee Handbook and Appendix A	
Employee Sign Off Sheet TS183Section III, Subject C Employee Handbook Addendum C		

B. <u>Medicaid related Policies and Procedures.</u>

The following program-related policies and procedures contained in TSI's *Policy and Procedure Manual* are relevant to TSI's Compliance Plan and Compliance Program:

Medicaid Billing Client Information Section IV Subject A-1(c)
Physician Authorization & Re-Authorization Section IV Subject A-3(g)
General Reimbursement Standards Section IV Subject A-3(h)
Guidelines for Auditing Section IX Subject P-1
Review of Medicaid Remittances

XVII. Summary.

In summary, TSI has adopted this Compliance Plan with the goal of carrying out its activities in accordance with law and high ethical standards. The effectiveness of the Compliance Program depends on the active participation of all employees, contractors, and Board members in preventing, detecting, and appropriately responding to actual or suspected fraud, waste, abuse, or other improper or unethical conduct. Working together, we can make TSI a model of excellence and integrity in our community.

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