County of Ulster Standard Operating Procedures

"Compliance Program Procedures"



Jen Metzger County Executive

May 2012 (Revised December 2018) (Revised July 2019) (Revised November 2020) (Revised October 2021) (Revised September 2022) (Revised January 2023) (Revised November 2023)

Table of Contents

1.	Conflicts of Interest	Page	3
2.	Relevant Laws	Page	5
3.	Reporting of Compliance / Investigation Concerns and Non-Retaliation	Page	16
4.	Exclusion and Sanction Screening	Page	23
5.	Compliance Training	Page	30
6.	Internal Auditing and Monitoring	Page	35
7.	Response to Governmental Investigations	Page	40
8.	Obligations of Department Heads, Supervisors and Employees	Page	43
9.	Requirement for Prior Approval of Overtime and Compensatory Time	Page	46
10.	Policy Development, Approval, and Maintenance	Page	48

County Compliance Officer: Tom Gibney <u>tgbn@co.ulster.ny.us</u> (845) 340-8771

County Privacy Officer: Clint Johnson cjoh@co.ulster.ny.us (845) 340-3685

County Security Officer: Alan Macaluso <u>amac@co.ulster.ny.us</u> (845) 334-5564

County Compliance Hotline: The Bonadio Group (877)569-8777

Procedure: Compliance

Topic: Conflicts of Interest

Standard: Ethical conflicts of interest are the cause of violations of laws, regulations, policies and procedures. Ulster County government seeks to eliminate waste, fraud and abuse in its operations by giving clear guidance to its employees, contractors and vendors concerning expectations regarding conflicts of interest. The **Ulster County Ethics and Disclosure Law** was adopted in 2008 to address this issue. In 2012, the Ulster County Executive established **Standards of Conduct for Ulster County**.

- All Ulster County government employees, vendors and contractors are required to be familiar with and to conform to the County's policies and procedures concerning conflicts of interest, as set forward in the Ulster County Government Ethics and Disclosure Law and the Standards of Conduct for Ulster County.
- 2. All new employees shall be provided copies of or electronic access to these documents and shall sign a written attestation, or equivalent, that they have received or been given access to the documents.
- 3. All Ulster County government employees are required to seek clarification from supervisors if they have any questions concerning relevant laws, regulations, policies and procedures.
- 4. All Ulster County government vendors and contractors shall be informed of the Standards of Conduct for Ulster County, shall be provided electronic access to the document, and shall be provided opportunities to ask questions about the document.
- 5. The Ulster County government shall hold its employees, vendors and contractors strictly accountable for compliance with all relevant laws and regulations, as well as the County's policies and procedures concerning conflicts of interest.
- 6. On an annual basis, the Ulster County government shall provide updated training to its employees. In addition, vendors and contractors, by the terms of their contracts with the County, shall be responsible for ensuring that their employees and agents

receive annual compliance training updates regarding their policies and procedures concerning conflicts of interest.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Ulster County will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.

Procedure: Compliance

Topic: Relevant Laws

Standard: Ulster County government is committed to prompt, complete, and accurate billing for all services it provides, in accordance with applicable laws and regulations. The Federal False Claims Act and the New York False Claims Act were created to deter the submission of fraudulent claims by establishing severe criminal and civil punishment, including financial penalties for violations. In addition, these laws encourage parties to "blow the whistle" on suspected violators by providing financial incentives to do so, and also provide protections for whistleblowers against retaliation by their employers. Specifically, as to financial incentives, the Act allows private individuals to file lawsuits in state court, just as if they were state or local government parties, subject to various possible limitations imposed by the NYS Attorney General or a local government. If the suit eventually concludes with payments back to the government, the person who started the case can recover twenty-five to thirty percent of the proceeds if the government did not participate in the suit, or fifteen to twenty-five percent if the government did participate in the suit. The Deficit Reduction Act of 2006 requires employers to educate employees about these laws and their intent.

No employee, contractor, or agent shall engage in any arrangement or participate in such arrangement at the direction of another person, including any supervisor, which results in the submission of a false or misleading entry on claims forms or documentation of services that result in the submission of a false claim. This procedure explains the Federal False Claims Act (31 U.S.C. §§ 3729 – 3733), the Administrative Remedies for False Claims (31 USC Chapter 38 §§3801-3812), the New York State False Claims Act (State Finance Law §§187-194), and other New York State laws concerning false statements or claims and employee protections against retaliation.

It is the standard of Ulster County to prevent and detect fraud, waste, and abuse in County government.

- 1. Ulster County government's employees, contractors, and agents shall not knowingly make or submit any false or misleading entries on any claim forms.
- 2. Ulster County departments that bill Medicaid (and other third party payers) for health care services that they provide will perform billing activities in a manner consistent with the regulations and requirements of third party payers.
- Ulster County departments that bill Medicaid (and other third party payers) for health care services will conduct regular and routine reviews and internal tests of its billing systems to detect the intentional and/or unintentional generation of improper charges for its services.
- 4. Employees, contractors and other agents of Ulster County government shall be educated about the Federal and New York False Claims Acts, the Whistleblower provisions, and protections afforded "reporters" in order to promote full compliance with laws and regulations. Except where otherwise noted, it shall be the duty of contractors and vendors and other agents of Ulster County to educate themselves regarding the foregoing. Failure for contractors, vendors or other agents to conform to the foregoing may result in termination of the contractual relationship with the County.
- 5. Any employee, contractor, or agent who has any reason to believe that anyone is engaging in false billing practices or false documentation of services is required to report the practice.
- 6. Any form of retaliation against any employee who reports a perceived problem or concern in good faith and in accordance with procedure shall be investigated and, if determined to be factual, shall be prosecuted in accordance with the County's disciplinary policies and the law(s).
- 7. Any employee who commits or condones any form of retaliation will be subject to discipline, up to and including, termination.

This procedure applies to all employees, contractors, and agents of the County government:

Procedures:

- 1. Department heads are to keep apprised of all rules, laws and regulations that are relevant to their departmental billing functions and are to conform and maintain their billing procedures in complete conformity with all laws and regulations.
- 2. Department heads shall conduct regular and routine reviews and tests (e.g. regular auditing and monitoring) to ensure billing practices are in compliance with all rules, laws and regulations. Consistent with the testing schedule, all results of these tests/audits/monitoring are to be reported to the Compliance Officer.
- 3. The Ulster County Compliance Officer will maintain records of the outcomes of the reviews and tests of internal billing systems.
- 4. Ulster County departments that bill Medicaid (and other third party payers) for health care services will provide training to their employees, contractors and agents, as appropriate, regarding their systems for testing the effectiveness of clinical documentation and billing systems. The Compliance Officer will monitor to ensure that employees and agents receive training and information related to the contents of this procedure and the False Claims Act. The Compliance Officer will ensure that records are maintained to document the receipt of training/education.
- 5. Employees and contractors will be educated about the County's Whistleblower procedure. The Compliance Officer shall ensure that the reporting system works effectively.
- 6. The Compliance Officer is responsible for ensuring that all Whistleblower complaints are thoroughly investigated, that the County Attorney is appropriately involved, and that action is taken, as appropriate, regarding the outcome of every investigation.

Overview of Relevant Laws:

FEDERAL & NEW YORK STATUTES RELATING TO FILING FALSE CLAIMS I. FEDERAL LAWS 1) Federal False Claims Act (31 USC §§3729-3733) **II. NEW YORK STATE LAWS** A. CIVIL AND ADMINISTRATIVE LAWS 1) New York False Claims Act (State Finance Law §§187-194) 2) Social Services Law, Section 145-b - False Statements 3) Social Services Law, Section 145-c - Sanctions **B. CRIMINAL LAWS** 1) Social Services Law, Section 145 - Penalties 2) Social Services Law, Section 366-b - Penalties for Fraudulent Practices. 3) Social Services Law, Section 145-c - Sanctions 4) Penal Law Article 175 - False Written Statements 5) Penal Law Article 176 - Insurance Fraud 6) Penal Law Article 177 - Health Care Fraud **III. WHISTLEBLOWER PROTECTION** 1) Federal False Claims Act (31 U.S.C. §3730(h)) 2) New York State False Claim Act (State Finance Law §191) 3) New York State Labor Law, Section 740 4) New York State Labor Law, Section 741 I. FEDERAL LAWS 1) Federal False Claims Act (31 USC §§3729-3733) The False Claims Act ("FCA") provides, in pertinent part, as follows:

§ 3729. False claims

(a) Liability for certain acts.--

2) In general.--Subject to paragraph (2), any person who--

(A) knowingly presents, or causes to be presented, a false or fraudulent claim for payment or approval;

(B) knowingly makes, uses, or causes to be made or used, a false record or statement material to a false or fraudulent claim;

(C) conspires to commit a violation of subparagraph (A), (B), (D), (E), (F), or (G);

(D) has possession, custody, or control of property or money used, or to be used, by the

Government and knowingly delivers, or causes to be delivered, less than all of that money or property;

(E) is authorized to make or deliver a document certifying receipt of property used, or to be used, by the Government and, intending to defraud the Government, makes or delivers the receipt without completely knowing that the information on the receipt is true;

(F) knowingly buys, or receives as a pledge of an obligation or debt, public property from an officer or employee of the Government, or a member of the Armed Forces, who lawfully may not sell or pledge property; or

(G) knowingly makes, uses, or causes to be made or used, a false record or statement material to an obligation to pay or transmit money or property to the Government, or knowingly conceals or knowingly and improperly avoids or decreases an obligation to pay or transmit money or property to the Government, is liable to the United States

Government for a civil penalty of not less than \$5,000 and not more than \$10,000, as adjusted by the Federal Civil Penalties Inflation Adjustment Act of 1990 (28 U.S.C. 2461) note; Public Law 104-410, plus 3 times the amount of damages which the Government sustains because of the act of that person.

(2) Reduced damages .-- If the court finds that--

(A) the person committing the violation of this subsection furnished officials of the United States responsible for investigating false claims violations with all information known to such person about the violation within 30 days after the date on which the defendant first obtained the information;

(B) such person fully cooperated with any Government investigation of such violation; and

(C) at the time such person furnished the United States with the information about the violation, no criminal prosecution, civil action, or administrative action had commenced under this title with respect to such violation, and the person did not have actual knowledge of the existence of an investigation into such violation, the court may assess not less than 2 times the amount of damages which the Government sustains because of the act of that person.

(3) Costs of civil actions.--A person violating this subsection shall also be liable to the United States Government for the costs of a civil action brought to recover any such penalty or damages.

(b) Definitions.--For purposes of this section--

(1) the terms "knowing" and "knowingly" --

(A) mean that a person, with respect to information--

(i) has actual knowledge of the information;

(ii) acts in deliberate ignorance of the truth or falsity of the information; or

(iii) acts in reckless disregard of the truth or falsity of the information; and

(B) require no proof of specific intent to defraud;

(2) the term "claim"--

(A) means any request or demand, whether under a contract or otherwise, for money or property and whether or not the United States has title to the money or property, that--

(i) is presented to an officer, employee, or agent of the United States; or

(ii) is made to a contractor, grantee, or other recipient, if the money or property is

to be spent or used on the Government's behalf or to advance a Government

program or interest, and if the United States Government-

(I) provides or has provided any portion of the money or property requested or demanded; or

(II) will reimburse such contractor, grantee, or other recipient for any portion of the money or property which is requested or demanded; and

(B) does not include requests or demands for money or property that the Government has paid to an individual as compensation for Federal employment or as an income subsidy with no restrictions on that individual's use of the money or property;

(3) the term "obligation" means an established duty, whether or not fixed, arising from an express or implied contractual, grantor-grantee, or licensor-licensee relationship, from a fee-based or similar relationship, from statute or regulation, or from the retention of any overpayment; and(4) the term "material" means having a natural tendency to influence, or be capable of influencing, the payment or receipt of money or property.

(c) Exemption from disclosure.--Any information furnished pursuant to subsection (a)(2)

shall be exempt from disclosure under section 552 of title 5.

(d) Exclusion.--This section does not apply to claims, records, or statements made under the Internal Revenue Code of 1986.

While the False Claims Act imposes liability only when the claimant acts "knowingly," it does not require that the person submitting the claim have actual knowledge that the claim is false. A person who acts in reckless disregard or in deliberate ignorance of the truth or falsity of the information, also can be found liable under the Act. 31 U.S.C. 3729(b).

In sum, the False Claims Act imposes liability on any person who submits a claim to the federal government, or submits a claim to entities administering government funds, that he or she knows (or should know) is false. An example may be a physician who submits a bill to Medicare for medical services she knows she has not provided. The False Claims Act also imposes liability on an individual who may knowingly submit a false record in order to obtain payment from the government. An example of this may include a government contractor who submits records that he knows (or should know) are false and that indicate compliance with certain contractual or regulatory requirements. The third area of liability includes those instances in which someone may obtain money from the federal government to which he may not be entitled, and then uses false statements or records in order to retain the money. An example of this so-called "reverse false claim" may include a hospital which obtains interim payments from Medicare or Medicaid throughout the year, and then knowingly files a false cost report at the end of the year in order to avoid making a refund to

the Medicare or Medicaid program. In addition to its substantive provisions, the FCA provides that private parties may bring an action on behalf of the United States. 31 U.S.C. 3730 (b). These private parties, known as "qui tam relators," may share in a percentage of the proceeds from an FCA action or settlement. Section 3730(d)(1) of the FCA provides, with some exceptions, that a qui tam relator, when the Government has intervened in the lawsuit, shall receive at least 15 percent but not more than 25 percent of the proceeds of the FCA action depending upon the extent to which the relator substantially contributed to the prosecution of the action. When the Government does not intervene, section 3730(d)(2) provides that the relator shall receive an amount that the court decides is reasonable and shall be not less than 25 percent and not more than 30 percent.

3) Administrative Remedies for False Claims (31 USC Chapter 38. §§ 3801 – 3812)

This statute allows for administrative recoveries by federal agencies. If a person submits a claim that the person knows is false or contains false information, or omits material information, the agency receiving the claim may impose a penalty of up to \$5,000 for each claim. The agency may also recover twice the amount of the claim. Unlike the False Claims Act, a violation of this law occurs when a false claim is submitted rather than when it is paid. Also unlike the False Claims Act, the determination of whether a

claim is false, and the imposition of fines and penalties is made by the administrative agency, not by prosecution in the federal court system.

II. NEW YORK STATE LAWS

New York State False Claim Laws fall under the jurisdiction of both New York's civil and administrative laws as well as its criminal laws. Some apply to recipient false claims and some apply to provider false claims. The majority of these statutes are specific to healthcare or Medicaid. Yet some of the "common law" crimes apply to areas of interaction with the government and so are applicable to health care fraud and will be listed in this section.

A. CIVIL AND ADMINISTRATIVE LAWS

1) New York False Claims Act (State Finance Law §§187-194)

The New York False Claims Act is similar to the Federal False Claims Act. It imposes

penalties and fines upon individuals and entities who knowingly file false or fraudulent claims for payment from any state or local government, including health care programs such as Medicaid. It also has a provision regarding reverse false claims similar to the federal FCA such that a person or entity will be liable in those instances in which the person obtains money from a state or local government to which he may not be entitled, and then uses false statements or records in order to retain the money. The penalty for filing a false claim is six to twelve thousand dollars per claim plus three times the amount of the damages which the state or local government sustains because of the act of that person. In addition, a person who violates this act is liable for costs, including attorneys' fees, of a civil action brought to recover any such penalty.

Specifically, as to financial incentives, the Act allows private individuals to file lawsuits in state court, just as if they were state or local government parties, subject to various possible limitations imposed by the NYS Attorney General or a local government. If the suit eventually concludes with payments back to the government, the person who started the case can recover twenty-five to thirty percent of the proceeds if the government did not participate in the suit, or fifteen to twenty-five percent if the government did participate in the suit.

2) Social Services Law, Section 145-b - False Statements

It is a violation to knowingly obtain or attempt to obtain payment for items or services furnished under any Social Services program, including Medicaid, by use of a false statement, deliberate concealment or other fraudulent scheme or device. The state or the local Social Services district may recover three times the amount incorrectly paid. In addition, the Department of Health may impose a civil penalty of up to ten thousand dollars per violation. If repeat violations occur within five years, a penalty of up to thirty thousand dollars per violation may be imposed if the repeat violations involve more serious violations of Medicaid rules, billing for services not rendered, or providing excessive services.

3) Social Services Law, Section 145-c - Sanctions

If any person applies for or receives public assistance, including Medicaid, by intentionally making a false or misleading statement, or intending to do so, the needs of the individual or that of his family shall not be taken into account for the purpose of determining his or her needs or that of his family for six months if a first offense, for twelve months if a second offense (or if benefits wrongfully received are at least one thousand dollars but not more than three thousand nine hundred dollars), for eighteen months if a third offense (or if benefits wrongfully received are in excess of three thousand nine hundred dollars), and five years for any subsequent occasion of any such offense.

B. CRIMINAL LAWS

1) Social Services Law, Section 145 - Penalties

Any person who submits false statements or deliberately conceals material information in order to receive public assistance, including Medicaid, is guilty of a misdemeanor.

2) Social Services Law, Section 366-b - Penalties for Fraudulent Practices.

a. Any person who obtains or attempts to obtain, for himself or others, medical assistance by means of a false statement, concealment of material facts, impersonation or other fraudulent means is guilty of a class A misdemeanor.

b. Any person who, with intent to defraud, presents for payment a false or fraudulent claim for furnishing services, knowingly submits false information to obtain greater Medicaid compensation, or knowingly submits false information in order to obtain authorization to provide items or services is guilty of a class A misdemeanor.

3) Penal Law Article 155 - Larceny

The crime of larceny applies to a person who, with intent to deprive another of his property, obtains, takes or withholds the property by means of trick, embezzlement, false pretense, false promise, including a scheme to defraud, or other similar behavior. This statute has been applied to Medicaid fraud cases.

a. Fourth degree grand larceny involves property valued over \$1,000. It is a class E felony.

b. Third degree grand larceny involves property valued over \$3,000. It is a class D felony.

c. Second degree grand larceny involves property valued over \$50,000. It is a class C felony.

d. First degree grand larceny involves property valued over \$1 million. It is a class B felony.

4) Penal Law Article 175 - False Written Statements

Four crimes in this Article relate to filing false information or claims and have been applied in Medicaid fraud prosecutions:

a. §175.05 - Falsifying business records involves entering false information, omitting material information or altering an enterprise's business records with the intent to defraud. It is a class A misdemeanor.

b. §175.10 - Falsifying business records in the first degree includes the elements of the §175.05 offense and includes the intent to commit another crime or conceal its omission. It is a class E felony.

c. §175.30 - Offering a false instrument for filing in the second degree involves presenting a written instrument, including a claim for payment, to a public office knowing that it contains false information. It is a class A misdemeanor.

d. §175.35 - Offering a false instrument for filing in the first degree includes the elements of the second degree offense and must include an intent to defraud the state or a political subdivision. It is a class E felony.

5) Penal Law Article 176 - Insurance Fraud

This law applies to claims for insurance payments, including Medicaid or other health

insurance, and contains six crimes

a. Insurance Fraud in the 5th degree involves intentionally filing a health insurance claim knowing that it is false. It is a class A misdemeanor.

b. Insurance fraud in the 4th degree is filing a false insurance claim for over \$1,000. It is a class E felony.

c. Insurance fraud in the 3rd degree is filing a false insurance claim for over \$3,000. It is a class D felony.

d. Insurance fraud in the 2nd degree is filing a false insurance claim for over \$50,000. It is a class C felony.

e. Insurance fraud in the 1st degree is filing a false insurance claim for over \$1million. It is a class B felony.

f. Aggravated insurance fraud is committing insurance fraud more than once. It is a class D felony.

6) Penal Law Article 177 - Health Care Fraud

This statute, enacted in 2006, applies to health care fraud crimes. It was designed to address the specific conduct by health care providers who defraud the system including any publicly or privately funded health insurance or managed care plan or contract, under which any health care item or service is provided. Medicaid is considered to be a single health plan under this statute. This law primarily applies to claims by providers for insurance payment, including Medicaid payment, and it includes six crimes.

a. Health care fraud in the 5th degree – a person is guilty of this crime when, with intent to defraud a health plan, he or she knowingly and willfully provides materially false information or omits material information for the purpose of requesting payment from a health plan. This is a class A misdemeanor.

b. Health care fraud in the 4th degree – a person is guilty of this crime upon filing such false claims on more than one occasion and annually receives more than three thousand dollars. This is a class E felony.

c. Health care fraud in the 3rd degree – a person is guilty of this crime upon filing such false claims on more than one occasion and annually receiving over ten thousand dollars. This is a class D felony.

d. Health care fraud in the 2nd degree - a person is guilty of this crime upon filing such false claims on more than one occasion and annually receiving over fifty thousand dollars. This is a class C felony.

e. Health care fraud in the 1st degree - a person is guilty of this crime upon filing such false claims on more than one occasion and annually receiving over one million dollars. This is a class B felony.

III. WHISTLEBLOWER PROTECTION

1) Federal False Claims Act (31 U.S.C. §3730(h))

The Federal False Claims Act provides protection to qui tam relators (individuals who

commence a False Claims action) who are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the FCA. 31 U.S.C. 3730(h). Remedies include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys' fees.

2) New York State False Claim Act (State Finance Law §191)

The New York State False Claim Act also provides protection to qui tam relators (individuals who commence a False Claims action) who are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the Act. Remedies include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay, and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorneys' fees.

3) New York State Labor Law, Section 740

An employer may not take any retaliatory action against an employee if the employee

discloses information about the employer's policies, practices or activities to a regulatory, law enforcement or other similar agency or public official. Protected disclosures are those that assert that the employer is in violation of a law that creates a substantial and specific danger to the public health and safety or which constitutes health care fraud under Penal Law §177 (knowingly filing, with intent to defraud, a claim for payment that intentionally has false information or omissions). The employee's disclosure is protected only if the employee first brought up the matter with a supervisor and gave the employer a reasonable opportunity to correct the alleged violation. If an employer takes a retaliatory action against the employee, the employee may sue in state court for reinstatement to the same, or an equivalent position, any lost back wages and benefits and attorneys' fees. If the employer is a health provider and the court finds that the employer's retaliatory action was in bad faith, it may impose a civil penalty of \$10,000 on the employer.

4) New York State Labor Law, Section 741

A health care employer may not take any retaliatory action against an employee if the employee discloses certain information about the employer's policies, practices or activities to a regulatory, law enforcement or other similar agency or public official. Protected disclosures are those that assert that, in good faith, the employee believes constitute improper quality of patient care. The employee's disclosure is protected only if the employee first brought up the matter with a supervisor and gave the employer a reasonable opportunity to correct the alleged violation, unless the danger is imminent to the public or patient and the employee believes in good faith that reporting to a supervisor would not result in corrective action. If an employer takes a retaliatory action against the employee, the employee may sue in state court for reinstatement to the same, or an equivalent position, any lost back wages and benefits and attorneys' fees. If the employer is a health provider and the court finds that the employer's retaliatory action was in bad faith, it may impose a civil penalty of \$10,000 on the employer.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all affected individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

County will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.

Procedure: Compliance

Topic:Reporting and Investigation of Compliance Concernsand Non-Retaliation

Purpose:

Ulster County (sometimes referred to as "County" or "the County") recognizes that a critical aspect of its Compliance Program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to Federal and State requirements, the County's ethical and business policies, and fraud, waste, and abuse prevention.

To promote this culture, Ulster County has established processes to encourage effective communication and the reporting of compliance questions, issues, concerns, or events that will result in a thorough investigation and appropriate remedial actions.

For purposes of this Policy, the term "Affected Individuals" includes employees, volunteers, interns, appointees, Legislators, County officials, business partners, vendors, agents, contractors.

Standards:

It is the Policy of Ulster County to maintain a formal confidential and anonymous compliance reporting process to encourage the reporting of any known or suspected fraud, waste, and abuse; illegal or unethical acts; actual or suspected violations of Federal or State laws and regulations; actual or suspected violations of the Standards of Conduct, the Compliance Program, and Ulster County's policies and procedures; improper acts in the delivery or billing of services; and other wrongdoing (collectively referred to as "compliance concerns" for purposes of this Policy).

It is the Policy of Ulster County to fully and promptly investigate all reports of any compliance concerns and take appropriate remedial and/or disciplinary action upon completion of the investigation.

Regulatory Reference:

Social Service Law 363-D

18 NYCRR Part 521

Procedures:

Reporting Process:

- 1. All Affected Individuals have an affirmative duty and responsibility to promptly report any compliance concerns.
- 2. An "open-door policy" will be maintained at all levels of Management to encourage the reporting of problems and compliance concerns through normal business channels and appropriate levels of the County for timely and effective resolution. The County recognizes there may be situations where such reporting is impractical or inappropriate. In those instances, direct access to various levels of Management may be more appropriate.
- 3. Ulster County encourages all Affected Individuals, service recipients, vendors, and any party conducting business with it to promptly communicate questions, issues, or compliance concerns through any one of the following means:
 - Direct written or oral communication by fax, mail, email, telephone, or personal contact to the immediate supervisor, a member of Management, the County Executive, a member of the Compliance Committee, or the Compliance Officer.
 - Confidentially or anonymously to the Compliance Officer through the Compliance Hotline (1-877-569-8777). If the reporter elects to make the report anonymously to the Compliance Officer, no attempt will be made to trace the source of the report or identify the person making the report.
- 4. If the compliance concern is about the Compliance Officer, the County Executive is to be notified.
- 5. If the Compliance Officer receives a concern related to the County Executive, the Compliance Officer shall report such information to the Chair of the Legislature.
- 6. If a Legislative member has knowledge of a compliance concern as defined by this Policy, the Compliance Officer and the County Executive are to be notified. If there is a concern about the County Executive, the Compliance Officer and the Chair of the Legislature, Legislative members are to be notified.

- 7. Employees have the same obligations for reporting suspected compliance concerns committed by the County's vendors or contractors.
- 8. Affected Individuals cannot exempt themselves from the consequences of their own misconduct by reporting the issue, although self-reporting may be considered in determining the appropriate course of action.
- 9. Strict confidentiality regarding the reporting of compliance concerns will be maintained unless the matter is subject to a disciplinary proceeding, referred to or under investigation by Federal, State, or local law enforcement, or should the disclosure be required during a legal proceeding. Those staff assigned to complete any investigation of a compliance concern shall treat the investigation as entirely confidential and shall reveal no details or discuss the content or status of the investigation with County staff or any other party except as may be directed by the Compliance Officer or legal counsel. Failure of staff to respect the confidentiality of any investigation of a compliance concern may be grounds for disciplinary action up to and including termination of employment.
- 10. The Compliance Officer will ensure that all reports of compliance concerns as defined by this Policy are recorded and tracked on the Compliance Issue Log.
- 11. Any member of Management who receives a report of a compliance concern will immediately notify the Compliance.
- 12. Knowledge of a violation or potential violation of this Policy must be reported directly to the Compliance Officer or the Compliance Hotline (1-877-569-8777).
- 13. Affected Individuals who report issues or concerns that are unrelated to the Compliance Program shall be redirected to the appropriate department or party. In instances where the Affected Individual seeks confidentiality or reports anonymously, the Compliance Officer shall redirect the report to the appropriate department or party while maintaining the request for confidentiality/anonymity.
- 14. Ulster County strictly prohibits its Management, employees, and Legislative members from engaging in any act, conduct, or behavior that results in, or is intended to result in, retribution, retaliation or intimidation (hereafter, collectively referred to as "retaliation") against any party for reporting compliance concerns as defined by this Policy.
- 15. If an Affected Individual believes in good faith that they have been retaliated against for reporting a compliance concern or for participating in any investigation of such a report, the retaliation should be immediately reported to the Compliance Officer or the Compliance Hotline (1-877-569-8777). The report should include a thorough account of the incident(s) and should include the names, dates, specific

events, the names of any witnesses, and the location or name of any document that supports the alleged retaliation.

- 16. The Compliance Officer will ensure that the means for reporting actual or suspected compliance concerns to the Compliance Officer are communicated to all Affected Individuals and service recipients. The Compliance Officer's contact information and Compliance Hotline number (1-877-569-8777) will be published on the County's website and visibly posted in a manner consistent with employee notification in locations frequented by County employees.
- 17. The Compliance Officer's contact information and the Compliance Hotline number (1-877-569-8777) shall be provided to all Medicaid recipients of service.

Investigation and Resolution:

- 1. It is the responsibility of the Compliance Officer to conduct or oversee the conduction of all internal investigations involving compliance concerns and shall have the authority to engage legal counsel or other consultants, as needed. The Compliance Officer, in conjunction with the County Executive and legal counsel, will consider whether the investigation should be conducted under attorney privilege.
- Before conducting an investigation of any compliance concern as defined by this Policy, the Compliance Officer shall ensure a full understanding of the relevant laws, regulations, and government issuances. If a reported violation is related to improper billing, the Compliance Officer will consider the need for an audit of billing practices and determine the scope of interviews.
- 3. If deemed appropriate, the Compliance Officer will recommend the cessation of internal activities that may be the cause of, or contribute to, the alleged non-compliance.
- 4. The Compliance Officer will determine the scope of the reported compliance concern and make a determination regarding the course of action, including the investigation process and notifications to be made.
- 5. Upon report notice or discovery of an alleged compliance concern, the Compliance Officer will conduct an initial inquiry into the alleged situation. The purpose of the initial inquiry is to determine whether there is sufficient evidence of possible non-compliance to warrant further investigation. The initial inquiry may include documentation review, interviews, audit, or other investigative techniques. The

Compliance Officer should: (a) conduct a fair impartial review of all relevant facts; (b) restrict the inquiry to those necessary to resolve the issues; and (c) conduct the inquiry with as little visibility as possible while gathering pertinent facts relating to the issue.

- 6. If, during the initial inquiry, the Compliance Officer determines that there is sufficient evidence of possible noncompliance with any criminal, civil, or administrative law to warrant further investigation, the issue should be turned over to internal or external legal counsel. A memorandum to this effect should be directed to legal counsel with a copy to the County Executive. The Compliance Officer or County Executive will immediately make arrangements to retain legal counsel and no further internal discussion or investigative activity shall take place regarding the report except as directed by legal counsel. Once legal counsel is retained, it will be determined whether legal counsel or the Compliance Officer will be leading the investigation.
- All documents produced during the investigation by or under legal counsel to be possibly protected from disclosure should include the notation: "Privileged and Confidential Document; Subject to Attorney-Client Privileges; Attorney Directed Work Product."
- 8. For investigations that do not involve legal counsel, the Compliance Officer will determine which personnel possess the requisite skills to examine the particular issue(s) and will assemble a team of investigators, as needed. The Compliance Officer shall work with the investigation team to develop a strategy for reviewing and examining the facts surrounding the possible violation. The Compliance Officer will also decide whether the County's has sufficient internal resources to conduct the investigation or whether external resources are necessary. If it is determined that additional resources are needed, the Compliance Officer will work with the County Executive to secure such resources.
- 9. The Compliance Officer will be responsible for the investigation of and follow-up on any reported retaliation against a party for reporting a compliance concern or participating in the investigation of a compliance concern. The Compliance Officer will report the results of an investigation into suspected retaliation to the County Executive, the Compliance Committee, and the Legislature.
- 10. If at any time, during an investigation, it is determined that the situation warrants the retention of legal counsel, the Compliance Officer will immediately suspend the investigation and follow the process in Investigations and Resolution found above.
- 11. The Compliance Officer, in consultation with the Compliance Committee and, where appropriate, the Legislature, may undertake measures during an

investigation of a compliance concern to protect the integrity of the investigation, prevent the destruction of documents or other evidence relevant to the investigation, and respect the due process rights of involved parties. Measures may include, but are not limited to, reassignment or placement on administrative leave until the investigation is complete.

- 12. The Compliance Officer will track the investigation, responsible parties, and due dates. The resolution of the investigation will be recorded on the Compliance Issue Log.
- 13. The Compliance Officer should ensure that the following objectives are accomplished for each investigation:
 - The complainant or reporter, if known, is fully debriefed;
 - Appropriate internal parties are notified;
 - The cause of problem, desired outcome, affected parties, applicable guidelines, and possible regulatory or financial impact are identified;
 - A complete list of findings and recommendations are provided;
 - The necessary corrective action measures (e.g., policy changes, operational changes, system changes, personnel changes, discipline, training/education) are identified; and
 - The investigation is documented.
- 14. Upon receipt of the results of the investigation, depending upon the scope and severity of the identified violations, the Compliance Officer may consult with legal counsel, the County Executive, and/or the Compliance Committee to determine:(a) the results of the investigation and the adequacy of recommendations for corrective actions;(b) the completeness, objectivity, and adequacy of recommendations for corrective actions; and/or (c) further actions to be taken as necessary and appropriate.
- 15. Upon conclusion of the investigation, the Compliance Officer will organize the information in a manner that enables the County to determine if an infraction did, in fact, occur. The Compliance Officer will maintain all notes of the interviews, all evidence and documents as part of the investigation file. The investigation file will be securely maintained by the Compliance Officer.
- 16. If the Compliance Officer, in consultation with legal counsel, identifies credible evidence or credibly believes that a State or Federal law, rule, or regulation has been violated, the Compliance Officer will promptly report such violation to the appropriate governmental entity, where such reporting is otherwise required by law, rule or regulation. The Compliance Officer will receive and maintain copies of any reports submitted to governmental entities.

- 17. The Compliance Officer, in consultation with legal counsel, the County Executive, and the Compliance Committee, will evaluate any confirmed violation to determine if a voluntary self-disclosure of the violation is appropriate. In the event that voluntary disclosure is appropriate or required, the Compliance Officer will consult with legal counsel on the notification of appropriate government officials, private payors, or other entities. Notification shall be made within a reasonable time period from date of discovery and may include restitution of monies paid by the applicable Federal or State agency, payer, or other entity. The Compliance Officer will ensure that all overpayments are reported and refunded to the appropriate payer within 60 days of the identification of the overpayment and in accordance with the Billing Errors, Overpayments, and Self-Disclosure Policy and Procedure.
- 18. The Compliance Officer will be responsible for reporting the results of all investigations to the County Executive, Compliance Committee, and the Legislature.
- 19. The Compliance Officer or appropriate member of Management will inform the reporter, if known, of the conclusion of the investigation and the outcome, if appropriate.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Ulster County will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.

Procedure: Compliance

Topic:Exclusion and Sanction Screening

Purpose:

Ulster County (sometimes referred to as "County" or "the County") is committed to maintaining high quality care and service as well as integrity in its financial and business operations. Therefore, all necessary steps will be taken by Ulster County to ensure that it does not employ, contract with, or conduct business with an individual or entity excluded from participation in federally-funded healthcare programs, such as Medicare and Medicaid.

For purposes of this Policy, a "contractor" is defined as:

- Any independent contractor, contractor, subcontractor, or other person who, on behalf of the County, furnishes or otherwise authorizes the furnishing of Medicare, Medicaid, or other federally-funded healthcare items or services, or performs billing or coding functions;
- Any independent contractor, contractor, subcontractor, or other person who
 provides administrative or consultative services, goods, or services that are
 significant and material, are related to healthcare provision, and/or are included in
 or are a necessary component of providing items or services of Medicare,
 Medicaid, or other federally-funded healthcare programs; or
- Any independent contractor, subcontractor, or other person who is involved in the monitoring of healthcare provided by the County.

Standard:

- 1. It is the policy of Ulster County not to employ, contract with, or conduct business with an individual or entity excluded from participation in federally-funded healthcare programs, such as Medicare and Medicaid.
- 2. It is the policy of Ulster County that County employees including the County Executive and senior leadership, interns, and Legislative members have an affirmative responsibility to notify the Compliance Officer promptly if charged with a criminal offense related to healthcare or proposed or found to be subject to exclusion from federal healthcare programs.
- 3. It is the policy of Ulster County to conduct exclusion (sanction) screening of all current and proposed employees including the County Executive and senior leadership, interns, and Legislative members.

- 4. It is the policy of Ulster County to verify that contractors, as defined by this Policy, who provide and/or perform services for the County have not been the subject of adverse governmental actions and/or excluded from the federal healthcare programs.
- 5. It is the policy of Ulster County to verify that any physician or other healthcare practitioner ordering, authorizing, or prescribing goods or services under a federally-funded healthcare program, such as Medicare or Medicaid, has not been excluded from participation from federal healthcare programs.

Regulatory References:

Medicare-Medicaid Anti-Fraud and Abuse Amendments of 1977

Public Law 95-142

18 NYCRR Part 521

Department of Health and Human Services Office of Inspector General: Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs (5/8/2013)

Procedures:

Applicable to Employees, Interns, and Legislative Members:

- 1. Ulster County will conduct exclusion checks to verify that all employees including the County Executive and senior leadership, interns, and Legislative members have not been excluded from federal healthcare programs. An exclusion check is a search of the following sources to determine if the individual's name appears on any of the lists:
 - U. S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE) available on the website at <u>http://exclusions.oig.hhs.gov</u>
 - The System for Award Management (SAM) available on the SAM website at https://www.sam.gov

- 2. An exclusion check will be performed on all applicants for employment as part of the pre-employment screening process. All names used by the applicant will be obtained and utilized as part of the exclusion screening process. If the exclusion check indicates that any individual has been excluded from federal healthcare programs, the applicant will not be offered employment.
- 3. An exclusion check will be performed for potential Legislative members and as part of the screening process. All names used by the potential Legislative member will be obtained and utilized when conducting the exclusion screening. If the exclusion check indicates that a potential Legislative member has been excluded from federal healthcare programs, the individual will not be considered for Legislative affiliation.
- 4. An exclusion check will be performed on all interns as part of the screening process. All names used by the intern will be obtained and utilized when conducting the exclusion screening. If the exclusion check indicates that the intern has been excluded from federal healthcare programs, the intern will not be offered an internship.
- 5. The Personnel Department will maintain an updated list of employees, interns, and Legislative members in an approved format and will make the list available to the personnel responsible for exclusion screening of such parties.
- 6. The Personnel Department will ensure that exclusion screening is conducted on all employees, interns, and Legislative members at least every 30 days thereafter. All names used by the parties will be utilized when the exclusion screening is conducted.
- 7. Any potential matches identified in the ongoing exclusion screening process for employees, interns, and Legislative members will be reviewed, resolved and findings reported to the Compliance Officer. The excluded party will be immediately relieved from duty and the Compliance Officer will consult with legal counsel in the event the County has been reimbursed for services from the excluded party.
- 8. The exclusion will be reported as a violation of the Compliance Program and investigated and reported in accordance with the Reporting and Investigation of Compliance Concerns Policy and Procedure.
- 9. If any employee, intern, or Legislative member is charged with a criminal offense related to healthcare or is proposed or found to be subject to exclusion from federal healthcare programs, they must be removed from direct responsibility or involvement in any federally-funded healthcare program while the matter is pending. If the matter results in conviction or exclusion, Ulster County will immediately terminate the County's relationship with the employee, intern, or Legislative member.

10. In addition to exclusion screening, the credentials of medical/healthcare and other professionals employed by Ulster County will be verified with appropriate licensing and disciplining authorities, including any adverse actions taken against the individuals that might impair their performance of duties on behalf of the County. The process is applicable to all employees for which license/certification is required for their duties. The verification will be conducted as part of the hiring process and at least annually thereafter.

Applicable to Contractors:

- 1. The County Purchasing Department shall conduct exclusion checks prior to entering an agreement with a contractor, as defined by this Policy. An exclusion check is a search of the following sources to determine if the individual's or entity's name appears on any of the lists:
 - U. S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE) available on the website at <u>http://exclusions.oig.hhs.gov</u>
 - The System for Award Management (SAM) available on the SAM website at <u>https://www.sam.gov</u>
- 2. If the exclusion check indicates that a contractor has been excluded from federal healthcare programs, the contract will not be executed until a determination is made by the Compliance Officer as to whether the contract pertains to activities subject to the prohibition on participation by excluded entities.
- 3. The Purchasing Department will maintain an up-to-date list of contractors in an approved format and will make the list available to the personnel responsible for exclusion screening of such parties.
- 4. The Compliance Officer will ensure that an exclusion check of contractors is conducted prior to entering into a business contract with the contractor and at least every 30 days thereafter.

- 5. Any matches identified in the ongoing exclusion screening process for contractors will be reviewed, resolved and reported to the Compliance Officer. If the exclusion check indicates that a contractor has been excluded from federal healthcare programs, the Compliance Officer will make a determination as to whether the contract pertains to activities subject to the prohibition on participation by excluded entities. The contract will be immediately terminated if the goods or services are subject to the prohibition on participation by excluded entities.
- 6. The Compliance Officer will consult with legal counsel if the County has been reimbursed for goods or services from the excluded individual or entity.
- 7. The indicated exclusion will be reported as a violation of the Compliance Program and investigated and reported in accordance with the Reporting and Investigation of Compliance Concerns Policy and Procedure.
- 8. The Compliance Officer will ensure that all contracts entered into by the County will contain a certification that the federal or state government does not exclude the contractor, its employees, or subcontractors.

Applicable to Ordering/Prescribing Physicians and Other Healthcare Practitioners:

- Ulster County will ensure that an initial exclusion check is conducted on each physician and healthcare practitioner who authorizes, prescribes, or orders goods or services funded by Medicaid, Medicare, or other federally-funded healthcare programs. An exclusion check is a search of the following sources to determine if the party's name appears on any of the lists:
 - U. S. Department of Health and Human Services, Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE) available on the website at <u>http://exclusions.oig.hhs.gov</u>
 - The System for Award Management (SAM) available on the SAM website at https://www.sam.gov
- 2. Any Ulster County department or program providing healthcare services that require an authorization, order, or prescription by a physician or other healthcare practitioner will ensure that an initial exclusion check is conducted on each physician or practitioner who authorizes, orders, or prescribes goods or services reimbursed by Medicaid, Medicare, or other federally-funded healthcare programs.

- 3. The department or program will maintain an up-to-date list of physicians and practitioners who authorize, order, or prescribe Medicaid, Medicare, or other federally-funded healthcare program services. The list will be maintained in an approved manner and be made available to the personnel responsible for the exclusion screening of such parties.
- 4. The Compliance Officer will ensure that an exclusion check of all physicians and practitioners who authorize, order, or prescribe healthcare goods or services provided by the County is conducted at least every 30 days.
- 5. Any matches identified in the ongoing exclusion screening process for physicians and practitioners will be reviewed, resolved and reported to the Compliance Officer. If the exclusion check indicates that a physician or practitioner has been excluded from federal healthcare programs, the services or goods will not be billed to Medicaid, Medicare, or other federally-funded healthcare programs. The Compliance Officer will consult with legal counsel if the County has been reimbursed for goods or services authorized, ordered, or prescribed by an excluded physician or practitioner.
- 6. The indicated exclusion will be reported as a violation of the Compliance Program and investigated and reported in accordance with the Reporting and Investigation of Compliance Concerns Policy and Procedure.

Monitoring for Compliance with Policy:

- 1. The Compliance Officer will ensure the results of all exclusion checks are maintained for a period of at least six years.
- 2. The Compliance Officer is responsible for monitoring this Policy for compliance and reporting results quarterly to the Compliance Committee and the Legislature, along with any recommendations for remedial actions or improvements to the program.
- 3. An annual audit of employment applications, Board appointments, and contractors (as defined by this Policy) with which Ulster County enters into a contractual relationship will be conducted by the Compliance Officer to verify that this policy is enforced. A report of this audit will be made to the Compliance Committee and Legislature, along with any recommendations for remedial actions or improvement to the process as part of the annual compliance report.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all affected individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Ulster County will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.

Procedure: Corporate Compliance

Topic: Compliance Training

Purpose:

The development and implementation of regular, effective education and training seminars is an integral part of the Compliance Program. Compliance education is divided into two general components. First, all Affected Individuals must receive an introduction to the Compliance Program. Second, those parties whose work is linked to identified risk areas should receive specialized compliance education pertaining to their function and responsibilities.

For purposes of this Policy, the term "Affected Individuals" includes employees, volunteers, interns, appointees, Legislators, County officials, business partners, vendors, agents, contractors.

Standard:

It is the Policy of Ulster County (sometimes referred to as "County" or "the County") to ensure that all Affected Individuals receive formal training relating to the County's Compliance Program. The County will ensure that all trainings are provided in a way that is accessible to all Affected Individuals and that they are in alignment with the required State and Federal laws, rules, and regulations.

It is the Policy of the County to ensure that Affected Individuals in identified risk areas, and members of the Legislature and Management, receive more detailed education related to their function and responsibilities.

This Policy applies to all Affected Individuals. Successful completion of the training sessions is mandatory and a condition of continued employment, contract, appointment, or assignment with the County.

Regulatory Reference:

Social Service Law 363-D

18 NYCRR Part 521

Procedures:

- 1. The Compliance Officer and Personnel Department are responsible for overseeing the development of the compliance education curriculum and monitoring and ensuring that compliance training and orientation meet the Policy standards on this subject.
- 2. Compliance education and training seminars must include an explanation of the structure and operation of the Compliance Program. They will introduce the Compliance Officer and the roles and responsibilities of the Compliance Committee to Affected Individuals.
- 3. Compliance education and training seminars will include, at a minimum, information on the following aspects of the Compliance Program:
 - Ulster County's Compliance Plan;
 - Standards of Conduct and other related written guidance;
 - Federal False Claims Act;
 - New York False Claims Act;
 - Whistleblower Protections;
 - Risk areas and County experience;
 - The role and responsibilities of the Compliance Officer and the Compliance Committee;
 - Communication channels (name of Compliance Officer, reporting mechanisms, anonymous reporting mechanism);
 - Ulster County's expectations for reporting known or suspected fraud, waste, and abuse; illegal or unethical acts; actual or suspected violations of Federal or State laws and regulations; actual or suspected violations of the Standards of Conduct, the Compliance Program, and Ulster County's policies and procedures; improper acts in the delivery or billing of services; and other wrongdoing (collectively referred to as "compliance concerns" for purposes of this Policy);
 - How the County responds to reports of compliance concerns, including the investigation process and corrective actions;
 - Ulster County's disciplinary policy and standards;
 - Prevention of fraud, waste, and abuse; and
 - Non-retaliation and non-intimidation policy.

Specialized areas for education will include, but not be limited to, the following risk areas:

- Improper or fraudulent billing for services;
- Preparation of inaccurate or incorrect cost reports;

- Misuse of Ulster County funds;
- Payment or receipt of remuneration or gifts in return for referrals of service recipients or business contracts;
- Medicaid requirements specific to Ulster County's services and programs;
- Coding and billing requirements and best practices, if applicable;
- Claim development and the submission process, if applicable;
- Government and private payor reimbursement principles; and
- Government initiatives related to the services provided by the County, if applicable.
- 4. Comprehensive education materials will be developed to facilitate the compliance sessions and ensure that a consistent message is delivered to all Affected Individuals. Education protocols and materials must be standardized, so as to evidence that everyone attending a seminar receives the same instruction.
- 5. As part of their initial orientation, each employee, including the County Executive and other senior administrators, and Legislative members shall receive a training session within the first 10 days of employment or association with the County. Each party will receive an introduction to Ulster County's Compliance Program and objectives, and written copies of the Standards of Conduct and Compliance Plan, and be provided access to Compliance Program policies and procedures. Each party will sign an acknowledgement form, or equivalent, that they are aware of and will abide by the Compliance Plan and Standards of Conduct.
- 6. All Affected Individuals will receive training and/or education at least once per year that includes a review of the existing Compliance Plan, the Standards of Conduct, and any applicable policies and procedures. The session will also focus on any changes in Federal or State laws and regulations.
- 7. All education and training relating to the Compliance Program will be verified by attendance and a signed acknowledgement, or equivalent. Training records will include the date, start and end time of the training, and the content of the material presented. The Compliance Officer will maintain records of attendance for all training.
- Only properly trained individuals will be used to provide compliance education and training seminars. Compliance Program trainers must be knowledgeable of the (a) Compliance Plan; (b) applicable Federal laws and regulations; (d) relevant Ulster County policies/procedures; (e) operations of the Compliance Program; and (f) content of the Standards of Conduct.
- 9. The Compliance Officer is responsible for coordinating with Management to ensure that specialized compliance education occurs in identified risk areas.

- 10. The Compliance Officer will ensure that all contractors and vendors meeting the criteria below are provided with a copy of the Compliance Plan and the False Claims Act and Whistleblower Protections Policy upon entering into a contractual agreement with Ulster County. For purposes of this Procedure, contractor and vendor are defined as:
 - Any independent contractor, contractor, subcontractor, or other person who, on behalf of the County, furnishes or otherwise authorizes the furnishing of Medicare, Medicaid, or other federally-funded healthcare items or services, or performs billing or coding functions; or
 - Any independent contractor, contractor, subcontractor, or other person who
 provides administrative or consultative services, goods, or services that are
 significant and material, are directly related to healthcare provision, and/or
 are included in or are a necessary component of providing items or services
 reimbursed by Medicare, Medicaid, or other federally funded healthcare
 program; or
 - Any independent, contractor, subcontractor, or other person who is involved in the monitoring of healthcare provided by the County.
- 11. Ulster County will ensure that the Compliance Officer has sufficient opportunities to receive training on compliance issues. Compliance training will be secured and made available to new Compliance Officers as part of the orientation to the role.
- 12. The Compliance Officer is responsible for submitting periodic reports to the Compliance Committee and Legislature on all education seminars related to the Compliance Program. This information will be trended and analyzed to evaluate and ensure that the County has an effective Compliance Program.
- 13. All education and/or training related to the Compliance Program will be incorporated into the County's training plan. The training plan shall, at a minimum, outline the subjects or topics for training and education, the timing and frequency of the training, which Affected Individuals are required to attend, how attendance will be tracked, and how the effectiveness of the training will be periodically evaluated. The training plan will be reviewed by the Compliance Officer and Compliance Committee and updated as needed, but at minimum on an annual basis.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Ulster County will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.

Procedure: Corporate Compliance

Topic: Internal Auditing and Monitoring

Purpose:

Ulster County (sometimes referred to as "County" or "the County") developed and implemented a Compliance Program in an effort to establish, in part, effective internal controls that promote adherence to applicable Federal and State laws and requirements. An important component of the Compliance Program is the use of audits and/or other evaluation techniques to monitor compliance and assist in the reduction of identified risk areas.

Ulster County recognizes the need for internal controls, but also realizes that resources are limited. Therefore, this policy focuses on the County's resources to effectively and efficiently audit and monitor risk areas.

For purposes of this Policy, the term "Affected Individuals" includes employees, volunteers, interns, appointees, Legislators, County officials, business partners, vendors, agents, contractors and contracted Affected Individuals.

Standard:

It is the Policy of Ulster County to conduct ongoing auditing and monitoring of identified risk areas related to compliance including but not limited to billing, fiscal management, clinical operations, and service provision. It is the responsibility of the entire Management Team to ensure that ongoing auditing and monitoring is properly executed, documented, and evidenced.

It is the Policy of Ulster County to analyze and trend the results of all audits (both internal and external) on a regular basis to ensure that the County's Compliance Program is effective.

Regulatory Reference:

Social Service Law 363-D

18 NYCRR Part 521

Procedures:

1. On an annual basis, the Compliance Officer, in conjunction with the County Executive, Senior Management, and Compliance Committee, will determine the scope and format of routine audits of Ulster County's operations based on an County risk assessment. The Compliance Officer will include all scheduled audits on a work plan or audit plan that is shared with the Compliance Committee and the Legislature.

- 2. Each Ulster County program or department will conduct a review of its compliance with applicable regulations and quality measures on an annual basis. Senior Management staff shall be responsible for identifying needs for internal auditing of specific issues under their oversight. This should occur at least annually as a part of the County's risk assessment and for consideration into the annual work plan and audit plan.
- 3. The Compliance Officer will recommend and facilitate auditing and monitoring of the identified risk areas related to compliance with laws and regulations, as well as the County's policies, procedures, and Standards of Conduct. (Risk areas may be identified through the regular course of business, external alerts, external audits or reviews, or internal reporting channels.)
- 4. The Compliance Officer will be responsible for oversight of the County's internal auditing system and is authorized to delegate auditing duties to other County personnel, accountants, consultants, and attorneys, as necessary and appropriate.
- 5. The Compliance Officer will conduct and/or oversee compliance audits and reviews with assistance from Management staff and/or Quality Assurance/Internal Audit staff with the requisite skills to carry out the audit. Whenever feasible, the Compliance Officer will seek to have audits conducted by Ulster County employees who are not involved in the delivery of services subject to the audit.
- 6. The Compliance Officer will facilitate all audits of financial processes or systems with the Commissioner of Finance. The audits will serve to ensure that internal controls are in place so that:
 - Generally Accepted Accounting Principles (GAAP) are followed; and
 - Federal, State, and local laws, regulations, and requirements are met.
- 7. The Compliance Officer will facilitate all audits of operational and programmatic issues with Ulster County's Chief of Staff and Deputy County Executives.
- 8. The ongoing auditing and monitoring will serve to evaluate, at minimum, the following risk areas:
 - Billings;
 - Payments;
 - Ordered services;

- Medical necessity;
- Quality of care;
- Governance;
- Mandatory reporting;
- Credentialing;
- Contractor, subcontractor, agent, or independent contract oversight;
- Review of contracts and relationships with contractors, specifically those with substantive exposure to government enforcement actions;
- Review of documentation and billing relating to claims made to Federal, State, and third party payers for reimbursement;
- Compliance training and education;
- Effectiveness of the Compliance Program; and
- Other risk areas that are or should reasonably be identified by the County through its County experience.
- 9. The audits and reviews will examine the County's compliance with specific rules and policies through on-site visits, personnel interviews, general questionnaires (submitted to employees and contractors), clinical record reviews to support claims for reimbursement, and documentation reviews.
- 10. The Compliance Officer will review and approve the sample size and sample criteria prior to each audit unless the detail is included in the annual audit plan or work plan.
- 11. All audit and review tools used will be standardized throughout the County and approved by the Compliance Officer.
- 12. A written report of all internal audit and review results will be forwarded to the Compliance Officer and respective department or division director within seven (7) business days from the completion of the review or audit. Within 10 business days from the receipt of the written report of findings, the department or division director will submit a written Plan of Corrective Action to the Compliance Officer for review. The department head or director is responsible for ensuring that corrective measures are implemented and monitored for effectiveness.
- 13. The Compliance Officer will determine the timeframe for a post-audit review. The objective of the post-audit review is to ensure that corrective actions were completed and effective in preventing any recurrences of the deficiencies.
- 14. The results of all internal auditing and monitoring activities, including records reviewed, audit results, and corrective actions, will be recorded and maintained by the Compliance Officer.
- 15. Should non-compliance be detected during routine internal monitoring and activities, the Compliance Officer will ensure a thorough investigation in accordance with the Reporting and Investigation of Compliance Concerns Policy.

- 16. Any correspondence from any regulatory agency charged with administering a federally- or state-funded program received by any department of the County will be copied and promptly forwarded to the Compliance Officer for review and subsequent discussion by the Compliance Committee.
- 17. Department head will immediately notify the Compliance Officer of any visits, audits, investigations, or surveys by any regulatory agency or authority. Results (whether oral or written) of any visits, audits, investigations, or surveys will be forwarded to the Compliance Officer promptly upon receipt by County personnel.
- 18. The Compliance Officer will be responsible for reporting to the Compliance Committee on the general status of all audits and reviews, the outcome of compliance auditing and monitoring, and the corrective actions taken. The reporting will occur at the first regularly scheduled Compliance meeting after the conclusion of the audit or review.
- 19. The Compliance Officer will be responsible for reporting the results of auditing and monitoring activities and corrective actions at least annually to the Legislature. The report will also include monitoring of trends, an assessment of any compliance risks to the County, and an evaluation of the effectiveness of the County's Compliance Program.
- 20. At least annually, the Compliance Officer will benchmark audit results and compare results of similar audits to determine whether improvement is occurring.
- 21.On an annual basis, the Compliance Officer, in collaboration with the Compliance Committee, will conduct a review to monitor the effectiveness of the Compliance Program, Compliance Program Policies and Procedures, and the Standards of Conduct to determine:
 - a) Whether such written policies, procedures, and Standards of Conduct have been implemented;
 - b) Whether Affected Individuals are following the policies, procedures, and Standards of Conduct;
 - c) Whether such policies, procedures, and Standards of Conduct are effective; and
 - d) Whether any updates are required.

The Compliance Officer will provide a report of this review to the Compliance Committee and the Legislature.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Topic: Response to Governmental Investigations

Purpose:

Federal and State law enforcement and regulatory agencies routinely conduct interviews to gather information during audits, inquiries, and investigations. It is important that Ulster County (sometimes referred to as "County" or "the County") responds to any official requests for information consistently and appropriately. Therefore, this Policy is established to provide guidance on how to handle any unannounced visits by government representatives. This Policy does not address visits by regulatory agencies to perform program certification or quality assurance functions.

Standard:

- 1. Ulster County government is committed to appropriately responding to and not interfering with any lawful audit, inquiry, or investigation.
- 2. Employees will remain courteous, cooperative and professional when dealing with investigators or agents.

Regulatory Reference:

N/A

Procedures:

Scheduled/Planned Visits

 Announcement of an impending visit by any government compliance reviewer or auditor should be immediately reported by the department head or designee to the Deputy County Executive who is responsible for that department, and to the Compliance Officer. 2. Procedures for handling the receipt of a search warrant or subpoena are covered by Ulster County's Standard Operating Procedure Section E.1.

Unannounced Visits to any of Ulster County's facilities:

- If an individual arrives unannounced at any County government facility and identifies himself or herself as a government auditor, investigator or other representative, treat him or her with respect and courtesy. Request identification (do not attempt to photocopy credentials, as this is a violation of Federal law) and the reason for the visit.
- 2. Inform the individual that it is the County's procedure to involve the Office of the County Executive and/or the County Attorney when unannounced program reviews take place. Ask the individual to wait in an appropriate waiting area.
- 3. The department head or supervisor should immediately inform the Deputy County Executive or, in that individual's absence, the County Attorney.
- 4. Await direction. Do not submit to questioning or to an interview without representation from the County Executive's or County Attorney's Office or unless given authorization by either of these offices to do so without representation. Similarly, do not provide documents or other information without direction from the County Executive's or County Attorney's Office.
- 5. Refer to Ulster County's Standard Operating Procedure on Search Warrants.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Topic: Obligations of Department Heads, Supervisors and Employees

Purpose: The effectiveness of the Ulster County government compliance program corresponds directly with the conduct and job performance of its employees. Department heads, supervisors and other employees have specific roles to play in regard to the compliance program. The success of the overall program requires that all parties participate fully.

Standards:

- 1. Ulster County is committed to compliance with all laws, rules and regulations.
- 2. Department Heads, supervisors and employees shall be familiar with their roles and shall fully conform to them.

Procedures:

- **1.** Department Heads:
 - Be fully committed to the compliance program
 - Set an example to all employees regarding knowledge of the program, relevant laws, conformance to County procedures and policies, and ethical behavior
 - Maintain an open door policy for departmental employees to promote communication regarding compliance issues and concerns
 - Ensure that all employees are aware of their responsibilities
 - Ensure that Standards of Conduct are enforced
 - Ensure that policies and procedures are adhered to
 - Ensure that documentation requirements are followed
 - Evaluate employee performance related to compliance with laws, regulations, procedures and policies in an honest and direct manner

- **2.** Supervisors, in addition to the responsibilities identified for department heads:
 - Fully support the department head's efforts to achieve full compliance
 - Be aware of subordinates' issues and concerns about compliance matters
 - Give regular feedback to subordinates regarding their participation in and support for the County's compliance program
 - Hold subordinates responsible for roles and obligations regarding the compliance program
 - Keep the department head fully informed about compliance issues
- **3.** Employees:
 - Fully commit to the County's compliance program
 - Participate in mandatory trainings
 - Be knowledgeable of compliance procedures, rules, regulations and obligations
 - Demonstrate conformance with County general and compliance procedures
 - Conform to the County's Whistleblower procedure
 - Inform supervisors of any compliance concerns
 - Conform to the County's Standards of Conduct

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes. Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Topic:Requirement for Prior Approval of Overtime and
Compensatory Time

Purpose: Standard Operating Procedure G2 requires that department heads obtain prior approval from the County Executive's Office to authorize employees to work additional hours of a non-emergency nature beyond their standard work week. Employees that violate this procedure expose the County government to additional payroll costs. This procedure identifies the actions that must be taken by department heads when SOP G2 is violated.

Standards:

- 1. Ulster County is committed to compliance with all laws, rules and regulations.
- 2. New York State Labor law requires that employees be compensated for hours worked.
- Ulster County government's Standard Operating Procedure G2 establishes that no employee may work additional hours (or a non-emergency nature) without prior approval.

Procedures:

- All employees are required to be familiar with Ulster County government's Standard Operating Procedures. SOP G2 requires that employees and department heads obtain prior approval before overtime or compensatory time may be worked.
- 2. Department heads are responsible for ensuring that systems are in place to prevent violations of this policy.
- 3. Department heads are required to address all violations of this policy in accordance with NYS Civil Service Law and County policy and procedure concerning discipline.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, Ulster County will review this policy based on changes in the law or regulations, as Ulster County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all Affected Individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement:

Topic: Policy Development, Approval, and Maintenance

Purpose:

The Policy and Procedure provides clear direction for the process of developing and maintaining policies and establishes a process that promotes effective and timely policy development and review.

Standards:

It is the policy of Ulster County (sometimes referred to as "County" or "the County") to establish a standardized process for policy development, approval, revision, and implementation.

Regulatory Reference:

Social Service Law 363-D 18 NYCRR Part 521

Procedures:

- 1. Compliance Program Policies and Standard Operating Procedures shall be developed and/or revised to meet legal and regulatory requirements and to comply with other Ulster County policies.
- 2. All newly created or revised Compliance Program Policies and Standards of Conduct will be approved by the Compliance Committee.
- The Compliance Officer will be responsible for the overall coordination and implementation of any new or revised Compliance Program Policies and Standard Operating Procedures.
- 4. The County Executive and other Senior Management will be consulted as needed throughout the process of developing or revising any Compliance Program Policy or Standard Operating Procedures prior to approval to ensure compliance with legal and regulatory requirements and other County policies.
- 5. After review and approval from the Compliance Committee all newly created or revised Compliance Program Policies will be reviewed and approved by the

County Executive and Legislature. The County Executive shall approve all Compliance Program Policies prior to implementation. The date of approval of each policy shall be included in the policy. The effective date of the policy shall be the date of distribution.

- 6. Approved Policies will be provided to the Compliance Officer to be cataloged and distributed to a standard distribution list, which shall include the Legislature, the County Executive, and all employees, and, if applicable, independent contractors and agents within 10 business days of final approval.
- 7. The Compliance Officer in collaboration with the Compliance Committee, shall develop a plan for informing and educating employees, and independent contractors, if applicable, of the County's new and revised Compliance Program policies and Standard Operating Procedures.
- 8. The County will maintain an official County policy structure with the most current approved versions, with references to applicable procedures or related documents. The Compliance Officer, or designee, shall maintain an ongoing file of revised policies, substitute policies and current policies. Policies, as they are revised or replaced, shall not be discarded.
- 9. All Compliance Program Policies and Standard Operating Procedures will be reviewed annually by the Compliance Officer and Compliance Committee to determine if there are any revisions that are appropriate or required. If there are necessary revisions to the Compliance Program Policies or Standard Operating Procedures, the workflow described above will be employed for approval.

Sanction Statement:

Non-compliance with this policy may result in disciplinary action, up to and including termination.

Compliance Statement:

As part of its ongoing auditing and monitoring process in its Compliance Program, the County will review this policy based on changes in the law or regulations, as the County's practices change, and, at minimum, on an annual basis. Additionally, this policy will be tested for effectiveness on an annual basis or more frequently as identified in accordance with Ulster County's Compliance Program. Testing will include but is not limited to

ensuring that the policy is appropriately followed; the policy is effective; the policy has been disseminated to all affected individuals, as well as notified of any updates or changes.

Tracking of the criteria above and results of this testing will be completed by the Compliance Officer, or designee. Additionally, results will be reported to the Compliance Committee and Legislature on a regular basis.

Record Retention Statement: