

## **MEDICAID COMPLIANCE AND PREVENTION OF MEDICAID FRAUD, WASTE AND ABUSE**

### I. Statement of Purpose

The Board of Questar III recognizes the importance of providing accurate reports of the provision of Medicaid-eligible services to the school districts it serves, so school districts are able to comply with Medicaid reimbursement requirements. To this end, the Board directs that a compliance program be established to ensure compliance with Medicaid reporting, training, and other requirements.

The Board also recognizes the importance of detecting and preventing Medicaid fraud, waste and abuse, as required by law. For purposes of this policy, reference to non-compliance with Medicaid program reporting requirements shall include any allegation of fraud, waste or abuse. To this end, this policy establishes expectations for employees and enacts procedures that will be used by Questar III to respond to reports of activities which may violate Medicaid laws or regulations. Such activities may include but are not limited to, submitting and/or receiving reports that are inaccurate or otherwise do not meet applicable Medicaid requirements.

### II. Designation of Compliance Officer

The District Superintendent shall designate a Compliance Officer, subject to the approval of the Questar III Board. The Compliance Officer shall have authority to:

- A. Oversee and monitor the implementation of the agency's compliance program;
- B. Consult counsel as necessary;
- C. Conduct internal investigations and audits relating to compliance issues;
- D. Review all documents and other information relevant to Medicaid compliance activities;
- E. Maintain direct access to the District Superintendent and, when appropriate, the Questar III Board; and
- F. Report periodically to the Questar III Board on compliance matters.

### III. Expectations and Procedure to Address Complaints

Questar III employees are expected to act in an ethical manner and to comply with Medicaid program guidelines and reporting requirements. Any employee who has knowledge of activities that he or she believes may violate a law, rule or regulation has an obligation to promptly report this matter to the Compliance Officer. Reports may be made anonymously and employees will not be subjected to retaliation, meaning no adverse action will be taken, for any report made in good faith. Failure to report known violations; participating in, encouraging, directing, facilitating or permitting, actively or passively, non-compliant behavior; failure to detect violations due to negligent or reckless conduct; or the intentional making of a false report may be grounds for discipline, including termination, in accordance with applicable law. Additionally, intentionally making a false claim or misrepresenting material facts in claims may be subject to criminal or civil penalties.

In order to detect and prevent fraud, the Questar III Board authorizes the use of monitoring and auditing systems that are reasonably designed to detect improper reporting practices and other potential compliance issues including, but not limited to billing and payments documentation,

appropriate certification/licensure of providers, governance requirements, and relating to the provision of care.

In addition to initiating an investigation as described in section IV. of this policy, below, if a suspected compliance issue has been reported or otherwise identified, the Compliance Officer shall make recommendations to the District Superintendent and, where appropriate, the Questar III Board, to correct such issues promptly and of any reasonable steps which may be taken in order to prevent further violations.

The Questar III Board will support the Medicaid compliance program by: considering any matter brought to it by the District Superintendent or the Compliance Officer; authorizing appropriate investigations as required; and considering recommendations of the Board's Audit Committee relating to the results of any internal reviews. Any Questar III Board member who has knowledge of activities that he or she believes may violate a law, rule or regulation relating to Medicaid has an obligation to promptly report this matter to the Board President and the Compliance Officer.

#### IV. Investigations

If a suspected compliance issue is reported to the Compliance Officer, either by an employee or Board member, in any auditing report, or through any other source, the Compliance Officer shall promptly respond by making further investigation as necessary.

##### A. Internal Investigations.

The Compliance Officer will conduct a timely and reasonable investigation of all credible reports of suspected compliance issues. A reasonable investigation includes a preliminary investigation by the Compliance Officer and other personnel or outside counsel when needed.

If a preliminary internal investigation indicates a reasonable suspicion of noncompliance or conduct that may violate applicable laws or regulations, the Compliance Officer shall notify the District Superintendent and the Questar III Board, and shall assure that a complete investigation is undertaken. In such case, the internal investigation also shall attempt to determine whether the noncompliance or other conduct was limited to one or a small number of cases, or whether it is systemic in nature.

##### B. Government Investigations

The New York State School Supportive Health Services Program Compliance Agreement entered into by the New York State Department of Health, the New York State Education Department and the New York Office of the Medicaid Inspector General provides that the State and local school districts shall establish a confidential disclosure mechanism that enables employees to disclose anonymously any practices or billing procedures deemed inappropriate by the employee to the State's Compliance Officer. Employees are expected to report any suspected compliance issues to the Questar III Compliance Officer, as provided in section III of this Policy, above. Additionally any employee may make a confidential written disclosure to the State's Compliance Officer as follows:

Rose Firestein  
State Compliance Officer  
NYS Department of Health  
Office of General Counsel  
90 Church Street, 4<sup>th</sup> floor  
New York, New York 10007  
Telephone: 212-417-4393  
Facsimile: 212-417-4392

If a government investigation arises, Questar III will cooperate fully with the investigation. Among other appropriate steps, the Questar III Compliance Officer shall undertake or cause to be undertaken an investigation in response to any practice or other complaint transmitted to Questar III from the State Compliance Officer and shall fully report to the Questar III Board and the State in accordance with the New York State School Supportive Health Services Program Compliance Agreement.

V. Training

The Compliance Officer shall establish a training program to assure that all relevant employees for Medicaid compliance purposes receive required training by the State Education Department and Department of Health. Relevant employees include but need not be limited to Medicaid services providers; the compliance officer; and employees responsible for processing Medicaid services records.

The Compliance Officer also shall implement a training program for relevant employees and Questar III Board members regarding this policy and to advise relevant employees about recordkeeping and other compliance requirements. Documentation of attendance and/or completion of training shall be maintained by the Compliance Officer.

VI. Distribution of Policy

This policy will be made available on the Questar III website for all employees, Board members and the public. Hard copies may be provided to new employees and Board members during orientation and to employees who have any role in providing Medicaid-eligible services, reporting services or maintaining records of services.

References: Social Services Law, §363-d  
18 NYCRR Part 521

Adopted: November 18, 2010