



Monterey County Behavioral Health Policy and Procedure

Policy Number	104
Policy Title	Compliance Plan
References	Monterey County Behavioral Health Compliance Plan
Forms	Attachment A: Employee Compliance Review Attestation Attachment B: Supervisor/Manager Compliance Plan Attestation Attachment C: Attestation of Quality Improvement Staff Indicating Understanding of Maintaining Confidentiality of compliance Hotline Attachment D: Contract Provider Compliance Plan Attestation
Effective	February 26, 2015 Revised: November 6, 2019

Policy

The Monterey County Behavioral Health (MCBH) compliance plan is articulated in its entirety in the "Monterey County Behavioral Health Compliance Plan" ("Compliance Plan"), which can be found at www.mtyhd.org/QI or requested from MCBH QI by contacting 831-755-4545.

It is the policy of MCBH that all of its staff and contract providers abide by the content of the Compliance Plan. Failure to comply with its provisions will result in progressive discipline per Monterey County policies or contractually established sanctions.

It is also MCBH policy that:

1. The Compliance Officer for Monterey County Behavioral Health is the Quality Improvement Manager. The Quality Improvement Manager may designate a substitute from time-to-time as necessary.
2. A Compliance Committee shall convene quarterly. This committee will include:
 - a. The Behavioral Health Director;
 - b. Behavioral Health Deputy Director(s);
 - c. The Medical Director;
 - d. Finance Manager;
 - e. Relevant program managers, analysts, and other staff as needed.
3. The Compliance Committee will review the compliance program annually to evaluate trends, needed trainings, and updates to the Compliance Plan.
4. The MCBH Quality Improvement (QI) Team will operate a Compliance Hotline (831-755-4545).

Procedures

30 Compliance Plan Employee Attestation

- 31 1. All MCBH staff, interns, trainees, volunteers (collectively referred to as “Employees”) and
32 contractors will review the Compliance Plan, which includes the Code of Conduct and links
33 to compliance related MCBH, Monterey County Health Department, and Monterey County
34 policies. Employees and contractors are expected to familiarize themselves with the
35 content of the Plan and all the linked compliance related policies.
- 36 2. After reviewing and familiarizing themselves with the Plan and all associated policies,
37 employees and contractors will complete and sign the Compliance Plan Review Attestation
38 in the electronic health records system.

39
40 Compliance Hotline

- 41 1. The Compliance Hotline will be answered by a live MCBH QI staff member during regular
42 business hours.
- 43 2. If due to unforeseen circumstances, such as high call volumes, the caller is diverted to the
44 Hotline’s confidential voicemail, Compliance Hotline staff will provide a follow-up phone call
45 to the caller within 24 business hours.
- 46 3. Calls are confidential and Compliance Hotline staff is to discuss the calls only with MCBH
47 QI clinical staff members tasked with compliance investigations and assessments.
- 48 4. Upon receiving a compliance related call, Compliance Hotline staff will transfer the call to
49 an MCBH QI clinical staff member tasked with compliance investigations and
50 assessments.
- 51 5. If an MCBH QI clinical staff member is unavailable at the time of the call, the caller may
52 leave a confidential voicemail message and an MCBH QI clinical staff member will follow
53 up with the caller within 24 business hours of the message.
- 54 6. The caller can opt to remain anonymous if preferred. However, The MCBH QI clinical staff
55 member will log the following regarding the call:
- 56 a. Name and contact information of caller, if provided;
57 b. Date and time of the call; and
58 c. The description of the compliance issue reported during the call
- 59 7. The log is confidential and to be viewed only by MCBH QI clinical staff specifically tasked
60 with compliance investigations and assessments.
- 61 8. The MCBH QI clinical staff assigned will conduct an investigation and assessment, which
62 may include, but is not limited to, document reviews, site visits, and/or interviews.
- 63 9. If during the course of the investigation and assessment, it is determined that the issue
64 reported is better suited for follow-up by another entity (e.g., human resources, privacy
65 officer), the assigned QI clinical staff member will forward the issue to the appropriate
66 entity.
- 67 10. During the course of this process, the name of the reporting party will remain confidential
68 and shall not be provided to any parties to the investigation and assessment.
- 69 11. The length of the follow-up investigation, assessment, and resolution will vary but will be
70 resolved as soon as reasonably possible.
- 71 12. Depending on the nature and content of the compliance report, the MCBH QI clinical staff
72 tasked with the investigation and assessments may inform the Compliance Officer of the
73 report at any time during the process but must inform the Compliance Officer of the results
74 of the investigation and assessment.
- 75 13. The Compliance Officer or their designee will engage all necessary parties to resolve
76 issues found during the investigation and assessment process. This may include, but is

77 not limited to, working with law enforcement agencies, referring the situation to Monterey
78 County Health Department Human Resources for further action, referring the situation to
79 MCBH Administration to initiate contractually established sanctions.

Attachment A:

Employee Compliance Plan Review Attestation

Option name in Avatar: Compliance Attestation

Frequency: All current employees must complete as soon as reasonably possible and all new employees hired after July 1, 2015 will complete at the onset of employment or volunteer service

Option: Employees will go into the electronic medical record to sign off verifying they have reviewed the Monterey County Behavioral Health Compliance Plan, including the Code of Conduct.

My signature below confirms that I have reviewed and understand the Monterey County Behavioral Health Code of Conduct, Compliance Plan and my role in reporting activity/conduct that may be in violation of the Code of Conduct, including, but not limited to:

- Billing or reimbursement regulations; fraudulent transactions
- Conflict of Interest
- Falsification of documents
- Documentation irregularities

Date: _____

Name _____

Signature _____

Attachment B:

Supervisor/Manager Compliance Plan Attestation

Option name in Avatar: Compliance Attestation

I understand that by signing below I understand my role as a Supervisor or Manager involves the following elements to ensure my employees are adequately trained on the compliance plan:

- I understand that complaints received by supervisors and managers also will be referred to the Compliance Officer for investigation as indicated
- It is the responsibility of the supervisor to ensure that staff are attending trainings and sufficiently understand medical necessity to ensure all services claimed are medically necessary. This includes every new staff member attending the clinical documentation overview training.
- I understand the Monterey County Non-Discrimination Policy which outlines my role ensuring that the work environment is free from discrimination in hiring, promotion, termination, and other conditions of employment and career development. Employment may not be based on race, color, religion, national origin, sex, gender identification, age, marital status, sexual orientation, weight, disability, citizenship or veteran status. Unlawful discrimination includes harassment of any individual based on any of these factors. At all times staff will remain in compliance with the Monterey County Equal Opportunity and non- discrimination policy.
- I understand my responsibility to train staff on job-specific laws and regulations. All members of the workforce will adhere to federal, state, and county laws and regulations, as well as departmental (Health), divisional (Behavioral Health), and other organizational rules as they apply to their specific scope of responsibilities. If a staff member believes there is a conflict between different legal or organizational requirements, this should be brought to the attention of the supervisor or manager for clarification and, if necessary, resolution. Licensed professionals in the workforce are also expected to abide by all rules and ethical obligations defined by their licensing boards and professional associations/organizations.
- I understand that I need to keep employees informed of the Compliance Plan, the Compliance Improvement Hotline, and keep the Compliance Improvement Hotline Poster posted in the office.

Date: _____

Name _____

Signature _____

Attachment C:

Attestation of Quality Improvement Staff Indicating Understanding of Maintaining Confidentiality of Compliance Hotline

Option name in Avatar: Compliance Attestation

I _____ understand that I must maintain confidentiality of all telephone calls, faxes, e-mails, and other communication relating to compliance reports.

This includes:

- Only discussing reported compliance concerns with other QI staff members for the purpose of investigation or resolving reported concern.
- Not discussing compliance hotline reports with staff outside of this office unless directed to do so by the Quality Improvement Service Manager.

I understand that failure to comply with the above will result in progressive discipline.

Date: _____

Name _____

Signature _____

Attachment D:

Contract Provider Compliance Plan Review Attestation

Option name in Avatar: Compliance Attestation

Frequency: All current contract providers staff must complete as soon as reasonably possible and all new employees hired after January 1st 2020 will complete at the onset of employment or volunteer service.

Option: Contracted Providers will go into the electronic medical record to sign off verifying they have reviewed the Monterey County Behavioral Health Compliance Plan, including the Code of Conduct.

My signature below confirms that I have reviewed and understand the Monterey County Behavioral Health Compliance Plan and Code of Conduct and my role in reporting activity/conduct that may be in violation of the Code of Conduct, including, but not limited to:

- Billing or reimbursement regulations; fraudulent transactions
- Conflict of Interest
- Falsification of documents
- Documentation irregularities
- Any limitations or inability that affect the provider's ability to perform any of the position's essential functions, with or without accommodation¹;
- A history of loss of license or felony conviction²;
- A history of loss or limitation of privileges or disciplinary activity;
- A lack of present illegal drug use; and
- The application's accuracy and completeness.

Label: Employee Attestation Indicating Review of Compliance Plan

Date: _____

Name _____

Signature _____

Contracted Provider's Program Name _____

¹ These attestation requirements comply with requirements of the Americans with Disabilities Act, 42 U.S.C. §§ 12101 *et seq*

² A felony conviction does not automatically exclude a provider from participation in the Plan's network. However, in accordance with 42 C.F.R. §§ 438.214(d), 438.610(a) and (b), and 438.808(b), Plans may not employ or contract with individuals excluded from participation in Federal health care programs under either Section 1128 or Section 1128A of the Social Security Act.