

HCCA 2009 Compliance Institute

**Compliance Guidance
New York Office of Medicaid
Inspector General**

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Background

- OMIG Function
- Legislative Directives
- Guidance Development Process

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Requirement

1. Written Policies & Procedures (5 Elements)
 - Code of Conduct
 - Minimum Standards
 - Program Implementation
 - Employee Guidance
 - Investigative Process

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Requirement

2. Designation of Compliance Officer (5 Elements)

- Must be Employee of Hospital
- Compliance Office Responsibilities
- Appropriate Workload
- Reporting Relationships
- Board Interaction

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Requirement

3. Training & Education (2 Elements)

- Who
 - Employee
 - Executives
 - Governance
 - "persons associated with the hospital"
 - ❖ Medical Staff and ?

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Requirement

4. Communication Lines to Compliance Officer (2 Elements)

- Anonymous Hotline
- Reports to Compliance Officer

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Requirement

5. Disciplinary Policies (7 Elements)

- Active Participation
- Mandatory Reporting
- Consistent Enforcement at All Levels in Organization

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Requirement

6. Identification of Compliance Risk Areas (3 Elements)*

- Risk Assessments
- Audits
 - Internal
 - External
- Corrective Action

* Heightened expectation for most hospitals

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Requirement

7. Responding to Compliance Issues (7 Elements)

- Prompt Investigation
- Self-Disclosures
- Proper Mandatory Reporting

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Requirement

8. Non-intimidation and Non-retaliation (2 Elements)

- Protect Whistleblowers, Employees and Compliance Officer

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Supplemental Guidance

- Credentialing
- Governance *
- Mandatory Reporting of Adverse Events
- Quality *

* Raises Compliance visibility/responsibility in both areas.

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Impact Assessment

- Immediate impact on New York Providers – will raise bar for many hospitals
- OMIG Guidance Likely to be Widely Imitated
- Key Elements
 - Risk Assessment
 - Elevated Compliance Officer
 - Governance Responsibility
 - Quality & Compliance Linkage.

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