

SUBJECT: MEDICAID COMPLIANCE PROGRAM

The District will comply with New York State and federal laws and regulations related to the District's participation as a provider of care, services, or supplies under the Medicaid program.

The District has further established and implemented a Medicaid Compliance Program designed to detect and prevent fraud, waste, and abuse.

As required by the New York State Office of the Medicaid Inspector General (hereinafter referred to as the OMIG), the District's Medicaid Compliance Program is comprised of the following core elements:

- a) Written policies and procedures that describe compliance expectations as embodied in a code of ethics applicable to all District personnel, including Board members. These compliance expectations or standards of conduct include provisions designed to: implement the operation of the Medicaid Compliance Programs; provide guidance to employees and others on dealing with potential compliance issues; identify how to communicate compliance issues to appropriate personnel; and describe how issues are investigated and resolved;
- b) A designated employee who will be responsible for the day-to-day operation of the Medicaid Compliance Program. This employee's job duties may be exclusively related to Medicaid compliance issues or may be combined with other duties, provided that the Medicaid compliance portions of the employee's duties are satisfactorily fulfilled. The designated employee will report directly to the Superintendent or designee and also periodically report directly to the Board on the District's Medicaid Compliance Program activities;
- c) Training and education of all affected District employees and other persons associated with the District's Medicaid Compliance Program, including, but not limited to, members of the District's Board. This training will occur periodically and be made a part of any required training or orientation for new employees, Board members, volunteers, and/or others on dealing with the District's Medicaid Compliance Program;
- d) Communication lines and processes directed to the District's designated employee who will be responsible for the day-to-day operation of the Medicaid Compliance Program. These communication lines and processes will be accessible to all District employees, Board members, volunteers, and others associated with the District's Medicaid Compliance Program. The communication lines and processes are designed to allow employees to report compliance issues, including the anonymous and confidential good faith reporting of any practice or procedure related to Medicaid reimbursement of school or preschool supportive health services, that an employee believes is inappropriate;

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SUBJECT: MEDICAID COMPLIANCE PROGRAM POLICY (Cont'd.)

- e) Disciplinary procedures that encourage good faith and fair dealing in the District's Medicaid Compliance Program by all affected individuals. These disciplinary procedures include procedures that articulate expectations for reporting and assisting with the resolution of compliance issues and also provide sanctions for the failure to report suspected problems and participating (either actively or passively) in non-compliant behavior;
- f) A system for the routine identification of Medicaid compliance risk areas in the District's Medicaid Compliance Program. Self-evaluation of such risk areas may be accomplished by, but not necessarily limited to, internal audits and external audits, as appropriate;
- g) A system for responding to, investigating, correcting, and reporting compliance issues as they are raised, including the development of procedures and systems to reduce the potential for recurrence, identifying and reporting compliance issues to the OMIG and refunding overpayments; and
- h) A policy of non-intimidation and non-retaliation against any person for the good faith participation in any aspect of the administration of the District's Medicaid Compliance Program including, but not limited to, the reporting of potential issues, assisting as a witness with any investigation, evaluation, audit, remedial actions or reporting to appropriate officials.

Social Services Law § 363-d
18 NYCRR Part 521
Labor Law §§ 740 and 741

NOTE: Refer also to Policies #5570 -- Financial Accountability
#5571 -- Allegations of Fraud
#5572 -- Audit Committee
#5573 -- Internal Audit Function
#6110 -- School District Officer and Employee Code of Ethics
District Medicaid Compliance Program

Adopted: 6/22/99
Revised: 9/6/22