

Policy and Procedure Title:	Corporate Compliance Education & Training Policy
Policy Owner:	Quality Assurance
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Approved by:	Valerie Way, President and CEO

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 Board of Directors, staff, volunteers/interns, vendors and contractors.

Definitions:

N/A

Policy:

It is the Policy of Mental Health Association of Rochester to ensure that all Affected Individuals receive formal training relating to the Mental Health Association of Rochester’s Compliance Program. The Mental Health Association of Rochester will ensure that all training is 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 Mental Health Association of Rochester to ensure that Affected Individuals in identified risk areas, and members of the Board of Directors 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 Mental Health Association of Rochester.

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

Procedure:

1. The Compliance Officer/CEO is responsible for developing 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:
 - Mental Health Association of Rochester 's Compliance Plan;
 - Standards of Conduct and other related written guidance;
 - Federal False Claims Act;
 - New York False Claims Act;
 - Whistleblower Protections;
 - Risk areas of the Mental Health Association of Rochester;
 - The role and responsibilities of the Compliance Officer and the Compliance Committee;
 - Communication channels (name of Compliance Officer, reporting mechanisms, anonymous reporting mechanism);
 - Mental Health Association of Rochester'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 Mental Health Association of Rochester'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 Mental Health Association of Rochester responds to reports of compliance concerns, including the investigation process and corrective actions;
 - Mental Health Association of Rochester'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 Mental Health Association of Rochester funds;
 - Payment or compensation of gifts in return for referrals of service recipients or business contracts;
 - Medicaid requirements specific to Mental Health Association of Rochester '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 Mental Health Association of Rochester, 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, to evidence that everyone attending a seminar receives the same instruction.

5. As part of their initial orientation, each employee, including the Chief Executive and other senior administrators, and Board members shall receive a training session within the first 30 days of employment or association with the Mental Health Association of Rochester. Each party will receive an introduction to Mental Health Association of Rochester'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 (attached to this Policy), 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 of receipt of training. 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 sessions.
8. 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 Mental Health Association of Rochester 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 Mental Health Association of Rochester. For purposes of this Procedure, contractor and vendor are defined as:
 - Any independent contractor, contractor, subcontractor, or other person who, on behalf of the Mental Health Association of Rochester, 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 Mental Health Association of Rochester.

11. Mental Health Association of Rochester 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 Board of Directors on all education seminars related to the Compliance Program. This information will be trended and analyzed to evaluate and ensure that the Mental Health Association of Rochester has an effective Compliance Program.
13. All education and/or training related to the Compliance Program will be incorporated into the Mental Health Association of Rochester'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.
14. As part of its ongoing auditing and monitoring process in its Compliance Program, Mental Health Association of Rochester will review this policy based on changes in the law or regulations, as Mental Health Association of Rochester'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 Mental Health Association of Rochester'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.
15. 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 Governing Body on a regular basis.
16. Mental Health Association of Rochester will retain this policy and all subsequent revisions, and any related documentation will be retained for a period of, at minimum, six years.

Regulatory References:

Social Service Law 363-D
18 NYCRR Part 521