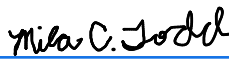




Section: Compliance	Policy Name: Development of Compliance Program Policies and Procedures	Policy Number: 10.02
Owner: Chief Compliance Officer	Reviewed By: Mila C. Todd	Total Pages: 4
Required By: <input checked="" type="checkbox"/> BBA <input checked="" type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input type="checkbox"/> Other (please specify): _____	Final Approval By:  Mila Todd (Mar 31, 2023 05:13 EDT)	Date Approved: Mar 31, 2023
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify): _____	Line of Business: <input checked="" type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): <input checked="" type="checkbox"/> Healthy Michigan _____ <input checked="" type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> SUD Medicaid <input checked="" type="checkbox"/> MI Health Link	Effective Date: 01-01-2014

Policy: The Southwest Michigan Behavioral Health (SWMBH) Compliance Program is structured on the program integrity requirements of 42 CFR §438.608 and the guidance provided by the United States Department of Health and Human Services (DHHS) Office of Inspector General (OIG). The Chief Compliance Officer (CCO) is responsible for directing the implementation of a compliance program to ensure that services are provided in compliance with all applicable federal, state, and local laws and regulations. It is necessary that written compliance policies and procedures are developed and distributed that identify specific organizational areas of risk and to provide guidance to all employees regarding compliance with ethical standards and applicable laws and regulations. Southwest Michigan Behavioral Health is committed to maintaining an effective program for promoting compliance with the laws, rules and regulations. All compliance related policies should be developed and maintained under the direction of the CCO.

Purpose: The purpose of this policy is to outline the steps undertaken by Southwest Michigan Behavioral Health in creating compliance program policies and procedures addressing all applicable statutes, rules and program instructions that apply to each function of or department within Southwest Michigan Behavioral Health.

Scope: SWMBH Chief Compliance Officer; SWMBH Program Integrity & Compliance Department; SWMBH Compliance Oversight Committee

Responsibilities:



SWMBH's Chief Compliance Officer through the Program Integrity & Compliance department is responsible for promulgating compliance policies and procedures to implement SWMBH's Compliance Program.

SWMBH's Compliance Oversight Committee is responsible for oversight of SWMBH's Compliance Program, including policy and procedures.

Definitions: None

Standards and Guidelines:

- A. The basic legal standards directly affecting Southwest Michigan Behavioral Health include, as applicable:
 - i. Section 1909 of Title 19 of the Social Security Act (SSA), as amended;
 - ii. The Medicaid Managed Care Final Rule, 42 CFR Parts 400 et al.;
 - iii. Patient Protection and Affordable Care Act;
 - iv. HITECH HIPAA Omnibus Rule;
 - v. 42 CFR Part 2;
 - vi. Health Care Fraud and Abuse legal prohibitions, as referenced in the above statutes, and including:
 - a. The Federal Anti-Kickback statute at 42 USC 1320a-7b(b), prohibiting knowing and willful solicitation, receipt, offer, or payment of remuneration in return for referring a customer or services under a federal health program;
 - b. The Stark Law at 42 USC Section 1395nn and as implemented by 42 CFR 411 and 424 relating to self-referrals by physicians;
 - c. The Federal False Claims Act;
 - d. The Deficit Reduction Act of 2005
 - vii. Applicable Michigan statutes, in particular:
 - a. The Michigan Medicaid False Claim Act (MCL 400.601 et/ seq.), addressing such issues as:
 - i. Billing for Services Not Rendered;
 - ii. Billing Without Reporting Other Resources;
 - iii. Billing for a Brand Name Drug Not Dispensed;
 - iv. Billing for Unnecessary Services resulting in inappropriate or otherwise excessive payment;
 - v. Billing a Date of Service Other Than the Actual Date the Service was Rendered;
 - vi. Receiving Kickbacks;
 - vii. Fraudulent Cost reports;
 - b. The Michigan Social Welfare Act (MCLA 400.111d);
 - c. The Michigan Public Health Code (MCLA 333.16226); and
 - d. The Michigan Mental Health Code (MCLA 330.1400)



References: 42 CFR §438.608

Attachments: None.

10.02 Development of Compliance Program

Final Audit Report

2023-03-31

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