

Shaker Place Rehabilitation and Nursing Center



Corporate Compliance Program

SHAKER PLACE REHABILITATION AND NURSING CENTER

Corporate Compliance Program

Statement of Philosophy

Shaker Place Rehabilitation and Nursing Center (Shaker Place) shall establish a facility-wide program of Corporate Compliance designed to monitor and assure certain standards of performance which may be established by federal, state and/or local regulations, or facility specific policies or procedures. Part of the program includes educating all new and current employees on the policies and procedures of Shaker Place's Corporate Compliance Program. The program has been created and designed in conjunction with our dedication to deliver the highest quality of care to Shaker Place residents.

The Shaker Place Corporate Compliance Program will also be in conformance with the Albany County Corporate Compliance Plan.

Governance and Oversight

The Governing Authority for Shaker Place Rehabilitation and Nursing Center shall participate in the Corporate Compliance Program. The chairperson of the Authority has delegated the responsibility to the Albany County Elder Care Committee chairperson, or their designee. The Elder Care Committee chair has appointed Shaker Place Rehabilitation and Nursing Center's Executive Director, or his designee, to be the chairperson of the Corporate Compliance Program.

The Elder Care Committee chairperson, or their designee, will attend all meetings of the Corporate Compliance Committee and report back, as necessary, the information to the Albany County Governing Authority.

Purpose and Authority

Shaker Place shall establish a Corporate Compliance Committee which shall encompass organizational-wide responsibility for matters concerning compliance with issues enumerated below. The Corporate Compliance Committee will also serve as a standing subcommittee of the facility's Quality Assurance Committee.

The purpose of the Corporate Compliance committee shall be to monitor operational compliance in a number of areas which may include, but not necessarily be limited to:

1. Quality of Care
2. Quality of Life
3. Resident Behavior and Facility Practices
4. Resident Rights
5. Employee Screening and Credentials Verification
6. Gifts and Gratuities
7. Resident Inducements
8. Vendor Agreements and Purchasing Practices
9. Resident Referrals and Admission Practices

10. Contracts for Consulting Services
11. Leases and other contracts
12. Physician and other Practitioner Agreements
13. Licensing and Certification
14. Conflicts of Interest
15. Arms' Length Transactions
16. Billing
17. Medical Record Documentation
18. Medically Necessary Services
19. Cost Reporting and Financial Statement Preparation
20. Compliance Oversight
21. Employee Code of Conduct including Failure to Report
22. Disciplinary Procedures including Failure to Report
23. Confidentiality of Compliance Records
24. Applicable Federal, State, County, or Municipal Regulations, Rules, and/or Statutes

Meetings

Corporate Compliance Committee meetings may be called by the Chairperson at any time without notice. Appointments to or the composition of the Corporate Compliance Committee may also be changed at any time at the discretion of the Corporate Compliance Officer and with the concurrence of the Executive Director, and such changes shall not require a revision of the written Corporate Compliance Program as stated herein.

The Corporate Compliance Committee shall meet regularly and periodically but not less than quarterly. The Committee will maintain minutes of its activities, violations, if any, and corrective actions that may be taken.

Parameters and Responsibilities

The Corporate Compliance Committee will be responsible for overseeing corporate compliance by reviewing compliance to regulation and facility policy. The Corporate Compliance Committee will also be responsible for the development of organizational policy in the following specific operational areas:

1. Gifts and Gratuities
2. Resident Inducements
3. Vendor Agreements and Purchasing Practices
4. Resident Referrals and Admission Practices
5. Contracts for Consulting Services
6. Leases and other contracts
7. Physician and other Practitioner Agreements
8. Licensing and Certification
9. Conflicts of Interest
10. Medically necessary services
11. Employee Code of Conduct
12. Employee Screening and Staff Credentialing

The Corporate Compliance Committee shall establish a procedural mechanism to identify those issues which may require self-reporting to the Office of the Medicaid Inspector General (OMIG). The Corporate Compliance Committee may select to use the services of retained legal counsel to assist in the determination of matters of non-compliance and the reportability of same. Legal counsel shall be designated to assist the Committee in formulating any and all reports to be made to OMIG.

It is the responsibility of all personnel to participate in good faith in the compliance program and to report suspected compliance issues as they may arise. As such, any Shaker Place personnel, including employees, persons associated with Shaker Place, senior management and governing board members, may contact the Compliance Office with any compliance questions or issues. They can do so by either contacting the Compliance Officer directly or utilizing the designated Shaker Place anonymous Compliance Hotline.

The Corporate Compliance Committee will establish a means of communication by which it shall report to the Quality Assurance Committee. The Corporate Compliance Committee shall also establish a reporting mechanism which shall be used to investigate reports of non-compliance and develop corrective plans of action to address non-compliance issues.

Training and Education for Policies and Procedures

The Compliance Committee, or designee, will develop and coordinate educational efforts to ensure all staff are familiar with the Corporate Compliance program and expectations. The Compliance Committee, or designee, will coordinate the education for new employees as well as annual training for all staff. The Compliance Committee, or designee, will maintain a record of personnel who have attended such training.

Compliance training will relate to compliance expectations and pertinent legal requirements, including but not limited to:

- Federal False Claims Act
- Administrative remedies for false claims and statements established under 31 U.S.C. §3801, *et seq.*
- State laws pertaining to civil or criminal penalties for false claims and statements
- Shaker Place's policies and procedures for detecting and preventing fraud, waste and abuse, including:
 - Employee Code of Conduct
 - False Claims Act
 - "Red Flag" Identity Theft Program
 - Reporting of Suspected Violations
 - Accurate Billing Practices
 - Whistleblower Protections
- Such additional information as the Compliance Officer / Committee may from time to time deem appropriate.

Problems and Plans

As the Committee functions in its ongoing capacity, it will identify operational problems which may exist at the facility. Upon identification, it shall be the responsibility of the Committee to delineate the identified problems in order of priority. Each identified problem shall require the Committee to develop an action plan designated to implement corrective action which will result in the elimination or rectification of the problem. The Corporate Compliance Committee, along with the HIPAA Compliance Committee, shall be the only subcommittee(s) of the Quality Assurance Committee (if it so chooses) authorized to develop and implement corrective plans of action without Quality Assurance input, review, or approval. The Corporate Compliance Committee shall, however, report the results of its corrective plans of action to the Quality Assurance Committee.

Fundraising/Donations

As a not-for-profit organization, Shaker Place Rehabilitation and Nursing Center may, from time to time, hold, sponsor, and/or promote certain fundraising events or campaigns. It shall be the responsibility of the Corporate Compliance Committee to review all fundraising activities to assure compliance with all applicable laws and/or regulations. No fundraising activity shall be initiated without the prior approval of the Committee. Additionally, the Committee shall review donations made to the organization to assure compliance with applicable laws and/or regulations.

Committee Records

The Corporate Compliance Chairperson shall appoint a committee secretary whose role it shall be to maintain committee minutes. Committee minutes and work product of the Corporate Compliance Committee are considered confidential and part of the Quality Assurance process. Committee records are subject to the same restrictions and parameters stated in the facility's Quality Assurance Program/Policy. The Corporate Compliance Committee shall maintain a log which shall reflect Corrective Plans of Action activity and implementation.

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