

## **MEDICAID COMPLIANCE PROGRAM**

### **False Claims, Fraud Prevention and Detection**

The Board of Education recognizes the importance of detecting and preventing Medicaid fraud, waste and abuse. The purpose of this policy is to set forth the procedures that will be used by the Bellmore-Merrick Central High School District (hereinafter referred to as the "School District") to respond to reports by employees and others of activity which might violate applicable Medicaid laws or regulations, which includes but is not limited to, submitting and/or receiving claims in a manner which does not meet the Medicaid program requirements, as applicable.

#### Policy/Procedure

Each employee must act in an ethical manner and adhere to applicable legal requirements in the course of performing their duties on behalf of the School District.

Any employee of the School District who has knowledge of activities that he or she believes may violate a law, rule or regulation has an obligation to promptly report this matter to the designated Compliance Officer and/or his or her immediate supervisor. Reports may be made anonymously and employees will not be penalized for reports made in good faith. Failure to report known violations, failure to detect violations due to negligence or reckless conduct and intentionally making false reports shall be grounds for disciplinary action, including termination. The appropriate form of discipline will be case-specific and in accordance with applicable law and/or existing collective bargaining agreements. The District will not retaliate against any employee who makes a credible report of Medicaid fraud, waste or abuse.

Necessary steps will be taken to communicate appropriate standards and procedures to all employees by disseminating information that explains what is required. This shall include the posting of this policy.

In order to detect and prevent fraud, the Board of Education authorizes the utilization of monitoring and auditing systems that are reasonably designed to detect misconduct by its employees, contractors and/or agents. The design of said system will be the responsibility of the District's Internal Auditor.

Once a suspected violation has been noted, the Board of Education, acting upon the recommendation of the Superintendent of Schools and the Compliance Officer, will take reasonable steps to respond appropriately and to prevent further violations which shall

include any necessary modifications to its program designed to prevent and detect violations of applicable law.

All contractors and agents who furnish or authorize the furnishing of Medicaid services on behalf of the School District or perform billing or coding functions, are required to adhere to Medicaid rules and regulations, to communicate these policies and procedures to their employees and are responsible for ensuring that such communication occurs.

#### Appointment of Compliance Officer

The Board of Education shall appoint a Compliance officer, upon the recommendation of the Superintendent of Schools, who shall have the authority to:

1. Oversee and monitor the implementation of the School District's compliance policy;
2. Consult outside counsel as legally necessary;
3. Conduct internal investigations and audits relating to compliance issues;
4. Review all documents and other information relevant to Medicaid compliance activities; and
5. Maintain direct access to the Superintendent of Schools and, when appropriate, the Board of Education.
6. Receive and investigate complaints and or reports of Medicaid fraud, waste or abuse.

#### Training and Education

The Compliance Officer shall implement a training program to help employees identify, prevent and report non-compliance with applicable law. The Board of Education expects all employees to participate in general compliance training upon initial hire or periodically thereafter and must acknowledge attendance at each session. Documentation of attendance will be maintained by the Compliance Officer. Specialized training will be provided annually to employees, whose actions directly affect submission and reimbursement of claims, including those involved in dispensing, billing and reimbursement of Medicaid claims.

#### Investigation

Through the Compliance Officer, the School District shall promptly respond to and take appropriate action for detected offenses.

A. Internal Investigation

The Compliance Officer will conduct a timely and reasonable investigation of all credible reports of suspected non-compliance. A reasonable inquiry includes a preliminary investigation by the Compliance Officer or other compliance personnel.

If an internal investigation results in the discovery of misconduct that may violate applicable laws or regulations, the Compliance Officer must notify the Superintendent of Schools and Board of Education.

B. Government Investigation

If a government investigation arises, the School District aims to be forthright and co-operative with the investigation.

Distribution

This policy will be made available on the School District's website. In addition, hard copies will be made available to new employees during the orientation process and current employees in those departments submitting and/or receiving claims.

Cross-ref: Code of Ethics, Policy No. 8:06.1

Ref: False Claims Act, 31 U.S.C. §3729, et seq.  
 NY State Finance Law §1087, et seq.  
 NY Social Services Law §145-b  
 NY Social Services Law §145-c  
 NY Social Services Law §363-d  
 NY Labor Law §740  
 18 NYCRR §521.1, et seq.

**Approved:** 03/03/2010  
**2<sup>nd</sup> reading:** 03/03/2010  
**1<sup>st</sup> reading:** 02/03/2010