

New York State Office of Medicaid Inspector General

Compliance Alert

2011 - 06

BUREAU OF COMPLIANCE DOCUMENTION REVIEW CHECKLIST

July 5, 2011

New York State Social Services Law Section 363-d and 18 NYCRR Part 521 require certain healthcare providers to have reasonably effective compliance programs in order to participate in the New York State medical assistance (Medicaid) program. The New York State Legislature determined that requiring Medicaid providers to have reasonably effective compliance programs is the most effective way to control fraud, waste and abuse in the Medicaid program. The New York State Office of the Medicaid Inspector General's (OMIG's) Bureau of Compliance conducts Effectiveness Reviews of Medicaid providers to assess if Medicaid providers have reasonably effective compliance programs.

Purpose of this Compliance Alert:

In an effort to enhance transparency and enhance the effectiveness of compliance programs, the Bureau of Compliance is publishing the attached checklist to identify for Medicaid providers documentation that OMIG may request at the time of an effectiveness review.

As the Bureau of Compliance conducts effectiveness reviews and focused reviews of providers' compliance programs, providers will be asked to provide OMIG with the documentation that evidences the existence of an effective compliance program. The attached form is an example of the types and kind of information that the Bureau will review. It must be noted that the attached form is an example only and that effectiveness reviews conducted by the Bureau consider the uniqueness of providers even within the same provider type. As noted on the bottom of the form, additional documentation may be requested based on review of the requested documentation. Providers can submit additional documentation which will be utilized by the reviewers to evaluate and assess the effectiveness of the Provider's compliance program.

New York State Office of Medicaid Inspector General Bureau of Compliance



Effectiveness Review Tool-Documentation Review Checklist

Sample	Documentation requested for each sample	Comments
	and/or Area	
Employee Records	 Copy of xx employee received the code of conduct. Copy of xx employee received confirming the employee received initial compliance training. Copy of xx employee received confirming the employee received confirming the employee received confirming the employee received confirming the employee received compliance training. 	
Educational Training	 Copy of Education Training material utilized for compliance training upon hire and annually. Copy of any additional compliance related training that has occurred outside of the training done upon hire and annually. Copy of the participant's sign in sheet. Copy of the pre-test and post-test results. 	
Compliance Logs and Investigations	Copy of xx compliance hotline calls/logs including, but not limited to how the complaint was: Received Recorded Investigated Resolved Further action taken	
Employee Disciplinary Records	Copy of xx employee disciplinary or termination records to include, but not limited to: Date of incident Nature of the allegation Steps taken Information revealed during	

	 investigation Findings Outcome and resolution Corrective action plan, if warranted 	
Compliance Risk Areas/ Internal Audits	Copy of xx internal audits documentation to include, but not limited to: • Who Initiated audit (organization vs. outside agency) • Scope and Method • Findings • Recommendations • Corrective action plan • Continued follow up plan, if warranted • If the issue involved an overpayment, when was it reported, explained and repaid to OMIG	
External Audits	Copy of xx external audits documentation to include, but not limited to: • Who Initiated audit (organization vs. outside agency) • Scope and Method • Findings • Recommendations • Corrective action plan • Continued follow up plan, if warranted • If the issue involved an overpayment, when was it reported, explained and repaid to OMIG	
Reports of Intimidation and Retaliation	Copy of xx reports of intimidation and retaliation to include, but not limited to: Date of incident Nature of the allegation Steps taken Information revealed during investigation Findings Outcome and resolution	

Quality of Care re Complaints / Mandatory Reporting
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Based on review of the above, additional documentation may be requested. Please provide any additional documentation which would assist the reviewers in evaluating your compliance program. The requested sample numbers will vary depending on Provider type and size.

Acknowledgement: The NYS Office of the Medicaid Inspector General acknowledges the assistance of the Centers for Medicare & Medicaid Services (CMS) in making available a similar tool that CMS uses when it conducts compliance assessments of private entities it contracts with to offer health and drug plans in the Medicare program.