



STATE OF NEW YORK
OFFICE OF THE MEDICAID INSPECTOR GENERAL
800 North Pearl Street
Albany, NY 12204

ANDREW M. CUOMO
GOVERNOR

JAMES G. SHEEHAN
MEDICAID INSPECTOR GENERAL

DOCUMENT #7

DATE

Compliance Officer's Name
Compliance Officer's Title
Provider's Name
Street Address
City, State ZIP

Re: New York State Office of Medicaid Inspector General
Date of ER Compliance Program Effectiveness Review

Dear **Name of Compliance Officer**:

By letter dated **Date of initial letter**, the New York State Office of the Medicaid Inspector General (OMIG), an independent office within the New York State Department of Health, notified **Name of Provider's CEO**, Chief Executive Officer of **Name of Provider** that OMIG's Bureau of Compliance will conduct an effectiveness review of **Name of Provider** on **Date of Effectiveness Review** at **Name of Provider**. Compliance program effectiveness reviews assess providers' compliance programs to determine if compliance programs are reasonably effective and meet the requirements of New York State Social Services Law Section (SSL) 363-d and 18 NYCRR Part 521.

On **Date of ER**, OMIG's Bureau of Compliance conducted the onsite effectiveness review of your organization's compliance program. Subsequent to the onsite review, follow-up questions were posed to you to obtain clarification and additional information. This report is based upon information obtained as part of onsite review and the follow-up requests for information.

Executive Summary

Name of Provider compliance program was observed to be reasonably effective/**not reasonably effective** in meeting the requirements of New York State SSL Section 363-d and 18 NYCRR Part 521.

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Observations

1. The documentation that OMIG requested ...
2. During the Effectiveness Review, OMIG representatives asked that individuals holding previously identified positions at be made available for interviews. Those interviews were conducted to verify the effectiveness of AMC's compliance program. Cooperation was ...
3. Did compliance plan contain requirements of SSL Section 363-d subsection 2's and 18 NYCRR Section 521.3 (c)?
4. The governing board, the Chief Executive Officer, senior management and the employees were/ **were not** all engaged in the compliance program and went out of their way to demonstrate a high level of engagement in the compliance program to ensure that it is effective.
5. Use of a self assessment tool ...
6. Information regarding the compliance program, compliance officer, and how to report compliance issues were/ **were not** observed during the facility tour in highly visible locations.
7. Additional observations ...

Best Practices – as identified for **Name of Provider**:

- 1.
- 2.
- 3.

Enhancement Opportunities for **Name of Provider**:

- 1.
- 2.
- 3.

Insufficiencies for **Name of Provider**:

- 1.

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Conclusion:

The New York State Office of the Medicaid Inspector General appreciates the opportunity to review the effectiveness of **Name of Provider's** compliance program. The Bureau of Compliance observed, during the compliance program effectiveness review conducted on **Dates of Effectiveness Review** and through its follow-up inquiries, that **Name of Provider's** compliance program is reasonably effective in meeting the requirements of New York State SSL Section 363-d and 18 NYCRR Part 521. Additionally, OMIG requests **Name of Provider's** approval to refer to specific **Name of Provider's** "best practices" when it communicates with other Medicaid providers in discussions on their compliance programs. We look forward to working with **Name of Provider** as it considers incorporating the above enhancement opportunities into its compliance program to further compliment the program's effectiveness. We commend you in your best practices.

Sincerely,

James Sheehan
Medicaid Inspector General

cc: **Name of CEO**