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## The Center for Discovery Corporate Compliance

Steve Mosenson,  
General Counsel

THE  
CENTER FOR  
DISCOVERY

Health. Wellness. And Wonders.

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Hello, my name is Steve Mosenson, and I am the Center for Discovery's in-house legal counsel and corporate compliance officer. This program presents the Center for Discovery's Corporate Compliance program and some related material. This program deals with the business of The Center for Discovery, and provides information that you should know in order to maintain the highest standards of ethics and integrity in our business practices.

Corporate Compliance

## Our Mission and Vision

**Our Mission:**  
The Center for Discovery offers individuals with multiple disabilities and medical frailties, and their families, innovative educational, clinical and social experiences designed to enrich their lives through personal accomplishment.

**Our Vision:**  
The Center for Discovery is inspired by people with disabilities to evolve new models for living.

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We start with why we are here. As a not-for-profit corporation, the Center for Discovery has a charitable purpose, which is to offer individuals with multiple disabilities and medical frailties, and their families, innovative educational, clinical and social experiences designed to enrich their lives through personal accomplishment. We have a vision to be inspired by people with disabilities to evolve new models for living.

Corporate Compliance

## Center for Discovery Business Integrity Program

- Approved by the Board of Directors.
- Demonstrates good corporate citizenship.
- Compliance with laws and regulations.
- Commitment to integrity.

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The Center for Discovery has adopted its Corporate Compliance Plan as a Business Integrity Program. We intend that this be a positive statement by our Board of Directors and by everyone associated with The Center, to demonstrate that we are good corporate citizens, that we comply with all applicable laws and regulations, and that we are committed to the highest standards of business ethics and integrity.

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## Current Business Environment

Increasing quality and fiscal audits.

Focus on Medicaid funded programs.

Detecting fraud, waste and abuse in the Medicaid program.

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We do this because we are stewards of public funds. Much of the work done here at The Center is paid for by public benefit programs, with a large part coming from Medicaid. In these times of economic stress, it is important that every dollar of public funds be used for their intended purpose, and all of the regulatory agencies that fund and regulate The Center's activities seek to hold us accountable for the use of those funds, through quality reviews and fiscal audits.

Corporate Compliance

Office of the Medicaid Inspector General (OMIG)

**The Office of the Medicaid Inspector General**

- Improve and preserve the integrity of the Medicaid program.
- Conducting and coordinating fraud, waste and abuse prevention and detection.
- Dennis Rosen, Medicaid Inspector General

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One of the things that New York State did was to create the Office of the Medicaid Inspector General, the OMIG, to conduct and coordinate fraud, waste and abuse prevention activities in New York

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## Mandatory Compliance Program

### Social Services Law § 363-d

Medicaid providers must develop and implement compliance programs aimed at detecting fraud, waste and abuse in the Medicaid program.



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One thing that the OMIG did was to have the New York State Legislature pass a law that requires all Medicaid providers to have a program to monitor their use of Medicaid money and ensure that it is used properly.

Corporate Compliance

The Center's Commitment to Business  
Integrity: Corporate Integrity Department

Quality Improvement.  
Corporate Compliance.

- Program Reviews, Investigations and Audits
- Best Practices

The Corporate Integrity Department is independent of  
the program departments.

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We at The Center have taken a positive approach by committing to our Business integrity Program.

Part of that commitment is the creation of the Corporate Integrity Department. This Department is comprised of the Quality Improvement, focusing on agency program operations, and Corporate Compliance, focusing on the agency's business functions. Each of these departments focus on survey, audits and investigations of incidents and other programmatic and business functions, all towards development and implementation of best practices across the agency.

The departments included in Corporate Integrity are independent of the program departments.

## First Element: A Code of Conduct

Center's commitment to ethical conduct.

Guide for employees.

### CORPORATE COMPLIANCE

#### CORPORATE COMPLIANCE HOTLINE

**1-845-707-8811**

or Extension 8811 from any Center phone

- Download the Hotline Q and A Sheet [PDF](#)
- Download the Agency Code of Conduct [PDF](#)
- Download the Corporate Compliance Program [PDF](#)

THE CENTER FOR DISCOVERY, INC.

#### Help Us Maintain Our Ethical Standards

If you believe that a member of The Center community is not living up to the highest standard of ethics and integrity please call:

**1-845-707-8811**

Or call ext. 8811 from any Center phone  
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Let's talk about the eight elements of the Business Integrity Program.

First, we have a Code of Conduct that governs all of our business practices and expectations, and commits each of us to the highest standards of ethics and integrity. You can get a copy of this Code of Conduct by downloading it from the Discovernet Home Page. It will also be included in the new Human Resources manual which will be distributed to every employee and is also on the Center for Discovery website. All Policies and Procedures related to the Corporate Compliance Program can also be found on the Discovernet Home Page as well as the Center for Discovery Website. <http://www.thecenterfordiscovery.org/quality-improvement-and-compliance/#CompliancePolicy>. We will talk about a few of the provisions of the Code of Conduct later in this program.

## Second Element: Designation of a Compliance Officer

- A. Steve Mosenson, 845-707-8453
- B. Resource for the Center community.
- C. Guidance to departments.

The second element of our Business Integrity program is the appointment of a compliance officer, which is me, Steve Mosenson. Because The Center for Discovery views my responsibilities are broader than strictly regulatory compliance, I have been given the title of Corporate Integrity Officer, and I oversee all of the Corporate Integrity functions of The Center, including QI, corporate compliance and some safety and security functions. My goal is to ensure that everyone who works at The Center has the tools that they need to have so that they are confident that what they are doing complies with all legal requirements and ethical standards.

## Additional Elements

### Third Element:

Training and Education of all Affected Individuals

### Fourth Element:

Open Lines of Communication

Our goal is to train every Center employee and associate about the Business Integrity Program, and to maintain open lines of communication so that everyone who has a question or concern has a means to ask questions, raise issues or seek guidance.

## Additional Elements (Cont.)

### Fifth Element:

Policies that Encourage and Reinforce Participation

### Sixth Element:

Identify Risk Areas

### Seventh Element:

Responding to Compliance Issues

We also develop policies and procedures that further our mission, and that ensure that everyone associated with The Center acts in a manner consistent with our high values. Additionally, we will periodically conduct formal assessments in order to determine where our risk areas are, and take steps to minimize the risks that we have identified. These may include internal and/or external audits, as appropriate.

In the event that we learn of a concern that our standards are not being met, we will take steps to determine the facts and circumstances, and take action to not only ensure that the health, safety and well-being of our program participants is maintained, but that all of our business ethics standards are being met.

If, during the course of internal audits or other actions, issues in variance to our policies and procedures are identified, we will work to correct them promptly and thoroughly. This includes refunding Medicaid overpayments and, when appropriate, self-reporting to DOH and/or OMIG, as appropriate. Where internal policies are found to be insufficient, they will be amended, and additional trainings conducted, to prevent potential recurrence.

Corporate Compliance  
Eighth Element: Non-Intimidation and  
Non-Retaliation Policies

- Non-retaliation policies apply uniformly to all staff.
- No retaliation for reporting compliance issues. An employee who reports fraud will be offered protections as defined by law.
- An employee who is a participant of the wrongful activity is not protected by making a report about that activity.
- If the claim is not substantiated and it is determined that an employee's filing the claim was done maliciously, the person will be disciplined.

You should know that we have a very strong policy of non-retaliation and non-intimidation. If you do have a question or concern related to regulatory or ethical compliance, you should know that you will not be retaliated against in any way because you made a report or asked a question.

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## US and NYS False Claims Acts

1. Federal False Claims Act, 31 USC § § 3729-3733
2. NYS False Claims Act, State Finance Law, § § 187 – 194

The Acts permit a person with knowledge of fraud against the government, referred to as the “qui tam plaintiff” to file a lawsuit on behalf of the government against a person or business that has committed unlawful activity.



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You should know about the false claims acts, which provide for a recovery by plaintiffs if a complaint is made and the business fails to address documented wrongful conduct.



Corporate Compliance

## Corporate Compliance

The Center for Discovery prohibits the knowing submission of a false or fraudulent claim for payment.

All Center employees and contractors that reasonably suspect or are aware of the preparation or submission of a false claim or report or any other potential fraud, waste, or abuse are required to report such information.

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However, The Center for Discovery prohibits the knowing submission of a false or fraudulent claim for payment, and we do not tolerate any action or omission that would constitute a false claim. All employees and contractors have the responsibility to report any suspicion that a false claim was documented or submitted, so that we can investigate and take action to correct the situation.

## Audits and Recoveries

- The Medicaid Inspector General conducts audits. Repayments can happen in two circumstances.
  - A. Fraud
  - B. Improper practices

We take our responsibilities very seriously. The government payers will audit us to determine if public funds were used inappropriately, and there are steps that we can take to ensure that we are using those funds in the correct way, and that there will not be a repayment. When the OMIG or other funding agencies audit us, which they do regularly, they can recoup funds based on two principles: fraud and improper practices.

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## Defining Fraud

- Presenting or causes to be presented any false claim for payment.
- **KNOWINGLY** making, using, or cause to be used false records to make a claim and/or avoid a payment.
- Providing false information by remaining “**deliberately ignorant**” of the truth and falsity of the situation.
- Providing false information with “**reckless disregard**” of the truth or falsity.

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Fraud is the intentional presentation of a false claim for payment. Intent can be shown by a knowing submission of a false claim, or can be presumed by being deliberately ignorant of the truth or falsity of the claim or having reckless disregard for the truth of the claim. The most obvious example would be a bill that was submitted for a service that was not done, or a record that was fabricated or improperly changed after the fact.

## What is an Improper Practice?

- Simple error
- No intent to defraud required
- Regardless of whether or not a service was delivered
- “Extrapolation” can be very expensive

We do not tolerate any fraudulent activities here at The Center, and will take immediate action if they are discovered.

The OMIG will also take money back if there are improper practices related to our services. Here, the OMIG will look to see if there are simple errors in record-keeping, and will take money back if there are mistakes or improper omissions in our records. There is no intent required here, a simple mistake will result in a payback.

This is a record review, and so it is irrelevant if the service was actually delivered properly. The OMIG can go back six years, so records that are being produced today to support a bill to Medicaid may be looked at six years from now, long after the service was rendered and the record made. A simple error can result in a large recoupment, through the use of extrapolation. The OMIG cannot look at every single record that we produce, so they take a sample.

For example, the OMIG may look at two years worth of bills from the clinic, which is many thousands of bills. They will take 200 individual bills, and if there are errors in 10% of those 200 bills, they will take back 10% of all the money paid to The Center for that two-year period. So you can see, even a simple error such as putting February 30th on a bill can be very expensive. For this reason, I want to review basic rules on record-keeping for Medicaid bills.

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# Documentation 101



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Documentation 101 covers the basic rules for making clinical and program notes that are used to support bills to government agencies for services done here at The Center.

## FOR CLINICAL RECORDS:

- ❑ **DO** use black or blue ink when making entries in a record. **DO NOT** use pencil, red ink or markers in the record.
- ❑ **DO** sign each entry with your full name, title and current date. If using initials, make sure they are legible and you record your full name in the key.

For clinical records, make your notes in blue or black ink, not red pen, pencil, marker or crayon.

If you remember one thing about this presentation, please remember that when you make a note on a resident's file, you should sign your name, title and put the date that you signed the record. If there is an initial key on the paper, you can put your initials.

## Documentation 101

- **DO NOT** use an individual's or your nickname in a record. Use only the full name.
- **DO NOT** use White Out in a resident's record under any circumstances. Should you make an error, draw a single line through the error. Correct the error, initial and date the change. Use TODAY'S date on the document.
- **DO** make sure your handwriting is legible.
- **DO NOT** make an entry into a record and sign someone else's name.

Please use your real name. Even if everyone calls you Skipper, please don't sign your name "Skipper". Six years from now, when the OMIG is doing an audit, we don't want the only record of a service being done to be a record signed by someone long gone who used to be known as "Skipper." Likewise, please use the resident's real name, so we have a clear record of who did what to whom.

Yes, you can make mistakes, and there is a way to correct the mistake. The OMIG needs to see what the record said before the mistake, and what it said after the correction. So what you do is draw a single line through the incorrect material, and date the line today's date. Then you make the correction and sign the correction with your name, your title and the date the correction was made.

## Documentation 101 continued

- Documentation must be **contemporaneous**.
- When a supervisor signs off on a billing sheet that means the supervisor has checked the billing sheet and is verifying its accuracy.
- **DO NOT** write a service note if the service was not delivered.
- **DO NOT** shred any documents unless approved by a supervisor.

Documentation has to be contemporaneous to the service delivered, which means it has to be shortly after the service was rendered. Follow your program's protocols as to when the documents have to be created.

If you are a supervisor signing off on someone else's work, keep in mind that when you sign a paper, there is a presumption that you have read it, and that you believe that the contents are true. If the contents do not look correct, give the paper back to the person who created it and ask them to correct it.

Do not write a note if you did not do a billable service, and of course, do not destroy any records without a supervisor's permission.

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# Documentation 102



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Documentation 102 refers to the other most common written material prepared by staff, written reports of something that happened. Many of our staff prepare reports like thus, reporting on something that happened to a resident, a building, or a condition. There are a few simple rules that will ensure that these reports accurately tell the story of what happened.

## Remember the Seven Cs

1. **Contemporaneous:** Records should be written as close to the time as the activity that they are documenting. Date and sign the document when it is completed.
2. **Clarity:** Use plain language; avoid jargon and abbreviations not commonly understood.

The primary rule is that these records must be complete and accurate, just like clinical records .

You can follow the Seven Cs of good report writing.

1. **Contemporaneous.** The report should be done as close to the actual; event as possible, to ensure that you remember all of the facts and circumstances.
2. **Clarity.** Use plain language, avoid jargon. Someone who does not know all of the abbreviations that we use may have to read the report, so write the report for that uneducated third person.

## Seven Cs continued

3. **Concise:** Stick to the facts; do not editorialize. Be specific and give examples.
4. **Consistent:** Be consistent with Center for Discovery policies and procedures.
5. **Complete:** Have you made a full report? Have you told the entire story? Is there missing information that needs to be in the report for it to be understood?

3. Concise. Stick to the facts, do not give your opinion unless you are asked to.
4. Consistent. Report whether or not Center policies were followed.
5. Complete. Tell the full story. Include all important facts.

## Seven Cs continued

6. **Common Sense:** Would a reasonable third party read your report and understand the contents? Have you organized the information chronologically, or item by item in a coherent fashion?
7. **Confidentiality:** Keep private information private.

6. Common sense. Would the uneducated third party understand what happened? Have you organized the events, wither chronologically or by person, so that the full story has been told?
7. Confidentiality. Have you kept confidentiality? Have you used initials rather than full names?

## How to Report Issues

- If you believe that someone has committed an unethical business practice:
- Report to any supervisor, administrator, to the Corporate Compliance Officer OR

Focusing back on compliance issues, it is The Center's policy to respond to all questions or reports about violations of our ethical business practices. All managers and supervisors are aware of our corporate compliance responsibilities, and can direct you to the appropriate person to make your inquiry or report.

Corporate Compliance

## Business Integrity Hotline

### CORPORATE COMPLIANCE

CORPORATE COMPLIANCE HOTLINE

**1-845-707-8811**

or Extension 8811 from any Center phone

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#### Help Us Maintain Our Ethical Standards

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In addition, The Center for Discovery has a Business Integrity Hotline for questions and reports about ethical business practice violations. This telephone, at extension 8811, or 707-8811 from outside of the Center, is a voice mail box and is not answered by a live person. All messages are kept confidential.

Corporate Compliance

## Code of Conduct: Ethics

- Follow the laws and regulations that govern your work
- Act in the best interest of the people we serve, their families and the Center.
- Do not use confidential information for personal gain.
- Be honest in doing your job. Reports should be complete timely and accurate

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It is the responsibility of each of us to uphold the high ethical standards that we have adopted. Our Code of Conduct reflects that we all have a part to play in the mission of the Center for Discovery, and it is our responsibility to always act in the best interests of the people that we serve. That includes keeping information confidential, and being honest in all of our dealings with others.

## Code of Conduct: Conflicts

- Act in a manner consistent with our mission and values
- Avoid actual conflicts of interest and perceived conflicts of interest.
- Avoid gifts that may compromise your integrity and judgment

We should all try to avoid conflicts between our personal interests and those of the Center and the people served by the Center. It is for this reason that we prohibit gift giving and receiving, as they may give rise to an appearance of conflict of interest, or an actual conflict of interest, that could be harmful to the relationships that we foster. Everyone who receives services here should be confident that their caregivers have only their best interests at heart.

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## Code of Conduct: Cooperation

- Cooperate with all internal and outside investigations.

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Another aspect of our Code of Conduct is the expectation that everyone associated with the Center will fully and truthfully cooperate in all investigations. The only way that our high ethical standards can be maintained is if everyone cooperates and works together to fix problems as they arise.

## We each have great power . . .

- To positively affect people's lives

We all have great power to positively affect the lives of everyone served by The Center for Discovery.

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## Shared and Individual Responsibility

- Shared Responsibility with all members of the Center community
- Individual responsibility to do your best, adhere to the highest standards of ethics and integrity



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It is both a shared and individual responsibility. We each have an individual responsibility to do our best, and we all share collectively in the mission of The center for Discovery.

## Shared and Individual Responsibility

- Take pride in your good work
- Take pride of the Center's good work
- Stay committed to our high standards



We are all part of the Center for Discovery team. Take pride in your good work, take pride in the Center's good work, and stay committed to our high standards.

## Contact Information

Steve Mosenson  
General Counsel

Extension: 8453

Business Integrity Hotline:  
1-845-707-8811

