



The Connecticut
Department
of
Mental Health
and
Addiction Services
Compliance
Plan

**STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
CORPORATE COMPLIANCE PLAN
TABLE OF CONTENTS**

PREAMBLE

MISSION

I.	Introduction Purpose and Benefits of a Compliance Program	6
II.	Applicability DMHAS facilities	7
III.	Agency Compliance Program Compliance Expectation and Goals	7
IV.	Oversight Compliance Committee Compliance Officer	8
V.	Compliance Principles and Standards Employment Responsibilities Confidentiality Client Rights Safety Clinical Records Billing and Medical Necessity Documentation Auditing and Monitoring Monitoring of Compliance Standards and Effectiveness Financial Reporting Responsible Conduct of Research Kickback/Referrals/Inducements Gifts Recognizing and Avoiding Conflicts of Interest Sanction Screening Disclosure and Reporting Whistleblower Protection/non-retaliation Enforcement and Discipline Equal Opportunity Employment/Respect for Diverse Cultures and Religions	9, 10, 11

VI.	Education and Training	12
VII.	State of Connecticut Code of Ethics	12
VIII.	Attestation Statement	14

Addendum: **DMHAS POLICIES**

- Prevention of Fraud and Abuse
- Compliance Overview Expectations and Goals
- Code of Conduct
- Sanction Screening
- Client's Rights
- Billing and Documentation Compliance
- Audit of inpatient and outpatient services of paid claims
- Monitoring of Compliance Standards and Effectiveness
- Research Conduct/Institutional Review Board
- Gift's
- Reporting Compliance Concerns
 - Compliance Alert Line Link (CALL)
- Whistleblower Protection
- Sexual Harassment Policy
- Affirmative Action Policy
- Misconduct in Research



“Hope leads to Recovery”

Miriam Delphin-Rittmon, Commissioner



PREAMBLE

The Department of Mental Health and Addiction Services is a behavioral health care service agency that provides comprehensive, recovery-oriented services to adults with serious mental health and substance use disorders. The DMHAS service delivery system employs nearly 4,000 dedicated people throughout the state who work within a dynamic environment—one that changes rapidly to address cultural concerns, respond to research findings, and meet the needs of the people we serve.

The Department of Mental Health and Addiction Services’ Compliance Program is in place to ensure that our agency meets the highest possible standards for all relevant federal, state and local regulations, laws and guidelines. As employees of the DMHAS we have a responsibility to conduct ourselves with the highest ethical standards, integrity and compassion. The DMHAS Compliance Plan and Policies support these values.

Miriam Delphin-Rittmon, Commissioner
Miriam.delphin-rittmon@ct.gov

THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES

It is the mission of the Department of Mental Health and Addiction Services to improve the quality of life of the people of Connecticut by providing an integrated network of comprehensive, effective and efficient mental health and addiction services that foster self-sufficiency, dignity and respect.

THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES AGENCY COMPLIANCE PLAN

I. INTRODUCTION

The principal objective of this Agency Compliance Plan is to establish a culture within The Department of Mental Health and Addiction Services (DMHAS) that promotes prevention, detection, and resolution of any activities that do not conform to federal and state laws as well as the DMHAS' own business and ethic policies. A Compliance Program provides a framework for disseminating information and establishes mechanisms for investigating potential noncompliance. By supporting an environment of compliance, employees are encouraged to further the DMHAS' mission to provide quality care and to promote health and recovery to their clients.

The DMHAS can gain numerous benefits by implementing an effective Agency Compliance Program. These benefits include:

- A demonstrated commitment to ethical business practices;
- The development of effective internal procedures to ensure compliance with regulations, billing, reimbursement and coding rules;
- Streamlined operations through better communication and more comprehensive policies;
- Improved education and awareness for employees;
- Improved medical record documentation;
- The avoidance of potential liability arising from noncompliance;
- Reduced exposure to penalties;
- Improved quality of care
- Safe working environment

An effective compliance program sends an important message to employees. Having an Agency wide Compliance Program in place encourages an environment of quality and continuous improvement.

Recent passage of the American Recovery and Reinvestment Act (ARRA) and the Affordable Health Care Act demonstrates the federal and states' commitment to overseeing the health care delivery of services with the goal to reduce fraud, waste and abuse and improve quality of care while protecting the privacy of Personal Health Information.

Prevention of Fraud, Waste, and Abuse Policy: Commissioner's Policy Chapter 3.5

II. APPLICABILITY

The Department of Mental Health and Addiction Services has several health care facilities, including hospitals and clinics. The following facilities will be subject to this Plan:

- Office of the Commissioner
- Blue Hills Hospital
- Capitol Region Mental Health Center
- Connecticut Mental Health Center
- Connecticut Valley Hospital
- River Valley Services
- Southeastern Mental Health Authority
- Southwestern Mental Health System
- Western Connecticut Mental Health Network

All facilities listed above shall be referred to collectively as the “DMHAS” throughout this Compliance Plan.

The provisions of this Compliance Plan apply to everyone involved in overseeing, managing and operating all components of DMHAS.

The DMHAS expects all DMHAS Employees to be familiar with all Laws and Program Requirements applicable to DMHAS.

Any DMHAS employee who knowingly participates in, or who directs, authorizes or permits a subordinate to engage in any violation of this Compliance Plan or the Policies and Procedures will be subject to disciplinary action.

The DMHAS expects that all employees will support an agency wide Compliance Plan, its policies and culture.

III. AGENCY COMPLIANCE PROGRAM

Compliance Expectation and Goals: The DMHAS follows all federal and state laws and regulations that govern health care entities. The DMHAS strives to follow the Office of Inspector General (OIG) model for Compliance Guidelines and the Deficit Reduction Act to address and respond to all Compliance concerns in a timely manner.

Our Compliance Program helps ensure ethical conduct by all staff and requires us to monitor various aspects of practices throughout our system of care. It also establishes mechanisms for internally communicating compliance within our own organization.

Everyone is responsible for the DMHAS Compliance Program and obligated to comply with laws, standards, policies and regulations.

IV. OVERSIGHT

Facility Compliance Committee: Each DMHAS facility has a designated Compliance Officer. The facility Compliance Officer is responsible for coordinating the implementation of DMHAS's Compliance Plan within their facility. The DMHAS Facility Compliance Committee is comprised of the Chief Compliance Officer from each DMHAS facility. The Facility Compliance Committee will conduct periodic reviews of legal and regulatory compliance matters and will prepare and provide recommendations with the Agency Compliance Officer, which in turn will be conveyed to the DMHAS Steering Committee. The Facility Compliance Committee is a forum for addressing and sharing Compliance issues and problems as well as promoting a culture of compliance throughout the DMHAS system of care. Each DMHAS facility shall have a Compliance Committee to oversee implementation and monitoring of the DMHAS Compliance Plan at a local level.

Agency Compliance Officer: The Agency Compliance Officer is appointed by the Commissioner of the Department of Mental Health and Addiction Services. The Agency Compliance Officer will periodically report to the Compliance Steering Committee. Each facility will have a designated Compliance Officer and report to the facility oversight committee. The Agency's Compliance Officer's functions include:

- Overseeing the implementation of the DMHAS Compliance Plan by working with each facility and assessing risk areas
- Analyzing the laws and regulations pertinent to the DMHAS health care environment
- Consulting with the Attorney General regarding interpretation of state and federal laws and actions, including possible infractions
- Reviewing and establishing recommendations for new and existing policies
- Establishing policies and procedures to comply with federal and state requirements
- Promoting the Compliance Program through education and training
- Ensuring that the seven elements of a Compliance Plan are addressed in each facility
- Consulting with Human Resources on establishing goals and objectives for employees
- Encouraging managers and employees to report fraud or other improprieties without fear of retaliation

The Agency Compliance Officer has the authority to review all documents and other information that are relevant to compliance activities, including, but not limited to patient records, billing records, contract agreements, etc. This authority allows the Agency Compliance Officer to monitor agency controls as well as detect and intervene with potential compliance issues across the DMHAS state system of care.

The Facility Compliance Officers' have the authority to review all documents and other relevant information pertaining to compliance activities within their own DMHAS facility. This authority allows the Facility Compliance Officer to monitor internal controls as well as detect and intervene with any potential areas of risk and/or compliance issues in the facility.

V. COMPLIANCE PRINCIPLES AND STANDARDS

The Agency Compliance Officer, working with The DMHAS Facility Compliance Committee as well as the DMHAS Policy Committee shall develop and oversee the implementation, monitoring and enforcement of written policies on specific laws and program requirements that come under the purview of the DMHAS Compliance Plan and which promote the principles and standards of the DMHAS mission.

Employment Responsibilities: The DMHAS values its entire workforce and recognizes that each individual person contributes to the overall success of the Agency. The opinions of the workforce at the DMHAS are valued. All individuals are encouraged to share concerns and questions and supervisors are expected to listen and respond as promptly as possible. Supervisors are unbiased and fair in all aspects of their management of employees. Students, volunteers and residents are treated objectively and fairly.

Code of Conduct Policy: Commissioner's Policy - Chapter 3.1

Credentialing/Verification of Employee Qualifications: The DMHAS employs only individuals with the proper qualifications, licensure, or credentials for the given job. Professional employees only practice within the privileges and scope of their license. Background checks are performed on all potential employees.

Sanction Screening: The DMHAS conducts appropriate screening of all employees, vendors and contract holders prior to hire and/or signing of all contracts. Subsequent screening against the Office of Inspector General exclusion list, the General Services Administration (GSA) and the State of Connecticut Debarment list will be conducted monthly for all employees and twice yearly for vendors.

Sanction Screening Policy: Commissioner's Policy – Chapter 3.4

Confidentiality: The DMHAS employees and all individuals doing business with DMHAS, peer support staff as well as volunteers protect client confidentiality and the DMHAS business/financial information. This policy prohibits any attempt to access/use/disclose any information outside the scope of our mission. All employees follow the DMHAS confidentiality policy. This DMHAS policy prohibits confidential information as defined by Federal and State of Connecticut laws and statutes from being accessed, disclosed or released in any format to or by any person, business that does not have a “need to know” without proper consent of the individual client or legal representative and/or by The DMHAS. All FOI requests must be sent to the individual designated in The DMHAS facility.

Client Rights: The client is informed of his/her rights and responsibilities upon admission to a facility. The DMHAS respects the client's right to seek treatment at alternative facilities, if the client so chooses. Client rights are a priority within the DMHAS agency.

Client's Right's Policy: Commissioner's Policy - #45

Safety: Safety concerns are promptly reported, including adverse patient reactions and events. The Agency will comply with all regulations governing all aspects of safety training and reporting. All hazardous materials are handled according to regulations. A drug and smoke free work environment is maintained.

Clinical Records: All information included in the clinical record must be true and accurate to the best of the knowledge of the person entering the information. All entries will be completed in a timely manner.

Billing and Medical Necessity: The DMHAS only bills for medically appropriate services that were actually performed by properly licensed professionals. Clinical staff communicates clearly with billing staff about what services meet the necessary requirements for billing. The DMHAS follows applicable billing rules and regulations. The DMHAS employees do not 'upcode': engage in coding techniques that result in payment that is higher than actual services provided would normally collect.

Billing & Documentation Policy: Commissioner's Policy – Chapter 3.8

Documentation: No matter what our work, The DMHAS employees document legibly, accurately and in a timely manner, so that written and electronic documentation reflect truth and accuracy. To insure the proper billing and reimbursement protocol is being followed The DMHAS will conduct periodic audits of client records selected from paid claims to insure appropriate documentation and coding.

Audit of Paid Claims: Commissioner's Policy – Chapter 3.7

Monitoring Compliance Standards and Effectiveness: The DMHAS will monitor various aspects of the DMHAS compliance program by conducting periodic audits to the effectiveness of operations and adherence to applicable laws. The DMHAS will monitor and keep current policies and procedures and compliance directives to ensure adherence to protocol. Corrective action plans will be developed in response to a violation or procedural defect.

Monitoring Compliance Standards and Effectiveness Policy: Commissioner's Policy – Chapter 3.11

Financial Reporting: The DMHAS submits cost reports completed in compliance with all legal requirements. Whenever billing errors or overpayments are found, corrective action is taken immediately.

Responsible Conduct of Research: Research is conducted under the auspices of the DMHAS Institutional Review Board. As such it is conducted in accordance with, but not limited to, the precepts of the codes of ethics of professional societies and regulations.

Research Conduct Policy: Commissioner's Policy Chapter 8.3

Kickbacks/Referrals/Inducements: The DMHAS does not engage in offering or receiving kickbacks or an inducement that may influence our decisions on buying or others' use of our services. No one at the DMHAS makes or authorizes illegal payment or bribes. All vendor contracts, personal services agreements are approved.

Gifts: The DMHAS employees do not ask for or accept gifts that may be perceived as exchange for our services. The DMHAS employees follow the Connecticut Code of Ethics Policy and the DMHAS Compliance Policy on acceptance of gifts to guide our actions.

Gift's Policy: Commissioner's Policy – Chapter 3.6

Recognizing and Avoiding Conflicts of Interest: In our work, our outside personal or financial interests do not sway our judgment. If a DMHAS employee knows a conflict with a personal interest exists, the employee will appropriately disclose it. The DMHAS employees do not inappropriately use our work position as leverage to gain personally.

Disclosure and Reporting: All employees have an affirmative duty and responsibility for reporting perceived misconduct, including actual or potential violations of laws, regulations, policies, procedures, or Code of Conduct. An "open door policy" will be maintained at all levels of leadership to encourage employees to report problems and concerns. A prompt and forthright disclosure of an error by any DMHAS employee will generally be considered a constructive action by the reporting individual. The DMHAS provides an anonymous reporting mechanism, the Compliance Alert Line Link (CALL).

Reporting Compliance Concerns: Commissioner's Policy – Chapter 3.9

Whistleblower Protection/Non Retaliation: It is the policy of the DMHAS that any person is free to lawfully disclose whatever information supports a reasonable belief of misconduct as defined in the DMHAS policy. Individuals are forbidden from preventing or interfering with whistleblowers that make good faith disclosures of misconduct. The DMHAS shall not take any retaliatory action against any DMHAS employee who reports a violation or suspected violation as set forth in the Compliance Program. The DMHAS will exercise reasonable efforts to investigate complaints and respond in a timely manner.

Whistleblower Protection Policy: Commissioner's Policy – Chapter 3.10

Enforcement and Discipline: Any employee that violates the DMHAS Code of Conduct, Compliance policies, procedures, work rule violations or other State and Federal regulatory laws are subject to disciplinary action.

Internal Grievance Policy: Commissioner's Policy # Chapter 2.19

Harassment/Discrimination/Equal Opportunity Employment/Respect for Diverse Cultures and Religions: The DMHAS values its diverse workforce, seeking to maintain it and respecting diversity in all persons with whom the DMHAS employee comes in contact. The DMHAS employees remain free from discrimination and harassment of all kinds.

Sexual Harassment Policy: Commissioner's Policy # Chapter 2.2

VI. EDUCATION & TRAINING

Compliance Training and Education: Compliance training and education will begin at new employee orientation. Every new DMHAS employee will receive a preliminary introduction to Compliance, which may include a video. Every new employee will receive the names of all facility Compliance Officers. Every employee will receive materials on the Deficit Reduction Act and a copy of The DMHAS Agency Compliance Plan.

Each facility will orient their new staff to processes and procedures within their particular environment. Regularly scheduled workshops, seminars and/or web training will be mandatory.

The DMHAS ensures that mandated Compliance training and skill development occurs as required. The DMHAS shall maintain a training log in accordance with policy established by the Agency Compliance Officer. DMHAS employees will be required to sign a training log at each training session or to log on to any approved computer based training program. Individuals are also encouraged to take advantage of development programs offered both through the DMHAS Training Center and other formal or informal training programs.

VII. STATE OF CONNECTICUT CODE OF ETHICS

In fulfilling the DMHAS mission as a healthcare service agency, the conduct of DMHAS public officials and employees is sometimes governed by applicable provisions of other laws and regulations in addition to the State Code of Ethics. Examples include the Medicare/Medicaid fraud and abuse laws and regulations, the Health Insurance Portability and Accountability Act (HIPAA), and the Hatch Act, among others. DMHAS officials and employees must be aware of the impact of such laws and regulations. Accordingly, the DMHAS Ethics Compliance Liaison Officer will collaborate with appropriate agency staff to raise awareness of and promote compliance with those laws and regulations that, in addition to the State Code of Ethics, governs the conduct of DMHAS officials and employees.

Code of Ethics Policy: Commissioner's Policy # 8

All policies are available on the DMHAS website at www.ct.gov/DMHAS under publications.

ATTESTATION STATEMENT

I acknowledge that I have received and read The Department of Mental Health and Addiction Services Agency Compliance Plan. I understand that the Compliance Plan contains mandatory policies established for the betterment of the entire organization and the people they serve.

I agree to abide by its policies, promote a culture of compliance by reporting concerns and maintain compliance with all laws, regulations, standards and procedures.

Signature: _____

Printed Name: _____

Position: _____

Employee Identification Number: _____

Date: _____