

# **First Reading of Policy**

**#5575**

**SUBJECT: MEDICAID COMPLIANCE PROGRAM POLICY**

The School District shall comply with New York State and federal laws and regulations related to the School District's participation as a provider of care, services or supplies under the Medicaid program.

The School District as a provider receiving or submitting Medicaid claims of at least \$500,000 in any consecutive twelve-month period, has established and implemented a Medicaid Compliance Program designed to detect and prevent fraud, waste and abuse. Although the Carle Place Union Free School District does not submit more than \$500,000 of Medicaid claims annually, this policy and the associated regulations and procedures govern all Medicaid claims.

As required by the New York State Office of the Medicaid Inspector General (hereinafter referred to as the OMIG), the School District's Medicaid Compliance Program is comprised of the following core elements:

- a) Written policies and procedures that describe compliance expectations as embodied in a code of ethics applicable to all School District employees and independent contractors. Such compliance expectations or standards of conduct shall include provisions designed to: implement the operation of the Medicaid Compliance Programs; provide guidance to employees and others on dealing with potential compliance issues; identify how to communicate compliance issues to appropriate personnel; and describe how issues are investigated and resolved;
- b) A designated employee who will be responsible for the day-to-day operation of the Medicaid Compliance Program. This employee's job duties may be exclusively related to Medicaid compliance issues or may be combined with other duties, provided that the Medicaid compliance portions of the employee's duties are satisfactorily fulfilled. The designated employee shall report directly to the School District Superintendent or the Superintendent's designee and shall also periodically report directly to the Board of Education on the School District's Medicaid Compliance Program activities;
- c) Training and education of all affected School District employees and other persons associated with the School District's Medicaid Compliance Program. Such training shall occur periodically and shall be made a part of any required training or orientation for new employees, volunteers and/or others on dealing with the School District's Medicaid Compliance Program;

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**SUBJECT: MEDICAID COMPLIANCE PROGRAM POLICY (Cont'd.)**

- d) Communication lines and processes directed to the School District's designated employee who will be responsible for the day-to-day operation of the Medicaid Compliance Program. Such communication lines and processes shall be accessible to all School District employees, Board members, volunteers and others associated with the School District's Medicaid Compliance Program. The communication lines and processes are designed to allow employees to report compliance issues, including the anonymous and confidential good faith reporting of any practice or procedure related to Medicaid reimbursement of school or preschool supportive health services, that an employee believes is inappropriate;
- e) Disciplinary procedures that encourage good faith and fair dealing in the School District's Medicaid Compliance Program by all affected individuals. Such disciplinary procedures shall include procedures that articulate expectations for reporting and assisting with the resolution of compliance issues and also provide sanctions for the failure to report suspected problems and participating in non-compliant behavior;
- f) A system for the routine identification of Medicaid compliance risk areas in the School District's Medicaid Compliance Program. Self-evaluation of such risk areas may be accomplished by, but not necessarily limited to, internal audits and external audits, as appropriate;
- g) A system for responding to, investigating, correcting and reporting compliance issues as they are raised, including the development of procedures and systems to reduce the potential for recurrence, identifying and reporting compliance issues to the OMIG and refunding overpayments; and
- h) A policy of non-intimidation and non-retaliation against any person for the good faith participation in any aspect of the administration of the School District's Medicaid Compliance Program including, but not limited to, the reporting of potential issues, assisting as a witness with any investigation, evaluation, audit, remedial actions or reporting to appropriate officials as provided in Sections 740 and 741 of the New York State Labor Law.

**Retention of Medicaid Records**

On March 10, 2010, the State Education Department, Special Aids and Medicaid Unit, notified districts of a Settlement and Compliance Agreement between New York State and the federal agencies. This Agreement states that the January 2002 record retention directive is no longer in effect and districts may return to the normal retention policy.

The following records require a minimum six (6) year retention period from the date services were paid:

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**SUBJECT: MEDICAID COMPLIANCE PROGRAM POLICY (Cont'd.)**

- a) All documents relating in any manner to Medicaid reimbursement for services;
- b) All documents relating in any manner to referrals, prescriptions or orders for these services;
- c) All documents relating in any manner to the provision of these services including, but not limited to, the following:
  - 1. The dates that services were provided;
  - 2. The identification and qualifications of the professional who provided the services or under whose direction the services were provided;
  - 3. Progress and other notes, memoranda, correspondence, reports and other documents relating to services rendered; and
  - 4. All Individualized Education Programs (IEPs) for Medicaid-eligible students.

Questions related to the SSHSP or PSHSP retention policy should be directed to the STAC, Special Aids and Medicaid Unit within the New York State Education Department.

Social Services Law Section 363-d  
18 New York Code of Rules and Regulations (NYCRR) Part 521

NOTE: Refer also to Policies #5570 - Financial Accountability  
#5571 - Allegations of Fraud  
#5572 - Audit Committee  
#5573 - Internal Audit Function  
#6110 - Code of Ethics for Board Members and All District  
Personnel  
*District Medicaid Compliance Program*

Adopted: