



Subject:	Compliance Program
Endorsed By:	Compliance Committee
Approved By:	Compliance Committee, Board of Managers
DSRIP Implementation Deadline:	
Effective Date:	October 2015
Supersedes:	N/A
Purpose:	To establish guidance for the elements of the SI-PPS Compliance Program and describe the procedure its implementation and operation.
Policy:	It is the policy of SI-PPS to have an effective Compliance Program, including but not limited to, the eight (8) elements described in Title 18, Part 521 of NYCRR. This policy applies to all PPS Associates.
Procedure:	<p>1. The Compliance Program demonstrates SI-PPS' commitment to honest and responsible corporate conduct; increases the likelihood of preventing, identifying, and correcting unlawful and unethical behavior at an early stage; encourages all PPS Associates to report potential problems to allow for appropriate internal inquiry and corrective action; and through early detection and reporting, minimizes financial loss to the government and taxpayers, as well as any corresponding financial loss to SI-PPS.</p> <p>2. The Compliance Program is applicable to all aspects of SI-PPS, including but not limited to billings, payments, medical necessity and quality care, governance, mandatory reporting, and other risk areas that are or should with due diligence be identified by SI-PPS.</p> <p>3. SI-PPS' Code of Conduct ("Code") is the foundation of the Compliance Program. It provides principles and other guidance by which all PPS Associates should conduct their work. The Code is</p>

reviewed periodically to ensure its accuracy and is to be republished, as necessary. A copy of the Code is provided to all PPS Associates upon the commencement of his/her employment and/or contractual relationship with SI-PPS, or affiliation with SI-PPS. It is also available on SI-PPS' webpage. Copies of the Code are available from the SI-PPS Compliance Officer/designee.

4. The Compliance Program is led by the SI-PPS Compliance Officer, who reports to the Chief Executive Officer for SI-PPS, the Compliance Committee, the Governing Body, and legal counsel (as necessary) on a regular basis. This helps ensure management and the Governing Body are fully informed on compliance issues and to ensure transparency in the Compliance Program exists at all times.

5. The Governing Body, or designated Board committee, provides direction, oversight and guidance to the Compliance Program and is responsible for monitoring the Compliance Program and for ensuring that corrective actions are taken whenever deficiencies are identified in the Compliance Program.

6. The SI-PPS Compliance Officer carries out the day-to-day implementation of the Compliance Program.

7. The SI-PPS Compliance Officer is responsible for resolving compliance-related issues. The Board of Managers or designated Board committee, reviews, assigns and resolves compliance-related investigation matters via the Compliance Help Line and other sources.

8. The Compliance Officer conducts risk assessments, on at least an annual basis, by reviewing the operations of SI-PPS, internal and external audits of SI-PPS, other self-evaluations, industry developments, the work plans of the OIG and OMIG, guidance issued by government agencies, and other relevant sources. The risk assessments are used as the basis for the development of the Compliance Program's Work Plan.

9. All compliance-related problems identified as a result of reports of such problems from any source or identified in the course of self-evaluations or audits shall be corrected promptly and thoroughly. Such corrective actions shall include, but not be limited to, implementation of policies and/or systems as necessary to reduce the potential for recurrence, training and education, additional audits or other monitoring, reporting the problem to the appropriate government agency and refunding overpayments.

10. The SI-PPS Compliance Officer and Compliance Committee are responsible for the creation, review, revision of written policies and procedures that describe compliance expectations as embodied

in the Code, implement the operation of the Compliance Program, provide guidance to PPS Associates dealing with potential compliance issues, identify how to communicate compliance issues to appropriate compliance personnel and describe how potential compliance problems are investigated and resolved.

11. The SI-PPS Compliance Officer provides the annual compliance training program and other compliance-related training and education programs as required to all PPS Associates. The training provides information about compliance issues, expectations and the operation of the Compliance Program. This training is also a part of the orientation provided by SI-PPS for all PPS Associates.

12. The Compliance Program also maintains a Compliance Help Line, which is one means by which all Associates may make reports of potential compliance issues. Reports to the Help Line may be made anonymously either by phone or online to protect the anonymity of the complainants and to protect whistleblowers from retaliation. The Help Line is available 24 hours a day, 7 days a week at 855-233-3138 or online at statenilandperformingprovidersystem.ethicspoint.com. Reports of compliance issues related to the operations of SI-PPS and/or DSRIP program also may be made directly to the SI-PPS Compliance Officer or his/her designee in person, in writing or by telephone. All reports received by the SI-PPS Compliance Officer are investigated and resolved to the fullest extent possible.

13. All PPS Associates are encouraged to participate in good faith in the Compliance Program. All such individuals are expected to report compliance issues and assist in their resolution. SI-PPS disciplinary policy outlines the possible sanctions for; failing to report suspected problems; participating non-compliant behavior; and encouraging, directing, facilitating or permitting either actively or passively compliant behavior. The discipline policy is fairly and firmly enforced across SI-PPS.

14. SI-PPS has a process and policy to ensure all applicable individuals and entities are screened initially and then monthly against the applicable exclusion lists.

15. No one may be intimidated and/or retaliated against for good faith participation in the Compliance Program. "Good faith participation" includes but is not limited to; reporting potential issues, investigating issues, self-evaluations, audits and remedial actions, and reporting to appropriate officials as provided in section seven hundred forty (740) and seven hundred forty-one (741) of the New York State Labor Law.

Scope:

SI-PPS Associates (PPS Associates shall mean all individuals and entities that participate in business with SI-PPS, including but not limited to its employees, independent contractors, ven

	agents, suppliers, executives and governing body members).
Project(s):	
Regulatory Alignment:	New York Social Services Law §363-d subd. 2 and 18 NYCRR §521.3(c), Title 18, Part 521 of NYCRR
Reference(s):	
Attachment(s):	Compliance Program Manual

Reviewed/Revised by R. Bergren: April 2016

Approved by Compliance Committee: August 2016

Partner Organization	Responsible Staff Name & Title	Date Reviewed	Signature