

Report on Medicare Compliance Volume 32, Number 11. March 20, 2023

Example of Item from OMIG Compliance Program Review Module

By Nina Youngstrom

On the heels of new compliance-program requirements taking effect in New York State,^[1] the Office of Medicaid Inspector General (OMIG) will start reviewing the effectiveness of provider compliance programs in July. If providers are selected for a review, they will complete a compliance program review module posted by OMIG March 8.^[2] The module also doubles as a roadmap for internal review of the requirements, which may be useful to compliance officers everywhere as they perform their own effectiveness reviews.

Element 2: Compliance Officer and Compliance Committee

18 NYCRR § 521-1.4(c)

(c) Compliance committee. The required provider shall designate a compliance committee which shall be responsible for coordinating with the compliance officer to ensure that the required provider is conducting its business in an ethical and responsible manner, consistent with its compliance program. The required provider shall outline the duties and responsibilities, membership, designation of a chair and frequency of meetings in a compliance committee charter. The required provider's designation of a compliance committee shall meet the following requirements:

1. The compliance committee's responsibilities shall include:
 - i. coordinating with the compliance officer to ensure that the written policies and procedures, and standards of conduct required by subdivision (a) of this section are current, accurate and complete, and that the training topics required by subdivision (d) of this section are timely completed;
 - ii. coordinating with the compliance officer to ensure communication and cooperation by affected individuals on compliance related issues, internal or external audits, or any other function or activity required by this SubPart;
 - iii. advocating for the allocation of sufficient funding, resources and staff for the compliance officer to fully perform their responsibilities;
 - iv. ensuring that the required provider has effective systems and processes in place to identify compliance program risks, overpayments and other issues, and effective policies and procedures for correcting and reporting such issues; and
 - v. advocating for adoption and implementation of required modifications to the compliance program.
2. Membership in the committee shall, at a minimum, be comprised of senior managers. The compliance committee shall meet no less frequently than quarterly and shall, no less frequently than annually, review and update the compliance committee charter.
3. The compliance committee shall report directly and be accountable to the required provider's chief executive and governing body.

<p>2-6</p>	<p>18 NYCRR § 521-1.4(c)</p> <p>Did the provider have a designated compliance committee for the entire Review Period that meets the requirements of 18 NYCRR § 521-1.4(c)?</p> <p>Yes _____</p> <p>No _____</p>	<p>If yes provide, as “Attachment 2-6a,” documentation evidencing the provider had a designed compliance committee which may include, but is not limited to:</p> <ul style="list-style-type: none"> a. a summary identifying compliance committee members and designated chair during the Review Period, including their names, titles, and from/to service dates, and b. any other dated documentation evidencing the provider had a designated compliance committee comprised of senior managers for the entire Review Period.
		<p>If yes provide, as “Attachment 2-6b,” a copy of a dated compliance committee charter along with copies of dated annual compliance committee charter reviews, or any other documentation evidencing annual compliance committee charter reviews.</p>
		<p>If yes provide, as “Attachment 2-6c,” documentation evidencing:</p> <ul style="list-style-type: none"> a. the reporting structure between the compliance committee and the organization’s chief executive and governing body, and b. the compliance committee met at least quarterly during the Review Period. <p>Such evidence may include, but is not limited to:</p> <ul style="list-style-type: none"> a. organizational chart showing the reporting structure between the compliance committee and the organization’s chief executive and governing body, b. quarterly reports from the compliance committee to the organization’s chief executive and governing body; and c. copies of minutes from all compliance committee meetings during the Review Period.
<p>Please mark which months during the Review Period that the provider had a designated compliance committee that met all the requirements of 18 NYCRR § 521-1.4(c):</p> <p><input type="checkbox"/> None <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec</p>		

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