

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	QM
	Policy Number	QM-44-01
	Effective Date	10-01-2005
	Revision Date	01-04-2021
Title: Division Of Behavioral Health Services Issue Reporting	Functional Area: Compliance - Lines of Communication	
Approved By: (Signature on File) Signed version available upon request		
Alexandra Rechs, LMFT Program Manager, Quality Management		
Ryan Quist,PHD Deputy Director, Division of Behavioral Health Services		

BACKGROUND/CONTENT:

Federal and state laws, regulations, rules, and guidelines require the Division of Behavioral Health Services (BHS) and the County Mental Health Plan (MHP) to abide by federal Medicaid Managed Care regulations. This framework requires BHS and MHP to have administrative and management arrangements and procedures, including a compliance plan, that are designed to guard against fraud and abuse. BHS is firmly committed to achieving the mutual goals of preventing fraud and abuse, improving operational quality, and ensuring the provision of high quality, cost-effective behavioral health care.

Therefore, as a matter of policy, BHS will apply the requirements to all functions and activities of BHS employees and contractors in order to establish a culture that promotes prevention, detection, reporting, and resolution of instances of conduct that may not conform to federal and state law as well as the BHS Compliance Program requirements and business policies. BHS employees and contractors, and the manner in which they conduct themselves, are at the core of this commitment. This policy establishes a process and guidelines for the reporting of Department of Health and Human Services, Division of Behavioral Health Services compliance concerns and issues.

DEFINITIONS:

Abuse: Incidents or practices of providers that are inconsistent with accepted sound medical, business, or fiscal practices that may, directly or indirectly, result in unnecessary costs, improper payment, or payment for services that fail to meet professionally recognized standards of care, or that are medically unnecessary. Abuse also involves payment for items or services when there is no legal entitlement to that payment and the provider has not knowingly or intentionally misrepresented facts to obtain payment. Examples of practices that may constitute abuse include: Excessive/unnecessary services, failure to maintain adequate records, improper or sloppy billing practices, etc.

Anonymity: When the reporting party does not reveal their identity.

Confidentiality: When the reporting party has identified themselves but their identity is not revealed by the investigating party, unless required by law.

Fraud: Intentional representation that an individual knows to be false or does not believe to be true and makes, knowing that the representation could result in some unauthorized benefit to him/her or some other person. The most frequent kind of fraud arises from a false statement or misrepresentation made or caused to be made that is material to entitlement or payment. Examples

of practices that may constitute fraud include: billing for services/supplies that were not provided; misrepresenting the diagnosis for the patient to justify services, altering claim forms to obtain higher payment amount, misrepresenting services rendered, amounts charged for services rendered, identity of the person receiving services, dates of services, billing for non-covered services as covered services.

Material Deficiency: Generally means anything that involves 1) a substantial overpayment; or 2) a matter that a reasonable person would consider a potential violation of criminal, civil or administrative law applicable to any health care program for which penalties or exclusion may be authorized. A material deficiency may be the result of an isolated event or a series of occurrences.

PURPOSE:

- BHS County Staff and Contract Providers have an obligation to report actual, potential, or suspected violations of all state, federal, and County program requirements and other applicable laws, regulation, policy, procedure, or the Code of Conduct.
- Failure on the part of BHS County Staff or Contract Providers or any employee or individual acting on behalf of BHS County Staff or Contract Providers to comply with all state, federal, and County program requirements and other applicable laws, regulation, policy, procedure, or the Code of Conduct or to report non-compliance, could result in civil and criminal liability, sanctions, penalties, disciplinary action or contract termination.

DETAILS:

I. BHS County Staff and Contract Provider Responsibilities (including management):

It is the responsibility of all BHS County Staff and Contract Providers to report actual, potential, or suspected violations of all state, federal, and County program requirements and other applicable laws, regulation, policy, procedure, or the Division of Behavioral Health Services Code of Conduct. BHS County Staff and Contract Providers may report in several ways:

- A. To one's supervisor, manager, or other management staff within the chain-of-command, or**
- B. To the Division of Behavioral Health Compliance Office, via** telephone: 916-876-7561, or email: BHDivisionComplianceOfficer@SacCounty.net, or U.S. mail: 7001-A East Parkway, Suite 300, Sacramento, CA 95823, or

If an employee prefers not to, or is unable to report through one of the routine channels, the employee should utilize the **Compliance Hotline**, which is administered by the **County of Sacramento Privacy and Compliance Officer**.

- C. To the County of Sacramento Privacy and Compliance Officer, via the Toll-Free Compliance Hotline: 1-866-597-2771, or** U.S. mail: 799 G Street, Room 217, Sacramento, CA 95814

Any BHS County Staff or Contract Provider who wishes to remain anonymous may do so when reporting a compliance-related issue or concern. Reports made to any of the parties noted shall be handled as confidentially as practical or allowed by law.

II. Management (includes supervisors, managers, and contract providers) Responsibilities:

- A. Take appropriate measures to ensure support of issue reporting, including, ensuring that BHS County Staff and Contract Providers understand that they may seek clarification and guidance on compliance related issues, and report compliance related issues without fear of retaliation.
- B. Maintain an “open door” policy to support and encourage BHS County Staff and Contract Provider reporting of compliance related issues or concerns.
- C. Ensure that reports of actual, potential, or suspected violations are handled confidentially, to the extent practical and allowed by law.
- D. Take issues that cannot be readily resolved to the next highest level of management.
- E. Forward reports that should be handled by another party to the appropriate party.
- F. Report all material deficiencies of BHS activity, with respect to the BHS Compliance Program requirements, to the BHS Compliance Office via the “Report of Suspected Non-Compliance Cover Sheet.”
- G. If it appears to the individual reporting a material deficiency that it would be more appropriate to forward the report to a higher level of management, the individual should forward the report to the County of Sacramento Privacy and Compliance Officer. (See the “Definitions” section at the end of this document for the definition of “Material Deficiency.”)

III. BHS Compliance Program Responsibilities:

- A. Establish and maintain a reporting process that allows BHS County Staff and Contract Providers to report compliance related issues through one of the contacts listed in “**Procedure I,**” above.
- B. Maintain a system to document and track reported compliance issues.
- C. Coordinate prompt investigations of all reported actual, potential, or suspected violations.
- D. Ensure follow-up on resolution of compliance issues and concerns.
- E. Document all action taken in response to a compliance issue report; including any steps taken to address identified improper conduct, if any.
- F. Communicate regularly with the BHS Compliance Committee, the BHS Deputy Director, the DHS Director, the County of Sacramento Privacy and Compliance Officer, and the County Compliance Oversight Committee regarding issue-reporting activity.
- G. Maintain a secure and confidential record of all reports, issues, and resolutions handled by the Compliance Program in accordance with the BHS Compliance Program Policy and Procedures.
- H. Forward any report of compliance concerns or issues to an appropriate party to investigate, including the County of Sacramento Privacy and Compliance Officer, as appropriate, when it appears to the BHS Compliance Officer that a potential conflict of interest may exist if the BHS Compliance Office were to investigate the report.

IV. Routing Protocol for Reports of Compliance-Related Issues or Concerns:

This routing protocol applies to all reports of compliance-related issues or concerns that are related to BHS operations and that are received by the County of Sacramento Privacy and Compliance Officer or the BHS Compliance Office, regardless of the communication method utilized.

When the County of Sacramento Privacy and Compliance Officer receives a report of a compliance related issue or concern, she/he will conduct a limited-scope, preliminary investigation to determine whether she/he or another party would be the most appropriate to conduct a full investigation, if one is deemed necessary by the County of Sacramento Privacy and Compliance Officer.

For reports related to BHS operations, the County of Sacramento Privacy and Compliance Officer will determine whether there would be an actual or potential conflict of interest or the appearance of a potential conflict of interest if the report were to be forwarded to the BHS Compliance Office for further investigation. If the County of Sacramento Privacy and Compliance Officer determines that it would not be an actual or potential conflict of interest or that it would not appear to be a potential conflict of interest if the BHS Compliance Office were to investigate the report, the report will be forwarded to the BHS Compliance Office. If the County of Sacramento Privacy and Compliance Officer determines that it would be an actual or potential conflict of interest or that it would appear to be a potential conflict of interest, the County of Sacramento Privacy and Compliance Officer will determine whether she/he or another party would be the most appropriate to investigate, and will forward the report accordingly.

The BHS Compliance Office will process all reports in accordance with BHS Compliance Program Policies and Procedures. If the BHS Compliance Office determines that it would appear to be a potential conflict of interest if the Office were to investigate the report, the BHS Compliance Office will consult with County Counsel and will forward the report to an appropriate investigative party.

If the BHS Compliance Office investigates the report and determines that corrective action is necessary, the Office will follow BHS Compliance Program Policy and Procedures.

At any stage of any investigation performed by any of the parties referenced above, the BHS Compliance Officer may be called upon as a resource to provide subject matter expertise necessary to complete the review. Additionally, for investigations performed at the countywide level, those responsible for managing the investigations will maintain an appropriate level of information sharing with the BHS Compliance Officer, to avoid duplication of efforts.

REFERENCE(S)/ATTACHMENTS:

- Title 42, Code of Federal Regulations, Section 438.608
- California Administrative Code Title 9, Section 1840.112

RELATED POLICIES:

- No. 41-01 Compliance Program
- No. 41-03 Code of Conduct
- No. 20-01 DBHS Claims Certification and Program Integrity

DISTRIBUTION:

Enter X	DL Name	Enter X	DL Name
X	Behavioral Health Staff	X	Management Team
X	Mental Health Treatment Center	X	DHS Deputy Director
X	Adult Contract Providers	X	DHS Human Resources
X	Children's Contract Providers	X	County Counsel
X	Substance Use and Prevention Treatment		Specific grant/specialty resource
X	County Compliance Oversight Committee	X	County of Sacramento Privacy & Compliance Officer

CONTACT INFORMATION:

- Quality Management
QMInformation@SacCounty.net