



CORPORATE COMPLIANCE PROGRAM  
**COMPLIANCE PROGRAM DESCRIPTION**

**FUNCTION**

Administration

**NUMBER**

VI.A

**ISSUED**

June 2000

**REVISED**

1/03; 1/06; 7/08; 12/13

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**INTRODUCTION**

The government, through its Medicare and Medicaid programs, is the Society's single largest payment source. Under those programs, the government pays billions of dollars to thousands of nursing homes like ours every year. Although we view our residents and clients as our principal "customers," the government – as our principal "payer" – exercises substantial influence over both our billing practices and our care delivery.

It would be difficult for the government to manage its vast purchasing program through personal relationships, so it relies instead on laws and regulations to communicate its requirements. Unfortunately, illegal conduct by some healthcare organizations has led to tighter government controls and, in some cases, criminal prosecution of people who work in the healthcare industry. Out of this climate has emerged the concept of compliance programs. A compliance program is a healthcare organization's voluntary commitment to meeting the government's requirements.

The Evangelical Lutheran Good Samaritan Society has demonstrated its commitment to ethical conduct, including compliance with government requirements, over years of service in the communities where we do business. Our Code of Ethics, policies, procedures and other management tools (such as the Competency Verification/Training Checklist [CVTC] and Quality Program) have served to communicate our expectations of employees, and form the foundation of our Compliance Program as well. Our Compliance Program is patterned after guidance from the government, incorporating and building on the Society's existing management tools.

**I. STATEMENT OF PRINCIPLES AND STANDARDS OF CONDUCT**

**A. *Statement of Principles.***

The Code of Ethics found in the Society's Employee Handbook and Compliance Program Handbook expresses our general expectations of all Society employees with respect to ethical conduct. The Code is vital to fulfilling our mission, and sets the tone for our Compliance Program. It should be visible in our centers, as well as our National Campus, and serves as the foundation for employee orientation.

**B. *Standards of Conduct.***

Policies and procedures that reinforce the Society's high standards of care and financial accountability are part of the fabric of our organization and constitute the "standards of conduct" that we require of employees. Many of our policies and procedures address the same issues with which the government is concerned. The "roadmap" that follows this Program Description provides a list of expectations the government has emphasized for skilled nursing and home health services, and the corresponding Society policy(ies) and procedure(s).

As with all Society policies and procedures, supervisors are expected to be familiar with those that relate to government standards and review them with their staff and any contractors whose work they supervise, ensuring they are understood and followed. **Each employee is responsible for knowing and understanding the policies and procedures that apply to his or her position.**

As new compliance standards are developed by the government or by the Society as a result of our internal quality improvement activities, our policies and procedures will be modified, and the “roadmap” will be updated accordingly.

The Society’s Employee Handbook and CVTC forms also include compliance-related standards of conduct expected of employees.

## **II. CORPORATE COMPLIANCE OFFICER**

To provide Society-wide leadership for our compliance efforts, a National Campus position of “Corporate Compliance Officer” (“CCO”) has been created. The CCO’s charge is to help the Society stay abreast of government expectations in the area of compliance and coordinate internal activities geared toward improved compliance. Administrators are responsible for coordinating and overseeing compliance activities at the center level. The CCO should be viewed as a resource to staff who have questions or concerns about whether the Society is meeting its compliance obligations. He or she is accountable directly to our chief legal officer. A “Compliance Management Committee,” composed of National Campus staff, provides input to the CCO function.

## **III. ORIENTATION AND CONTINUING EDUCATION**

### ***A. Employee Orientation.***

An overview of our Compliance Program is furnished through the Society’s General Orientation program. Specific, compliance-related job expectations are listed in each employee’s CVTC form (along with the employee’s other job expectations). In addition, compliance-related job expectations may be communicated through departmental orientation.

### ***B. Continuing Education.***

Ongoing training occurs on an individual level as well as a group level.

On an individual level, supervisors are expected use the Society’s CVTC forms to review each employee’s compliance-related job responsibilities in the course of the employee’s annual performance review.

On a group level, continuing education occurs through a variety of Society training and education programs on topics that include compliance. It is important that all employees take advantage of such opportunities and that supervisors, administrators and/or department heads facilitate attendance.

### C. **Management Accountability.**

Supervisors (including administrators, executive directors, executive managers and directors of operations) are accountable for assuring that each new employee receives orientation and on-going education concerning both the Society's compliance obligations and the compliance-related requirements of the employee's position. Supervisors are assisted in such efforts by a handbook (part of our General Orientation packet) that describes our Compliance Program, employee CVTC forms (incorporating the compliance related requirements of each position) and on-going Society training and education opportunities.

In addition to conducting orientation activities and annual performance reviews (using CVTC forms), supervisors are relied upon to maintain other Society programs that support our compliance efforts. Foremost among such programs is our Quality Assurance/Performance Improvement (QAPI) process which serves as one of our chief means of monitoring compliance with government standards. Other areas of management accountability that relate to our compliance obligations include following Society corrective action guidelines for violations of compliance related policies and procedures (i.e., those dealing with laws and/or regulations), the Society's Fair Treatment Policy and retaining records in accordance with Society (and government) requirements. Please see the **RECORDS RETENTION MANUAL** procedures located on the Society's Web Portal.

## IV. **REPORTING COMPLIANCE CONCERNS**

The Society strives to promote a mutually supportive atmosphere among all of its employees. Thus, it is our goal that employees feel comfortable discussing compliance-related concerns with their supervisor – in order to solve problems at the center level. However, any Society employee (or contractor) may report such concerns directly to the corporate compliance officer if, for whatever reason, he or she is not comfortable raising an issue with his or her supervisor. The corporate compliance officer may be reached by telephone or in writing as follows:

Telephone: Compliance Solutions Line: (800) 631-6142

By Mail: Corporate Compliance Officer  
4800 West 57th Street, P.O. Box 5038  
Sioux Falls, SD 57117-5038

Compliance representatives are available Monday through Friday from 7 a.m. to 7 p.m., Central Time. You may leave a voice message if compliance representatives are not available to take your call, or you may call back.

**It is important to stress to employees their affirmative OBLIGATION to report known or suspected violations of the Society's compliance-related policies and procedures.**

Employees have no obligation to identify themselves when they call, so long as the Society is able to investigate the concern and take necessary corrective action without identifying the caller. The Society will not retaliate against an employee for making a report.

## **V. MONITORING OUR COMPLIANCE EFFORTS**

We monitor our compliance efforts in the following ways:

### ***A. Monitoring by Individual Centers.***

Each center monitors how well it is meeting government requirements by using our Quality Assurance/Performance Improvement (QAPI) process. That process is conducted by each center's quality committee. From time to time, we focus on a particular compliance area by adding one or more performance indicators to that process.

Reports of compliance concerns by employees also serve as an important means of monitoring how we are doing in meeting our compliance obligations.

### ***B. Society-Wide Monitoring.***

Society-wide monitoring of our compliance performance is coordinated by the corporate compliance officer through periodic, corporate-level audits of particular compliance areas. Such audits involve National Campus functions, Society-wide problems identified through internal monitoring, issues reported by employees and government enforcement priorities.

## **VI. EMPLOYEE SCREENING AND DISCIPLINARY MEASURES**

### ***A. Employee Screening.***

In addition to requiring evidence of an employment candidate's licensure or certification (for positions for which that is appropriate), the Society performs a criminal background check on employment candidates and has established a policy and procedure for screening employment candidates and vendors for offenses related to Medicare, Medicaid and other government programs. Physicians and contract providers (such as therapists) are also screened.

### ***B. Disciplinary Measures.***

Violations of the Society's policies and/or procedures regarding compliance, including a disregard of one's management responsibilities or the duty to report known or suspected violations of compliance standards, are of a serious nature. Such violations are specifically noted in the Employee Conduct chapter of the Society's Employee Handbook as Group I, Group II or Group III offenses, depending upon the circumstances and severity of the violation.

## **VII. INVESTIGATION AND CORRECTION OF PROBLEMS**

When a compliance concern is raised, an investigation will be conducted and a determination made as to the most appropriate means of correcting any problem that is identified.

Isolated incidents generally may be addressed by requiring additional training of the employee (or employees) involved, although some circumstances may warrant corrective action.

System-wide problems generally will be addressed through the Quality Assurance/Performance Improvement (QAPI) process described in our **QUALITY MANUAL**. At the center level, this will involve the QA/CQI Committee. At the National Campus, the compliance committee will appoint an interdisciplinary team befitting the problem to serve as a problem-solving committee.

Compliance problems that require more confidential handling will be addressed by the corporate compliance officer, who may enlist the cooperation of others.

## **CONCLUSION**

It is each employee's responsibility to be familiar with – and consistently meet – the government requirements that apply to his or her position. For administrators, executive managers, executive directors and supervisors, this means knowing and communicating those requirements to those whose work you supervise. The well-being and ongoing work of the Society depends on each of us taking seriously this responsibility.