

## Kent Intermediate School District Medicaid School-based Services Compliance Plan

Kent Intermediate School District is committed to operating in compliance with all applicable laws, rules and regulations, and prohibits fraudulent practices by any of its board members, officers, employees, enrolled providers, local education agencies, public school academies and contractors. This plan outlines the District's ongoing efforts to achieve compliance with federal and state laws regarding the District's Medicaid School-based Services Program. Failure to comply with the District's Compliance Plan may result in disciplinary action up to and including termination from the Medicaid School-based Services Program.

### **Medicaid Program Code of Conduct**

The Kent Intermediate School District has an obligation to exercise diligence, care, and integrity when submitting Medicaid claims for payment for services rendered. Honest, fair, and accurate billing practices shall be maintained.

Employees, officers, enrolled providers and contractors involved in the provision of, or claiming federal Medicaid financial compensation or reimbursement for, school and preschool supportive health services are required to conform their conduct to the governing federal and state statutes and regulations. Failure to do so may result in adverse consequences.

Medicaid claims shall be submitted only for necessary services provided, as supported by appropriate documentation. Billings should not be duplicated to create overpayment. Proper and timely documentation of services provided must be maintained.

Services may not be billed unless those services are provided by service providers meeting qualifications outlined in the Michigan Department of Community Health Medicaid Manual.

All employees and service providers are required to report suspected fraud, abuse or other noncompliance problems. Failure to report suspected problems, assisting or participating in fraudulent activity, abuse or other noncompliant behavior, including but not limited to encouraging, directing, and permitting or facilitating such activities whether actively or passively will result in disciplinary action.

### **Medicaid Compliance Officer**

The district shall annually designate a Medicaid compliance officer. The compliance officer shall be responsible for:

- Establishing procedures to reduce vulnerability to fraud, waste, and abuse
- Developing a compliance training program to ensure that all employees are knowledgeable of and compliant with all pertinent state and federal requirements

- Providing guidance to employees and others associated with the Medicaid program on how to identify and communicate compliance issues to compliance officer
- Developing internal controls, including periodic review of paid claims, to ensure compliance with Medicaid requirements
- Establishing and implementing a system for employees to report any unethical or improper practices or illegal conduct that violates applicable laws and regulations pertaining to the Medicaid School-based Services Program
- Investigating any report or allegation concerning possible unethical or improper practices or illegal conduct
- Periodically report compliance related matters to the Special Education Director for presentation to the Superintendent & Board of Education

### **Education and Training**

The Kent Intermediate School District's Compliance Program requires compliance and ethics training for all employees and service providers associated with Medicaid services and claims. This training will emphasize the District's commitment to compliance with all federal and state laws, regulations, and guidelines. This training will be conducted upon hire and on a periodic basis to ensure all such employees and service providers fully comprehend the implications of failing to comply with the District's Compliance Plan.

All compliance training must be documented. The Compliance Officer will maintain all training documentation, which shall include training content and proof that staff completed training.

### **Provider Expectations**

Providers are expected to complete timely and accurate service encounter records. To ensure accuracy, providers are requested to complete all service encounter documentation within 10 school days of service delivery.

In the event that a provider's record keeping falls a month or more behind, each Local Education Agency and Public Education Academy has a designated Medicaid Coordinator and will notify the provider and the appropriate supervisor. This allows the supervisor and the provider to discuss the circumstances, problem-solve and develop a plan that supports the provider to catch-up and remain current.

### **Compliance Program Review**

The compliance officer will make an annual assessment of the effectiveness of the District's Compliance Program. The assessment will be based on the examination of results of internal audits and investigation, reports of any outside audits that may have been conducted, and or his/her own personal experience with the functioning of the program.

## **False Claims Act**

Pursuant to Section 1902(a) (68) of the Social Security Act, Medicaid providers of School Based Services who claim at least \$5 million in annual aggregate payments from the federal Medicaid program are required to comply with Section 6032 of the Deficit Reduction Act (DRA) of 2005.

A section of the law entitled "Employee Education About False Claims" cites three (3) requirements; 1) Establish written policies for employees and contractors about the False Claims Act; 2) Establish detailed provision in these policies for detecting fraud, waste and abuse, as well as administrative remedies for false claims; 3) Inform all providers about these policies and their rights to be protected as whistleblowers.

The Federal False Claims Act, among other things, applies to the submission of claims by healthcare providers for payment by Medicare, Medicaid and other federal and state healthcare programs. The False Claims Act is the federal government's primary civil remedy for improper or fraudulent claims. It applies to all federal programs, from military procurement contracts to welfare benefits to healthcare benefits.

### **The False Claims Act prohibits among other things:**

- Knowingly presenting or causing to be presented to the federal government a false or fraudulent claim for payment or approval;
- Knowingly making or using, or causing to be made or used a false record or statement in order to have a false or fraudulent claim paid or approved by the government.
- Conspiring to defraud the government by getting a false or fraudulent claim allowed or paid; and
- Knowingly making or using, or causing to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the government.

Any person who knowingly attempts to defraud the federal government is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages which the Government sustains because of the act of that person.

"Knowingly" means that a person, with respect to information: 1) has actual knowledge of the information; 2) acts in deliberate ignorance of the truth or falsity of the information; or 3) acts in reckless disregard of the truth or falsity of the information.

## **Employee Education about False Claims Recovery**

*Kent Intermediate School District*

*Staff Handbook*

*Bylaws & Policies: 8111*

## **Whistleblower Policy**

*Kent Intermediate School District*

*Staff Handbook*

*Bylaws & Policies: 3211, 4211*

### **Reporting Noncompliance Issues**

It is the responsibility of all board members, officers, employees and contractors to report noncompliance issues or suspected violations in accordance with this compliance plan. The intent of Kent Intermediate School District's Plan regarding reporting noncompliance issues is to encourage and allow people to raise concerns within the organization prior to seeking resolution outside of it.

Kent Intermediate School District has implemented an open door policy and suggests that employees share their questions, concerns, suggestions or complaints with someone who can address them properly. In most cases, an employee's supervisor is in the best position to address an area of concern. However, if you are not comfortable speaking with your supervisor or you are not satisfied with your supervisor's response, you are encouraged to speak with:

Anne Ciucci  
Medicaid Project Analyst  
Kent Intermediate School District  
2930 Knapp NE  
Grand Rapids, MI 49525  
Phone: (616) 301-6191  
Email: [anneciucci@kentisd.org](mailto:anneciucci@kentisd.org)

Supervisors and managers are required to report suspected violations to the Kent Intermediate School District's Compliance Officer, who has specific and exclusive responsibility to investigate all reported violations regarding the filing of false or fraudulent claims.

Reports may be made anonymously via the Medicaid Comment Box in the reception/coat area at 2930 Knapp NE, Grand Rapids, MI 49525 but we encourage employees to provide their name and contact information so reports may be more effectively investigated.

Every attempt will be made to preserve the confidentiality of reports of noncompliance. All employees must understand, however, that circumstances may arise in which it is necessary or appropriate to disclose information. In such cases disclosures will be on a need-to-know basis only.

The Compliance Officer will notify the reporter (if known) and acknowledge receipt of the reported noncompliance issue or suspected violation.

## **Responding to Detected Issues**

Upon receipt of reasonable indications of suspected noncompliance, the compliance officer or other officials will immediately investigate the allegations to determine whether a material violation of applicable law or the requirements of the compliance program has occurred and, if so, take decisive steps to correct the problem. The exact nature and level of thoroughness of the investigation will vary according to the circumstances, but the review should be detailed enough to identify the cause of the problem. As appropriate, the investigation may include a corrective action plan, an assessment of internal controls, a report and repayment to the Government, and/or a referral to law enforcement authorities or regulatory bodies.

## **Corrective Action**

In order to make the Compliance Program effective, the compliance officer will have the authority to impose corrective action.

The plan of corrective action will depend on the nature, frequency, and severity of the noncompliance and may include the following:

- Mandatory Training
- A period of supervision or requirement for approval of documentation prior to submission
- Discipline or termination from the Medicaid School-based Service Program

## **To Report Medicaid Provider Fraud**

To report suspected Medicaid Provider Fraud, or when you are not satisfied or uncomfortable with following the open door policy, individuals should contact Michigan's Office of Inspector General (OIG), the agency responsible for audits and investigations of suspected misuse of Michigan's Medicaid program.

### Ways to Contact the Office of Inspector General

**Office Hours: Monday - Friday, 8:00am to 5:00pm**

**Submit an online Complaint Form** [http://www.michigan.gov/mdch/0,1607,7-132-2945\\_42542\\_42543\\_42546\\_42551-220056--,00.html](http://www.michigan.gov/mdch/0,1607,7-132-2945_42542_42543_42546_42551-220056--,00.html)

**Phone:** 1-855-MI-FRAUD (643-7283) (voicemail available for after hours)

### **Send a letter to:**

Office of Inspector General  
PO Box 30479  
Lansing, MI 48909

The following information is preferred when reporting suspected fraud or abuse:

- Nature of the complaint
- The names of those involved in the suspected fraud and/or abuse, including their address, phone number, Medicaid identification number, date of birth (for beneficiaries), and any other identifying information if available/applicable

# MEDICAID NONCOMPLIANCE REPORTING FORM

Kent Intermediate School District, 2930 Knapp NE, Grand Rapids, MI 49525 (616) 364-1333

Please submit to:

Medicaid Compliance Officer: Anne Ciucci, 2930 Knapp NE, Grand Rapids, MI 49525

Secure Fax# (616) 447-2440 or email: [anneciucci@kentisd.org](mailto:anneciucci@kentisd.org)

Reports can also be made anonymously by completing this form and dropping in the Medicaid Comment Box located at the address above in the reception/coat/vending area of the ESC building.

## Your Information:

Name:

Date:

---

Telephone:

Email:

---

## Describe your Complaint below:

Who is engaging in misconduct? What wrongdoing occurred? When did it happen?

---

---

---

---

## Who the complaint is about:

Name:

Title:

---

School:

---