



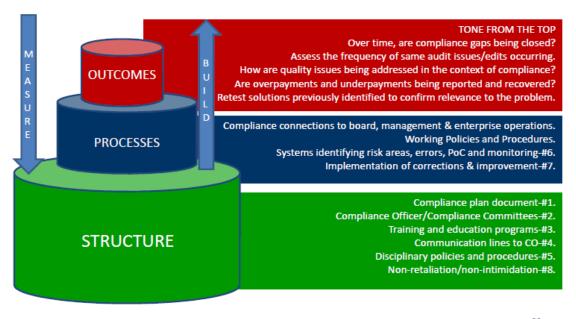
## Better Health for Northeast New York PPS

2017 Compliance Training and Expectations for Affected Parties





## How to Build and Measure a Compliance Program for Effectiveness



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Fighting Fraud. Improving Integrity and Quality. Saving Taxpayer Dollars.





## Complying with Fraud and Abuse Laws:

#### False Claims:

- A compliance program that will assist in preventing and identifying Medicaid payment discrepancies related to DSRIP
  - To resolve Medicaid payment discrepancies and to impose systematic checks and balances to prevent future occurrence;
  - take all reasonable steps to ensure the Medicaid funds distributed as part of the DSRIP program are not connected with fraud, waste or abuse;
  - consider the use of DSRIP dollars for purposes other than those described in the PPS Lead's project plan, implementation plan, or as committed in any performance report or making or causing to be made any false, fictitious or fraudulent statement or misrepresentation of material fact to obtain DSRIP funds as an overpayment; and
  - include a method for prompt corrective action and refunding payments issued based upon data that DOH and the DSRIP Independent Assessor subsequently determine to be incorrect or falsified regardless of the reason (overpayments)
- All providers should consider payments to excluded persons to be a risk area.
  - OIG recommends to minimize the liability of civil monetary penalties providers check the exclusion lists monthly













# Ensuring the integrity, confidentiality and availability of DSRIP records,

**Patient records** 

and information systems ...

Health Insurance Portability and Accountability Act of 1996: Security Regulations (modified)

https://www.checkmarx.com/2016/06/24/20160624the-importance-of-database-security-and-integrity/





### Reporting potential Fraud, Waste or Abuse

(518) 262-4369

# 24/7 Anonymous and Confidential Reporting





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