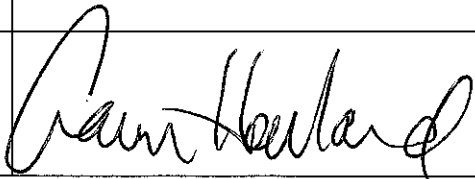


Catholic Charities Disabilities Services
Agency Standard and Procedure

Standard Category	Quality Assurance
Standard Title	Corporate Compliance
Regulations	14 NYCRR §600-699 18 NYCRR §521
Original Issue Date	8/23/2019
Latest Revision Date	N/A
Number of Pages	2
Attachments	N/A
Approved by: Aaron Howland, Executive Director	

Catholic Charities Disabilities Services (CCDS) has a long standing and professionally recognized comprehensive Corporate Compliance Program, both at the Catholic Charities of the Diocese of Albany (CCDA) corporate level and at the CCDS agency level. These efforts are reflected in Standards adopted by CCDA and CCDS. A dedicated Compliance Officer oversees the program at the corporate level, which addresses each of the eight compliance elements as required in NYS regulations. Please see the CCDA Compliance Plan and Code of Conduct, for further information on the CCDA Compliance Program. This CCDA Compliance Program encompasses all CCDA agencies, programs, and services, including CCDS.

CCDS has a Compliance Committee, which includes representatives from the CCDA Compliance Department, CCDS Quality Assurance, Program, and Executive Management. This committee review the Compliance Program, develops and updates the CCDS Compliance Work Plan and meets periodically to address relevant compliance reports or concerns as they arise.

1. The CCDA Compliance Work Plan lists broad actions and areas to be addressed, including ongoing auditing and monitoring for specific CCDS programs and services. The Compliance Officer continues to be informed of regulatory changes that affect service provision and documentation as well as NYS OMIG requirements. Self-assessment of the Compliance Program is completed periodically to address any relevant compliance updates, including input and assessment of CCDS operations, using tools developed by NY State Office of Medicaid Inspector General (OMIG). The Compliance Officer, CCDS Quality Assurance Director and the CCDA Board Corporate Compliance Committee maintain regular communication and updates regarding pertinent regulatory changes, compliance concerns, audit protocols, and memoranda from government entities regarding risk areas for monitoring. These activities are also reflected in the CCDS Annual Quality Assurance Plan.
2. An electronic health record system supports Office for People with Developmental Disabilities (OPWDD) service documentation needs. CCDS leadership developed specific processes and workflows to address CCDS specific compliance risks in electronic documentation. This system includes an electronic date/signature to assist in verifying the staff that signed off on documents and that services were documented contemporaneously.
3. Routine service documentation audits, as well as audits and recommendations to address specific risk areas are carried out by the CCDA Compliance Department to further support the internal auditing and monitoring of CCDS services. Risk assessment and mitigation continues as a high priority active process, as risks are identified or situations change. Audit work plans are adjusted based on risk areas identified through these audits as well as through internal file reviews, pre-and post-billing audits by CCDS and the CCDA Compliance Department, utilizing OPWDD/OMIG published audit criteria are be carried out to ensure compliance with all applicable requirements, the results of which are shared with CCDS Quality Assurance and other CCDS Administration, as well as the CCDA Corporate Compliance Officer.
4. CCDS strives to provide quality services, with documentation and practices that comply with all applicable statutes, regulations, and other administrative directives issued by New York State or Federal agencies which are charged with oversight of any programs or services provided by CCDS and will ensure that all CCDS employees are trained to follow any procedures or protocols issued by such agencies in the implementation of CCDS programs and services.