

# Compliance Program

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# I. Compliance Program Overview

Community Health Plan of Imperial Valley (CHPIV), also known as the Local Health Authority of Imperial County, is dedicated to conducting its business operations in full compliance with ethical standards, contractual obligations, and all relevant Federal and State standards, statutes, and regulations. This commitment to compliance encompasses not only CHPIV's internal business processes but also extends to the oversight and monitoring of its business partners.

The primary objective of CHPIV's Compliance Program is to enable the delivery of high-quality health care services to all its members. This program is strategically designed to ensure that every CHPIV member receives appropriate and quality health care through a provider network that adheres to all relevant state and federal rules, regulations, and CHPIV's contractual obligations.

The CHPIV Compliance Program operates with a dynamic approach. Regular reviews are conducted to continuously improve the program, aligning it with evolving compliance requirements and changes in state and federal laws and regulations. This comprehensive program applies to all key stakeholders, including Commissioners, employees, and Contractors, encompassing contracted Knox-Keene licensed health plans, participating providers, and all downstream entities.

CHPIV has formalized its compliance activities through the establishment of a comprehensive Compliance Program. This program is designed to proactively prevent and detect any violations of ethical standards, contractual obligations, and applicable laws, involving both the CHPIV Commission and executive staff. Operating independently from operational and program areas, CHPIV's Compliance Program is focused on identifying deficiencies and expediting remedial actions. It integrates existing compliance elements and functions while also enhancing them to elevate the overall quality of CHPIV's compliance efforts. Our aim is to foster a culture of integrity and ensure the highest standards of compliance throughout the organization.

The Delegation Plan is reviewed and approved by the Compliance & Policy Committee and the Commission routinely and not less than biennially. A copy of the Compliance Program is available on [CHPIV's website](#).

## II. Compliance Organizational Structure

### **Chief Compliance Officer**

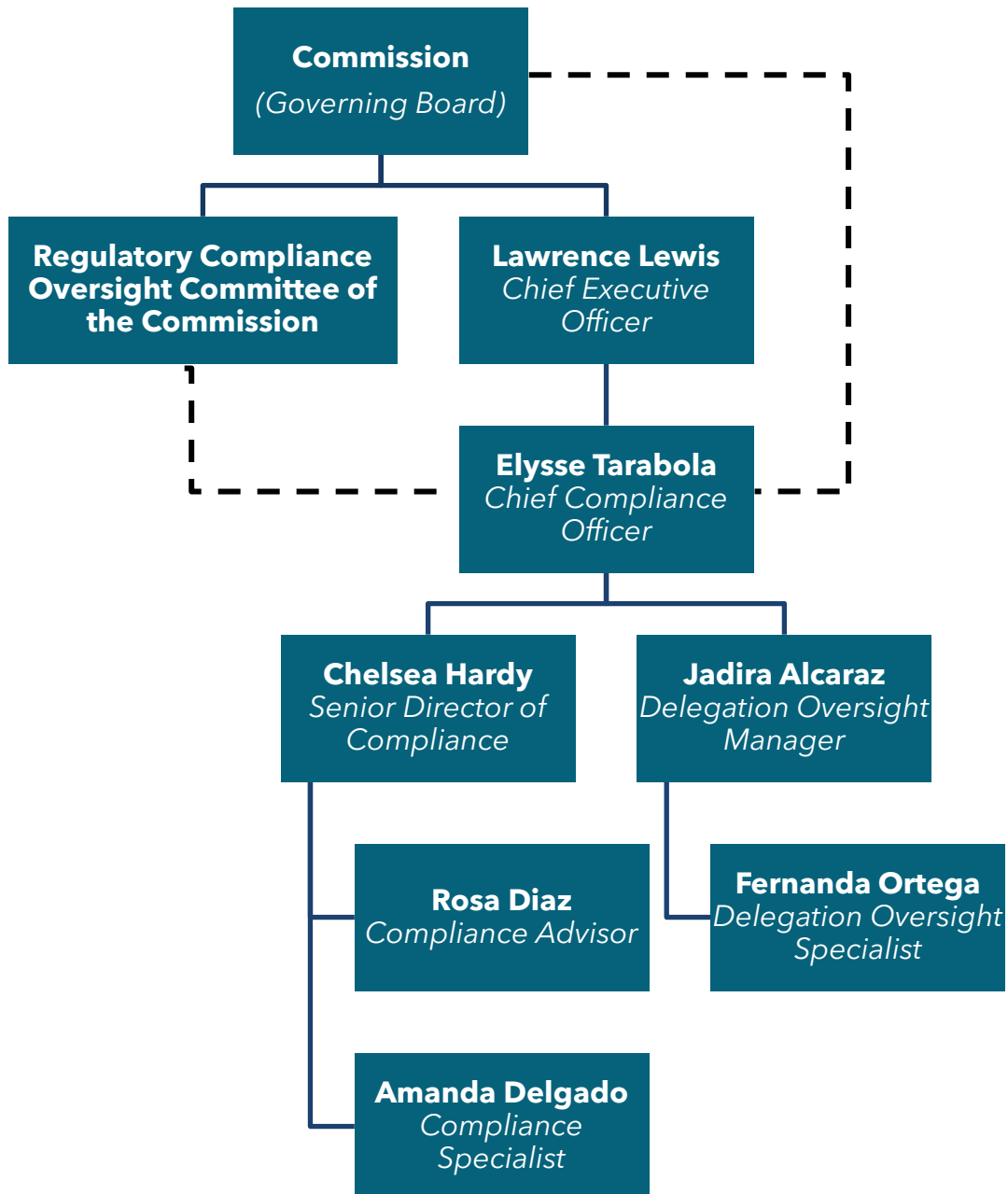
The Chief Compliance Officer serves as the focal point for all compliance activities. The Chief Compliance Officer is charged with the responsibility of developing, operating, and monitoring the Compliance Program. The Chief Compliance Officer reports to the Chief Executive Officer ("CEO") but has the authority to report directly to the Commission, as necessary.

The Chief Compliance Officer is an employee of CHPIV and reports directly and periodically to the Commission on the activities and status of the compliance program, including issues identified, investigated, and resolved by the Compliance Program.

The Chief Compliance Officer shall ensure that the following fundamental elements of compliance are incorporated into the program:

1. Written Policies, Procedures and Code of Conduct
2. Compliance Officer, Compliance Committee, Commission Governing Body
3. Effective Training and Education
4. Effective Lines of Communication
5. Effective Systems for Routine Monitoring and Auditing
6. Procedures and Systems for Promptly Responding to Compliance Issues
7. CHPIV's Accountability for Delegation Oversight

## Organizational Chart



## III. Authority & Responsibility

CHPIV's Compliance Program ensures adherence to all federal and state rules, regulations, contracts, and standards as mandated by relevant regulatory agencies. This program also extends its coverage to subcontractors. Notably, the Compliance Program encompasses the following requirements:

- Rules and Regulations of the Department of Managed Health Care.
- Rules and Regulations of the Centers for Medicare & Medicaid Services.
- All applicable federal rules and regulations governing health care services provision.
- Terms and conditions as set forth in CHPIV contracts with California, private foundations, and other payer organizations for healthcare services delivery.
- The right of State and Federal Governments to access premises for compliance verification with the Contract(s) and other reasonable purposes, with or without prior notice to CHPIV.

### **CHPIV Commission**

The CHPIV Commission actively oversees and monitors the organization's compliance efforts. It holds the responsibility of evaluating CHPIV's overall performance and providing necessary directions in response to instances of non-compliance. The Regulatory Compliance Committee of the Commission is a subcommittee of the Commission that is focused on ensuring the effectiveness of the Compliance Program.

### **Compliance & Policy Committee (CPC)**

The Compliance & Policy Committee (CPC) offers valuable oversight, advice, and general guidance to CHPIV's senior management on all matters related to compliance. This committee is specifically focused on ensuring that CHPIV and its subcontractors adhere fully to both mandated and non-mandated performance standards. Their efforts include monitoring the implementation of policies and procedures that require compliance with all applicable laws, regulations, contractual requirements, and internal policies.

## IV. Compliance Scope

To ensure that all CHPIV members receive high quality and medically appropriate healthcare services, the Compliance department performs ongoing activities to maintain and evaluate compliance with all contractual and regulatory requirements. The main objective of the Compliance department is to put measures in place to prevent, detect, and correct any potential occurrences of noncompliance or barriers to compliance.

#### *Policy Management*

- Oversee the review process of policies and procedures (P&Ps).
- Ensure P&Ps undergo a minimum annual review.

- Facilitate collaboration with relevant stakeholders for policy development and updates.
- Maintain a centralized repository for all approved and current P&Ps.
- Periodically communicate policy updates to all relevant stakeholders.

#### *Regulatory Implementation and Change Management*

- Disseminate regulatory changes and guidance to internal and external stakeholders promptly and comprehensively.
- Review implementation plans, updating policies, procedures, and workflows to align with new regulations. Maintain documentation of the implementation process.

#### *Risk-Based Monitoring*

- Conduct risk assessments and risk ranking to develop a risk-based monitoring program and plan.
- Develop and maintain key performance indicators (KPIs) based on regulatory and contractual requirements, including quantitative KPIs with defined calculations for measuring performance (e.g., authorization decision timeliness, grievance resolution timeliness).
- Create scorecards to track and communicate compliance status effectively.
- Implement tools and to proactively identify trends, patterns, and potential compliance issues.

#### *Audits*

- Develop an annual audit plan, subject to review and approval by the Compliance & Policy Committee and the Commission, outlining all audits scheduled for the year.
- Periodically review and update the audit plan to address emerging risks and changing regulatory requirements.
- Prepare detailed audit reports and findings, sharing the results with leadership, the Compliance & Policy Committee, and the Commission. These reports will prompt necessary corrective actions to address identified concerns and prevent recurrence of any issues.

#### *Regulatory Affairs*

- Act as the primary point of contact for CHPIV with regulators, ensuring efficient communication for inquiries and urgent matters.
- Engage in regular interactions with regulatory authorities and related workgroups to foster positive relationships and stay abreast of industry updates.
- Implement a process for tracking and managing regulatory inquiries and responses to ensure timely and accurate communication with regulators.
- Proactively disclose instances of noncompliance to regulators in a transparent and responsible manner.
- Manage notices of noncompliance and enforcement matters, coordinating appropriate responses and actions to address regulatory concerns.

#### *Delegation Oversight*

- Manage Delegation Reporting and Plan and update at least annually to address the continually evolving nature of health plan needs and operations.
- Oversee and manage all aspects of the delegation oversight process, including audits and monitoring.

- Develop a robust framework for evaluating potential delegate entities before *entering into* delegation arrangements, ensuring they meet the necessary compliance standards.
- Establish clear performance metrics and benchmarks for delegated entities, monitoring their ongoing compliance performance.
- Conduct periodic training sessions for delegates to enhance their understanding of compliance requirements and expectations.
- Maintain an open and transparent line of communication with delegates, addressing any concerns or questions related to compliance matters.

#### *Privacy*

- Monitoring Federal and State privacy and security rules to ensure compliance.
- Developing and updating privacy and security policies to safeguard protected health information (PHI).
- Providing guidelines and procedures for the proper handling and protection of PHI.
- Conducting regular and ongoing HIPAA training for all CHPIV workforce members.
- Establish procedures for reporting and managing data breaches or unauthorized disclosures of PHI.

#### *Fraud, Waste, and Abuse*

- Conduct thorough investigations of all suspected fraud, waste, and abuse allegations.
- Develop clear and accessible guidelines for reporting potential fraudulent activities to ensure consistency in reporting procedures.
- Provide training and educational programs for employees to raise awareness about fraud, waste, and abuse and ways to detect and prevent them.

#### *OIG & GSA Exclusion List Monitoring*

- Regularly monitor and cross-reference CHPIV's employees, contractors, vendors, and business partners against the OIG and GSA exclusion lists to verify their eligibility for engagement.
- Maintain comprehensive documentation of exclusion list screening results and actions taken to demonstrate compliance with exclusion list monitoring obligations.

#### *Education & Training*

- Conduct comprehensive training sessions for employees and delegates, focusing on their legal and ethical obligations under relevant laws, regulations, and policies, including federal health program requirements.
- Ensure effective communication of CHPIV's standards, policies, and procedures to all personnel who may be affected by them.

#### *Code of Conduct*

- Adherence to applicable laws, regulations, and industry best practices.
- Identify and manage potential conflicts to ensure impartiality.
- Safeguard sensitive information and personal data.
- Prohibits workplace discrimination and harassment.
- Encouraging reporting of suspected violations and protecting whistleblowers.
- Require annual acknowledgment of understanding and commitment.
- Regular reinforcement of the Code's principles through training.

## V. Compliance Work Plan

The Annual Compliance Work Plan is a collaborative effort with staff and incorporates the following components:

- Planned activities with measurable goals and benchmarks for the upcoming year.
- Designation of responsible staff member(s) for each activity.
- Defined timeframes for accomplishing each activity.
- Comprehensive review of key findings, interventions, and progress, along with monitoring of previously identified issues.
- Alignment of work plan activities with the organization's strategic objectives and compliance priorities.
- Flexibility to adapt to emerging compliance challenges or regulatory changes throughout the year.

## VI. Compliance Policies and Procedures and Relevant Documents

### Policies & Procedures (P&Ps)

Policy #	Policy Title
CMP-001	Writing and Processing Policies and Procedures
CMP-002	Delegation Oversight
CMP-003	Corrective Action Plans
CMP-004	Implementation of Regulatory Notifications
CMP-005	Confidentiality and Member Privacy
CMP-006	Compliance Training
CMP-007	Escalation of Noncompliance Issues
CMP-008	Selecting a Chief Compliance Officer
CMP-009	Fraud Waste and Abuse
CMP-XXX	Exclusion Monitoring
CMP-XXX	Breach Notification
HR-XXX	Exclusion Monitoring

Staff can view current policies and procedures in the [CHPIV Policies & Procedures Repository](#)

### Relevant Documents

- Code of Conduct ([available on website](#))
- Delegation Oversight Reporting and Plan ([available on website](#))
- Delegation Oversight Audit & Monitoring Program



## VII. Resources

### Report Compliance Issues

CHPIV's Confidential Compliance Hotline is accessible to Commission members, employees, contractors, providers, members, first tier, downstream, related entities, and other concerned parties. It allows for confidential and anonymous reporting of potential violations or suspicions related to:

- Incidents of fraud, waste, and abuse.
- Criminal activity (fraud, kickback, embezzlement, theft, etc.).
- Conflict of interest concerns.
- Code of Conduct violations.
- Privacy and information security incidents

Verbal or written communications to the Compliance Hotline or the Compliance Department are treated confidentially within the bounds of applicable laws and circumstances. Anonymity is respected, and callers/reporters are not required to provide their names. Communications are handled with appropriate privilege in accordance with relevant legal provisions.

<b>Compliance Hotline</b>	800-919-4947
<b>Chief Compliance Officer</b>	Elysse Tarabola, Chief Compliance Officer Email: <a href="mailto:ETarabola@chpiv.org">ETarabola@chpiv.org</a> Direct Line: (760) 232-5021
<b>Compliance Department</b>	<a href="mailto:Compliance@chpiv.org">Compliance@chpiv.org</a>
<b>Human Resources</b>	Michelle Ortiz, Office & HR Manager Email: <a href="mailto:MOrtiz@chpiv.org">MOrtiz@chpiv.org</a> Direct Line: 760-970-5072
<b>Online Reporting Form</b>	<a href="http://chpiv.org/compliance-program">chpiv.org/compliance-program</a>

### CHPIV Policies & Procedures

Staff can view current policies and procedures in the [CHPIV Policies & Procedures Repository](#)

## VII. Conclusion

CHPIV's Compliance Program is an adaptive framework designed to ensure the organization's adherence to policies, procedures, and performance standards. It encompasses CHPIV's employees and contracted entities, guiding them to act in full compliance with all relevant laws, regulations, and contractual obligations. The Compliance Program is subject to continuous improvements and updates to align with the Compliance department's activities and to maintain CHPIV's compliance with applicable laws, regulations, industry guidelines, and policies. Through consistent updates, we work to maintain strong ethical standards and integrity within our organization.