

	PCHP.CP.101 Compliance Program Written Policies, Procedures and Standards of Conduct V3 PCHP.CP.101	
	Name:	PCHP.CP.101 Compliance Program Written Policies, Procedures and Standards of Conduct
	ID Number:	PCHP.CP.101
	Approval Date:	01/18/2018
	Approved By:	Compliance Committee

Body

Policy Name: Compliance Program Written Policies, Procedures and Standards of Conduct

Scope: Entire Piedmont workforce

Purpose: Describes the policy framework for overall compliance and identifies corporate resources available to assist with implementation in accordance with State and Federal regulations.

Definitions & Acronyms:

- CMS: Centers for Medicare & Medicaid
- CFR: Code of Federal Regulations
- FDRs: First Tier, Downstream and Related Entities
- PBM: Pharmacy Benefit Manager

Piedmont: "Piedmont" collectively refers to Piedmont Community Health Plan (PCHP), Piedmont Community HealthCare (PCHC) and any future entities that are owned, affiliated with and/or operated by Piedmont

Policy:

1. Piedmont is committed to following all applicable Federal and State rules, regulations and standards.
2. All employees, officers, directors and first tier, downstream and related entities must carry out their roles and responsibilities in a manner that is in compliance with all Federal and State laws, rules and regulations, and guidelines. Concerns about or violations of this policy should be reported to your supervisor, the Compliance Officer, the Compliance Department, the Compliance Committee or via other methods as described in Policy No. PCHP.CP.104 – Effective Lines of Communication.
3. As part of an effective Compliance Program, Piedmont must have written policies, procedures, and standards of conduct that articulate Piedmont Community HealthCare's commitment to:
 - 1) Adhere to applicable federal, and state compliance laws, regulations and guidelines;
 - 2) Compliance expectations as embodied in the standards of conduct;
 - 3) Implementing the operation of the compliance program;
 - 4) Providing guidance to employees and others on dealing with potential compliance issues;
 - 5) Identifying how to communicate compliance issues to appropriate compliance personnel;
 - 6) Describing how suspected, detected or reported compliance issues are investigated and resolved;
 - 7) Include a policy on non-intimidation and non-retaliation for good faith participation in the compliance program, including but not limited to reporting potential issues, investigating issues, conducting self-evaluations, audits and remedial actions, and reporting to appropriate officials.

Procedures:

1. Standards of Conduct

- A. Piedmont's Standards of Conduct is known as the "Code of Conduct" and states the overarching principles and values by which Piedmont operates. It describes Piedmont's expectations that:
 - 1) All employees conduct themselves in an ethical manner;
 - 2) Issues of noncompliance and potential FWA are reported through appropriate mechanisms; and
 - 3) Reported issues will be addressed and corrected.
 - B. Piedmont's Code of Conduct communicates to employees and FDRs that compliance is everyone's responsibility from the top to the bottom.
 - C. Piedmont's Code of Conduct is reviewed annually, updated to incorporate changes in law when applicable, and approved by the Board of Directors.
2. Policies and Procedures
- A. Piedmont's Compliance Policies include policies for:
 - PCHP.CP.101: Compliance Program Written Policies, Procedures and Standards of Conduct
 - PCHP.CP.102: Compliance Officer, Committee and High Level Oversight
 - PCHP.CP.103: Effective Compliance and FWA Training
 - PCHP.CP.104: Effective Lines of Communications
 - PCHP.CP.105: Disciplinary Guidelines and Enforcement
 - PCHP.CP.106: Internal Monitoring and Auditing
 - PCHP.CP.107: Prompt Response to Compliance Issues
 - PCHP.CP.108: Policy on Non-Retaliation for Good Faith Participation in the Compliance Program
 - PCHP.CP.109: OIG/MED Exclusion Verification Process
 - B. Compliance policies and procedures articulate Piedmont's commitment to comply with all applicable Federal and State standards.
 - C. Each policy references the Federal and State law resources and other regulatory agencies used in developing or updating the policy, including but not limited to CFR, CMS Medicare Managed Care Manual, CMS Prescription Drug Benefit Manual, Medicare Benefit Policy Manual, Federal and State Law Amendment Notices, NCQA regulations, ACA guidance, and HPMS notices.
 - D. Policies and procedures are updated as notices of changes in Federal and State laws or other guidance warrants.
 - E. The Compliance Department shall review all compliance policies and procedures prior to implementation or update to assure compliance. Only the Compliance Committee can approve a Compliance or Code of Conduct-related policy or procedure for implementation.
 - F. All other policies and procedures are developed, implemented and updated in accordance with Policy PCHP.ADM.101 – Written Policies and Procedures and may be approved by the Compliance Officer, applicable Vice President, or respective Committee.
3. Distribution of Compliance Policies and Procedures and Standards of Conduct.
- A. Compliance policies and procedures and the Code of Conduct are distributed to all employees and FDRs within 90 days of hire or contracting, and when there are updates to the policies. The Code of Conduct is required to be reviewed annually by employees and FDRs along with the Compliance and FWA Trainings.
 - B. All policies and procedures are located on Centra's Policy & Procedure Portal.
 - C. Piedmont's Code of Conduct is posted on SharePoint and the web portal for FDRs.
 - D. The Compliance Department emails a "Policy Alert" when compliance policies are updated or added to the Centra P&P Portal or web portal for FDRs.
 - E. All employees and FDRs are responsible for staying up to date on Compliance Policies & Procedures.

Equipment: None

Forms and Letters: None

Reference(s): [42 CFR Sections 422.503\(b\)\(4\)\(vi\)\(A\), 423.504\(b\)\(4\)\(vi\)\(A\)](#); Medicare Managed Care Manual, Chapter 21 and Prescription Drug Benefit Manual, Chapter 9 (Rev. 1-11-13) – Compliance Program Guidelines, Section 50.1; [45 CFR 156.715](#)

Interdisciplinary Review: None

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Policy History:

Date	Revision No.	Reason for Change	Sections Affected
01/06/2011	Draft		All
01/19/2011	NEW	<ul style="list-style-type: none"> ▪ Policy format template modified changing header, adding Definitions and History sections. ▪ Approved by Compliance Committee 	All
07/09/2012	1.0	<ul style="list-style-type: none"> ▪ Procedures updated with Product Manager responsibilities ▪ Added approval authority by Department Directors, Product Manager and Compliance Specialist. 	Procedures
01/11/2013	2.0	<ul style="list-style-type: none"> ▪ Reformatted Policy Header to include Line of Business and more detail for responsible departments. Removed Category (Dept Type) and sections for Revised Date and Review Date. ▪ Changed Policy Title from Compliance with Federal and State Standards ▪ Updated Procedures to be more specific to "Compliance Plan" Policies and Procedures vs. "all" Policies and Procedures. 	Header, Policy Title, and Procedures
03/04/2014	2.0	<ul style="list-style-type: none"> ▪ Annual Review. No Changes. 	None
02/16/2015	3.0	<ul style="list-style-type: none"> ▪ Incorporated Centra's Code of Conduct related to Piedmont employees, and designated Piedmont's Code to be applicable to FDRs until Centra's Code is updated. ▪ Added PCHP to header, footer and definitions. ▪ Added web portal for FDRs as additional location for P&Ps and Code of Conduct. 	Header, Footer, Definitions, Policies and Procedures
11/19/15	4.0	<ul style="list-style-type: none"> ▪ Converted Policy to Centra format, new numbering system, and new housing location on Centra's Intranet 	All
1/19/2017	5.0	<ul style="list-style-type: none"> ▪ Removed Centra's Code of Conduct related to Piedmont employees ▪ Removed reference to PCHP.FWA.101 as a compliance program P&P. FWA is its own program. ▪ Edited "approval" language for P&Ps to 	Procedure 1; Procedure 2F; Procedure 3

		include VPs and respective Committees <ul style="list-style-type: none"> ▪ Added Code of Conduct location to SharePoint 	
1/18/2018	6.0	<ul style="list-style-type: none"> ▪ Updated reference to include Exchange CFR 	References

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