



The Institutes of Applied Human Dynamics, Inc.  
*Embracing Families, Enriching Lives*

<p><b>Corporate Compliance Reporting, Investigation and Resolution Policy and Procedure</b></p>	<p><b>Policy Manual:</b>  <i>Corporate Compliance</i></p>
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**PURPOSE:**

IAHD has implemented specific procedures for reporting any corporate compliance issues or concerns such as Medicaid fraud, abuse or waste. This document outlines the procedures to report those concerns, the steps IAHD will take to investigate any reports of inappropriate practices, policy violations, etc., as well as how IAHD will address any findings from an investigation and resolve issues which may have been discovered.

**APPLICABILITY:**

This policy applies to the following:

- All IAHD employees
- All members of the IAHD Board of Directors
- All vendors or contractors utilized by IAHD
- All consultants contract directly with IAHD

**DEFINITIONS:**

The following are definitions of terms referred to throughout this document:

- 1) “Affected Individuals” – defined in 18 NYCRR Part 521 as “all persons who are affected by the required provider’s risk areas including the required provider’s employees, the chief executive and other senior administrators, managers, contractors, agents, subcontractors, independent contractors, and governing body and corporate officers.
- 2) “Vendors” - for the purposes of this policy, defined as any person or entity where there is a direct relationship, contract or agreement with IAHD, outside of employment or serving as a member of the Board of Directors.

**POLICY:**

IAHD is committed to ensuring compliance with all federal, state and local statutes and regulations. In accordance with 18 NYCRR Part 521, IAHD has designated the following ways to report any compliance issues or concerns, as well as an outlet for asking questions pertaining to the IAHD Compliance Program (*See IAHD Compliance Program*).

- 1) Direct reporting to the Compliance Officer - **Any “affected individuals”** can report a compliance issue or concern directly to the IAHD Compliance Officer either by phone or email. ***This is the best practice and method for reporting concerns.***

2) Employees of IAHD may report compliance concerns to a supervisor or director of their department. The supervisor and/or director must then report directly to the Compliance Officer

3) IAHD Members of the Board of Directors may report any issues or compliance concerns to the CEO. The CEO will report the concern or issue to the Compliance Officer.

4) **Vendors** may report any concerns or compliance issues to the director of the department they have contracted with for services. The director will report the concern or issue to the Compliance Officer.

5) Anonymous Reporting – **Any “affected individuals”** may report any compliance issue or concerns anonymously through the IAHD Hotline or by mailing an anonymous letter to the IAHD Compliance Officer.

IAHD takes all reports of compliance issues and concerns seriously. Upon receipt of a compliance concern or issue, the Compliance Officer will follow the procedure outlined below.

#### **PROCEDURES:**

The following procedures will be followed when a compliance concern or issue is reported to the Compliance Officer:

- 1) Upon receipt of a concern or issue, the Compliance Officer will ensure an investigation is commenced within 5 business days of receipt of the complaint.
- 2) A thorough investigation will be completed within 45 business days, with exceptions allowed where needed and reasoning documented.
- 3) At the end of the investigation, findings and recommendations will be shared with the appropriate parties for corrective actions.
- 4) The investigation, findings and recommendations will also be shared with the Corporate Compliance Committee for review. The committee may make additional recommendations or direct the investigator to further explore a specific area.
- 5) Corrective Actions must be submitted to the Compliance Officer within 20 business days of the receipt of the findings and recommendations.
- 6) The committee shall review the corrective actions to ensure identified issues were addressed and will follow up with the appropriate parties regarding any outstanding issues.
- 7) The matter will be considered closed once corrective actions have been submitted and accepted by the committee.
- 8) The Corporate Compliance Officer will share findings and resolutions to the CEO and IAHD Board of Directors.

**References:** 18 NYCRR 521 Fraud Waste and Abuse Prevention Regulation

#### **Effective Dates:**

*June 28, 2023: Policy drafted and sent to Cabinet for approval*

*July 13, 2023: Adopted and distributed*