

**AGREEMENT for COMPLIANCE PROGRAM SERVICES for the CHAMPAIGN COUNTY NURSING HOME**

THIS AGREEMENT is made and entered into as of the 1<sup>st</sup> th day of Sept. (Month), 2013 by and between the Champaign County Board, acting on behalf of the County of Champaign, a body politic and corporate owning and operating as Champaign County Nursing Home (the "Home"), and Management Performance Associates, Inc., a Missouri corporation (the "Manager").

**RECITALS**

- a. The parties hereto have previously entered a Management Contract dated June 19, 2011; and
- b. The parties desire to enter into this additional Agreement for the purpose of development and implementation of a Compliance Program for the Champaign County Nursing Home (the "Compliance Services"), subject to the terms and conditions as set forth below:
- c. Other than the specific terms noted in this Agreement for Compliance Program Development and Implementation, all other terms and conditions of the Management Contract between the parties dated June 19, 2011 shall apply to this Agreement, to the extent that any such terms apply to the Compliance Services.

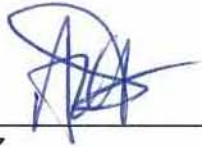
**WITNESSETH**

NOW, THEREFORE, the parties agree as follows:

- 1 Program:** Manager shall be responsible for designing, and overseeing the implementation and ongoing management of, a Compliance Program for Home. Manager shall be responsible for conducting a baseline compliance audit; assisting with policy and procedure development and compliance training; providing strategic guidance for compliance audits; providing ongoing updates to the Compliance Program; serving as a compliance resource to Home; and conducting an annual review of the Compliance Program's effectiveness. The specific terms for the compliance program services are documented in Exhibits A (Detailed Description of Compliance Program Services), and B (Table of Responsibilities) to this Agreement, which are incorporated herein by reference.
- 2 Management Fee:** Manager shall invoice the Home the amount of \$33,933.30 for the Compliance Program, payable in monthly payments of \$3,393.33 in advance. In addition to the fee, direct costs of Manager for expenses such as travel and lodging expenses, long distance telephone, and webinar and other training costs shall be reimbursed separately by the Home on a monthly basis, subject to the terms of the Champaign County Travel Policy and monthly review by the Nursing Home Board of Directors. The professional fee will be adjusted annually for growing in CPI using the All Urban Consumers Index.

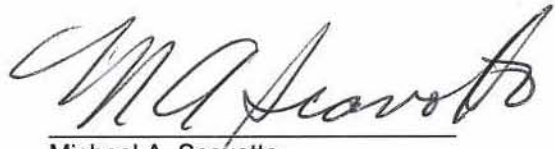
- 3 **Term:** This agreement shall be in effect for ten (10) months – from September 1, 2013 through June 30, 2014. This Agreement may renew for one additional one year period on July 1, 2014 with mutually agreed upon modifications, unless this Agreement is terminated by either party by giving thirty (30) days' written or notice of termination is given, as set forth below.
- 4 **Scope.** MPA's Compliance Services are designed to reduce your risk of regulatory penalty via a compliance program that is well-documented and maintained. However, there can be no assurance that all risk will be eliminated. Any damages arising from or out of MPA's work will be limited to the lesser of either one year's professional fees or actual damages. MPA's Compliance Services do not constitute legal advice.

IN WITNESS THEREOF, the undersigned have executed this AGREEMENT for COMPLIANCE PROGRAM DEVELOPMENT and IMPLEMENTATION as of the day and year first written above.



\_\_\_\_\_  
Alan Kurtz  
Chair  
Champaign County Board

Date: 09/20/13



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Michael A. Scavotto  
President  
Management Performance Associates,  
Inc.

Date: 9/20/13

## **Exhibit A**

### **Detailed Description of Compliance Program Services**

MPA will work with CCNH to develop and maintain a Compliance Program with the following elements:

1. Written policies, procedures, and standards of conduct
2. A designated compliance officer and compliance committee
3. An effective training and education strategy
4. Effective lines of communication
5. Enforcement of standards through well-publicized disciplinary guidelines
6. Internal monitoring and auditing (to be performed by CCNH staff with MPA guidance)
7. Prompt response to detected offenses and corrective action
8. Regular review of Compliance Program
9. Updates to the Compliance Program

The Compliance Program is divided into the following six stages:

#### **I. Ongoing Assessment of Compliance Status**

MPA will work with CCNH staff to assess CCNH's current state of compliance with the nine Compliance Program Components.

#### **II. Compliance Program Document Development**

MPA will review and revise the Compliance Program document as needed. This document will be tailored to organization-specific practices.

Building on CCNH's current compliance practices, MPA will review and revise existing P&P, as well as develop new P&P as needed for the following Compliance Program elements:

- **Compliance officer and compliance committee**  
MPA will work with CCNH the Compliance Officer and Compliance Committee, and refine the roles of the officer and committee as needed. MPA will also revise the method for which the compliance officer and committee will interface with and report to CCNH.
- **Conducting effective training and education**

The Compliance Program will describe CCNH's plan for compliance related training (including how often employees will be trained and on what topics, and how training is documented). MPA will continue to work with CCNH to maintain effective and timely training and education.

- **Developing effective lines of communication**

MPA will help CCNH maintain the communication of the program including the use of a toll-free hotline for employees, residents, and others to report potential compliance program violations.

- **Enforcing standards through well-publicized disciplinary guidelines**

MPA will continue to review and revise CCNH's employee handbook to ensure that compliance is sufficiently addressed as an element of evaluating employees and managers. While compliance training and education are designed to prevent disciplinary action, the Compliance Program must state how non-compliance will be addressed. If additional P&P are needed, MPA will work with staff input to develop P&P that include consequences for violating the Compliance Program and failing to detect Compliance Program violations. Corrective action may take the form of employee education. P&P will explain the range of discipline; who is responsible for taking action and how matters are handled; and that disciplinary action will be taken on an equitable basis. These P&P will be listed in the Compliance Program document and become a part of employee training.

- **Responding promptly to detected offenses and developing corrective action**

MPA will continue to review CCNH's P&P for handling internal investigations, and expand them in the Compliance Program document. There will be guidelines for: investigating incidents or reports of alleged non-compliance, including P&P for developing a proper corrective action plan; self-reporting overpayments; and how to document the investigation and corrective action process.

### **III. Development of Policies and Procedures that Target Organization-Specific Compliance Risks**

MPA will continually review CCNH's P&P against changes in OIG compliance guidance; prior surveys; staff input; and the results of the baseline assessment. The P&P development will focus on the compliance risks identified in the baseline assessment as well as risk areas identified by the OIG.

### **IV. Training and Education**

MPA will continue to review and revise the training plan for CCNH which will set out training topics, frequency, and documentation requirements. In addition, MPA will provide the following training programs:

- ▶ General compliance training emphasizing the importance of compliance, and explaining the Compliance Program and how to report non-compliance. This training will be one live seminar or

workshop (1 to 2 hours) provided to CCNH employees and County Board members.

- ▶ Two additional training sessions (live seminar, workshop, and/or webinar) addressing two compliance topics identified with CCNH (e.g. HIPAA, managing the QA process; etc.)

With each webinar or seminar, MPA will provide P&P for documenting completion of training and measuring training effectiveness. Training on additional topics and for employees and directors who join CCNH after the above training is complete is available for an additional fee.

#### **V. Auditing and Monitoring**

After year one, the compliance program is shifting from development to a focus on ongoing auditing and monitoring of areas of risk. For each compliance risk area, MPA will work with CCNH staff (management, administrative, clinical and/or billing) to review and revise existing audit tools and well as develop new audit tools as necessary to benchmark CCNH's compliance progress in each compliance risk area. Audit tools include: random sampling of records or charts, reviewing written contracts, observing clinical staff, assessing HIPAA documentation, evaluating employee training and discipline records, and reviewing compliance report complaint logs and investigative files. Audits will be conducted by CCNH personnel, with direction from MPA.

Audits will be completed by CCNH staff at measured intervals as appropriate (monthly, quarterly, annually, or bi-annually, depending on the complexity of the standard and degree of risk involved). After each audit, CCNH will create a results report to be shared with management staff. MPA will be involved in the creation of these reports. Periodically, MPA and CCNH staff will review these reports, identify areas needing improvement, update goals, and develop a plan to achieve these new goals. MPA will be heavily involved in assisting CCNH in the ongoing auditing and monitoring program.

#### **VI. Updates and Improvements**

MPA will provide ongoing regulatory updates to the Compliance Program. In addition, and in connection with the annual audit, MPA will organize an annual evaluation of the Compliance Program, specifically addressing whether:

- adequate resources are dedicated to compliance
- P&P need to be updated based on audit results
- the Compliance Program is followed by employees
- the roles of Compliance Officer and Compliance Committee need clarification or modification
- further employee education and training are needed

- the reporting mechanism is used
- disciplinary P&P are followed, applied consistently, and effective to prevent non-compliance
- audit techniques successfully identify risk areas and monitor improvements
- investigation and corrective action procedures promptly identify, minimize the effects of, and prevent further non-compliance
- the Compliance Program is sufficiently documented

The results of the evaluation will be reported to senior management along with recommendations for improving the Compliance Program in the following year.

#### **Corporate Support**

MPA will serve as a resource to you and will be available to answer questions that may arise regarding the Compliance Program and its policies and procedures.

#### **Ongoing Management of Your Program for Results**

The following steps are crucial for continuing a successful program:

- Creating a compliance culture that compliments the organization's mission
- Training and education
- Reviewing the effectiveness of auditing and monitoring
- Assessing the Compliance Program annually
- Updating the Compliance Program based on new regulations, OIG guidance, and improvements in best practices

When performed on an annual basis, the above services, combined with the efforts of your staff, will keep your Compliance Program effective.

## Exhibit B

### Table of Responsibilities

<b>Task</b>	<b>MPA Responsibility</b>	<b>CCNH Responsibility</b>
Assessment of Compliance Status	<p>Provide checklists, requests for information</p> <p>Review and analyze responses to requests for information, and develop strengths, weaknesses, and goals</p>	<p>Distribute checklists, requests for information to relevant personnel for completion</p> <p>Provide information about existing compliance policies and procedures</p> <p>Facilitate timely and accurate completion of checklists and requests</p> <p>Participate in discussion about results</p>
Compliance Program Document Review and Development	<p>Draft compliance program document for CCNH as needed. Review and revise document based on OIG compliance regulatory changes</p>	<p>Review and provide feedback on documents</p> <p>Disseminate compliance program to employees, directors, and vendors</p>
Review, Revise and Develop new Policies and Procedures that Target Organization-Specific Compliance Risks	<p>Amend existing policies. Draft additional policies and procedures</p>	<p>Provide existing policies and procedures</p> <p>Review amended policies and new policies</p> <p>Disseminate completed policies and procedures and incorporate them into daily operations</p>
Training and Education	<p>Review and Revise the plan for how CCNH will conduct, document and evaluate training on an ongoing basis</p>	<p>Work with MPA to identify risk areas appropriate for additional training</p> <p>Identify facility personnel who will provide ongoing employee education (new employee orientation, quarterly, annual in-services)</p>
Auditing and Monitoring	<p>Review, revise and develop audit tools for each of the risk areas that are a part of the CCNH compliance program</p>	<p>Assign responsibility (CCNH staff) for conducting audits</p> <p>Complete the audits and report the results back to MPA</p>

	<p>Schedule timelines for audits</p> <p>Review ongoing audit results with CCNH staff and monitor results for improvement and effectiveness</p>	<p>Provide feedback to MPA to identify the most effective audit processes</p>
<p>Updates and Improvement</p>	<p>Oversee an annual audit of overall compliance program effectiveness at CCNH</p> <p>Provide updates based on regulations, best practices, and other guidance</p>	<p>Participate in the annual audit; provide requested information to MPA</p> <p>Incorporate updates into training, policies and procedures, and audit process</p> <p>Report new compliance concerns to MPA</p>