



Policy Title: Compliance Monitoring & Audits			
Department Responsible: THN Compliance & Integrity	Policy Number: AMO-001	THN's Effective Date: January 1, 2022	Next Review/Revision Date: September 30, 2024
Title of Person Responsible: THN Director of Compliance & Privacy	THN Approval Council: THN Compliance and Privacy Committee	Date Approved: June 9, 2023	Date Approved by THN Board of Managers: August 15, 2023

- I. **Purpose.** The purpose of AMO-001 is to identify how Triad HealthCare Network (THN), through its Director of Compliance & Privacy, shall monitor, audit, and make reports regarding THN's compliance with laws, regulations, the Compliance Plan, Code of Conduct, and THN's Policies and Procedures, and (2) procedures to ensure that THN's practices are consistent with its stated policies.

- II. **Policy.** THN shall develop, implement, and maintain an ongoing monitoring and auditing function to ensure the effective implementation of its Compliance Program and compliance with applicable laws and regulations. At a minimum, the compliance plan must include:
 - A. Written policies and procedures;
 - B. Designation of a Compliance Officer and Compliance Committee;
 - C. Effective education and training;
 - D. An effective line of communication;
 - E. Enforcement of standards through well-publicized disciplinary guidelines;
 - F. Procedures for effective internal monitoring and auditing; and
 - G. Procedures for ensuring prompt responses to detected offenses; and development of corrective action initiatives, and comprehensive fraud, waste, and abuse (FWA) resources.

- III. **Responsibilities.**
 - A. **General Methods of Compliance Monitoring.** THN has developed a multi-faceted approach to ensuring compliance, which includes day-to-day monitoring and conducting regular compliance reviews and periodic compliance audits (both current and retrospective). The Board of Managers, Compliance Committee, and THN staff, as appropriate, conduct the following oversight activities:



1. **Business Conduct and Standards**
 - a. Oversee the development, review, and revision of company policies and monitors the periodic development and revision of functional area procedures applicable to THN.
2. **Compliance Officer, Compliance Committee, and Governing Body**
 - a. Facilitate the development, review, and submission of at least quarterly compliance reports presented by the Compliance Officer to THN's Compliance Committee.
3. **Effective Training and Education**
 - a. Establish, implement, and provide effective annual training and education to workforce members, including FWA training to the Board of Managers, THN staff, Participants, Providers/Suppliers, and others acting on behalf of THN, as appropriate.
 - b. THN's workforce must, at a minimum, receive general compliance training within 90 days (about 3 months) of initial hiring/election, and annually thereafter. THN workforce members involved in the administration or delivery of THN must, at a minimum, receive FWA training within 90 days (about 3 months) of initial hiring or contracting, and annually thereafter.
 - c. In addition, training records (e.g., attendance, topic, certificate of completion, and/or test scores) must be maintained for 10 years. There must be a strategy to monitor and audit Participants and Providers/Suppliers.
4. **Effective Lines of Communication**
 - a. Provide effective methods for communicating information from the Compliance Officer to the workforce, as applicable, within a reasonable timeframe, including changes in federal and state laws, regulations, sub-regulatory guidance, as well as changes to the Code of Conduct and policies and procedures.
 - b. Promote methods for reporting suspected or actual misconduct (e.g., helpline) that allow for anonymous reporting and confidentiality to the greatest extent possible.
 - c. Respond, as appropriate, to external inquiries for information from CMS, Office of Inspector General (OIG), General Services Administration (GSA), and others acting on behalf of CMS.



- d. Collaborate with business partners to provide accurate, consistent, and timely responses to inquiries, as appropriate.
 - e. Receive and review periodic reports from business partners on the status of CMS communications, instructions, and the submission of required attestations, certifications, and reports.
 - f. Communicate general compliance information to Participants and Providers/Suppliers through electronic bulletins that refer recipients to compliance resources on its website. The site should contain the Code of Conduct, and compliance policies and procedures.
5. ***Effective System for Routine Monitoring, Auditing, and Identification of Compliance Risks***
- a. Maintain a system of ongoing monitoring and auditing to test and confirm compliance with regulations, sub-regulatory guidance, contractual agreements, and all applicable federal and state laws.
 - b. Annually, perform a compliance program risk assessment with input from areas like internal audit, special investigations, leadership, and business partners.
 - c. Conduct monthly vendor monitoring.
 - d. Review the OIG and System for Award Management (SAM) exclusion lists for the workforce prior to hiring or contracting and monthly thereafter.
 - e. Annually, initiate a compliance program audit. The audit must be conducted by personnel trained in compliance. The results of the audit will be shared with the Board of Managers.
 - f. The Compliance Committee, which is chaired by the Compliance Officer, reviews items of potential non-compliance and receives updates from business areas on remedial actions taken to reduce non-compliant activity, as appropriate.
 - g. Relevant documentation, which may include electronic documentation, shall be maintained on the Cone Health SharePoint site, consistent with THN document retention policies but, in no case, for a period of less than ten years.
6. ***Enforcement***



- a. Respond to alleged violations received internally or externally.
 - b. Determine appropriate corrective actions, including but not limited to, modification of policies, manuals, processes, or disciplinary actions.
 - c. For those issues related to probable violations of law, THN will work with its legal counsel to report to the appropriate law enforcement agency.
7. **Oversight**
- a. Work with management in business areas to minimize or eliminate compliance risks associated with MA (Medicare Advantage) and PDP products.
8. **Governance and Reporting**
- a. Report the progress against plan, audit findings, potential FWA statistics, and compliance issues to the Compliance Committee and the Board of Managers, at least quarterly.
- B. **Questions Related to AMO Policies and Procedures.** Any questions concerning the AMO Policies and Procedures, or questions that are not specifically addressed in the AMO Policies and Procedures, should be directed to THN's Compliance Officer.
- C. **Audit and Documentation.** THN shall audit and document compliance with the AMO Policies and Procedures. Relevant documentation, which may include electronic documentation, shall be maintained in the Compliance Program files, consistent with THN's document retention policy but, in no case, for a period of less than ten years.
- D. **Reporting to Law Enforcement Agencies.** THN shall timely report probable violations of law to an appropriate law enforcement entity.

Date	Reviewed	Revised	Notes
January 1, 2022			Original Publication
August 2022	X		No changes
May 2023		X	Converted to REACH