




United Behavioral Health

Compliance: Enforcement of Disciplinary Guidelines		Policy Identifier/Number: AD-01E	
Annual Review Completed Date: February 2018			
Policy Category: Government - Pierce Regional Support Network	Applicable Lines of Business: Medicaid	Entity/Plan: Optum Pierce Behavioral Health Organization	State: Pierce County, Washington
Approved by: Bea Dixon, Executive Director		Signature: 	

Policy Statement and Purpose

Optum Pierce Behavioral Health Organization (BHO) has developed a policy, to implement, track and complete disciplinary actions resulting from assessment activities, investigations, audits and ongoing monitoring.

The purpose of this policy is to provide guidelines for establishing a record of actions taken to resolve identified non-compliance and to enhance processes and business outputs to support complying with applicable legal and regulatory requirements and avoiding future negative occurrences.

Policy Audience and Applicability

This policy is applicable to the Optum Pierce BHO and benefits administered through the Washington State Department of Social and Health Services (DSHS) current Prepaid Inpatient Health Plan (PIHP) and Behavioral Health State Contract (BHSC).

Policy Definitions

Corrective Action Plan (CAP) - shall mean a written plan of action containing a detailed account of steps, activities, modifications and improvements taken to correct a deficiency or finding related to a known area of non-compliance or identified finding /concern.

Policy Provisions

1. Through ongoing monitoring and in response to review of submitted reports of noncompliance, substantiated claims will be remediated through disciplinary guidelines.
2. Depending on the seriousness of the issue identified, the following disciplinary actions may be implemented;
 - 2.1. Corrective Action Plan (CAP)

Optum is responsible for adhering to all applicable state and/or federal laws governing activities within the scope of this policy, including the Mental Health Parity and Addiction Equity Act (MHPAEA) and the Health Insurance Portability and Accountability Act (HIPAA) privacy requirements, as well as the applicable requirements, standards and regulations as set forth by the Employee Retirement Income Security Act (ERISA), the Center for Medicare and Medicaid Services (CMS), the Department of Labor (DoL), and any applicable accrediting organizations.

- 2.2. Sanctions
- 2.3. Contract Termination
- 3. Corrective actions may be developed jointly with DSHS and Optum Pierce BHO and may include additional training, increased oversight or punitive actions.
- 4. If an Optum Pierce BHO staff member has violated Optum's or UHG's policies or procedures, they may be subject to disciplinary action up to and including termination.

Related Policies, Procedures & Materials

- Optum Pierce Behavioral Health Organization policy:
 - *AD-01A Compliance: General Compliance Policy*
 - *AD-01B Compliance: Governance and Oversight*
 - *AD-01C Compliance: Communication and Reporting*
 - *AD-01D Compliance: Training and Education*
 - *AD-01F Compliance: Enforcement of Disciplinary Guidelines*
 - *AD-01G Compliance: System for Prompt Response to Compliance Issues*

Attachments

N/A

Approval History

- Policy created and effective: February 2018