




United Behavioral Health

Recoupment of Civil Findings			Policy Identifier/Number: AD-27
Annual Review Completed Date:			
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 a process to monitor vendors, providers and subcontractors for any civil money penalties and assessments.
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).

Policy Definitions
N/A
Policy Provisions

- Draft Policy
- I. In the event of any suspected fraud or abuse, the Vendor, providers and subcontractors shall report to Optum Pierce BHO as soon as it is discovered and cooperate in any investigation or prosecution conducted by the Optum Pierce BHO, Washington State or the Medicaid Fraud Compliance Unit (MFCU).
 - II. At such a time that an investigation is launched, Option Pierce BHO will add this item as a standing agenda item on the weekly executive team meeting. No less than 1x a quarter will the Compliance Manager of the Optum Pierce BHO reaches out to the investigating body to determine the progress of the case.
 - III. As soon as any civil money penalties or assessments are completed, the Compliance Manager shall notify the Finance Director and Executive Team of these events.
 - IV. The Finance Director will be responsible for working with the appropriate agency to ensure that any monetary penalties are appropriately remitted to Optum Pierce BHO.

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.

This document is proprietary and is intended for internal use only. This document is not to be released outside the organization without appropriate authorization.

Related Policies, Procedures & Materials

State-specific policies:

- AD-01A General Compliance
- AD-01B Compliance Policy- Governance and Oversight Policy
- AD-01C Compliance Policy- Training and Education
- AD-01D Compliance Policy- Communication and Reporting
- AD-01E Compliance Policy- Enforcement of Disciplinary Guidelines
- AD-01F Compliance Policy- Routine Auditing and Monitoring
- AD-01G Compliance Policy- System for Prompt Response to Compliance Issues
- AD-14 Allocation and Accounting for Funding
- AD- 26 Recovery of an Overpayment to a Provider

Attachments

N/A

Approval History

- Policy created and effective: 02/27/2018
- Operational Procedures and Standards Committee reviewed and accepted: INSERT DATE DD/MM/YYYY