

## **2011 CORPORATE COMPLIANCE CONFERENCE**

Over 200 participants gathered at the Marriott Hotel in Albany on May 10th for the fourth annual CP of NYS and NYSARC Corporate Compliance Conference. Four speakers selected for their expertise in corporate compliance provided information critical to establishing and maintaining an effective corporate compliance program.

Melissa Zambri, a partner with the law firm Hiscock & Barclay opened the conference with her presentation “Measuring the Effectiveness of Your Compliance Program.” Ms. Zambri discussed the NYS Office of Medicaid Inspector General (OMIG) audit process in evaluating the effectiveness of a provider’s compliance program. She shared tips on what material should be reviewed in a compliance evaluation and suggested ways providers can self-assess their programs.

James Sheehan, the NYS Medicaid Inspector General, presented “Mandatory Compliance and Mandatory Reporting in the Medicaid Program.” He spoke on the federal mandate for Medicaid compliance programs. He also addressed two requirements of the Affordable Care Act, Section 6402 – the requirement for self-disclosures in 60 days and the federal requirement to suspend Medicaid payments to organizations where a credible allegation of fraud has been made. In regard to the latter, he stated that the OMIG and the Medicaid Fraud Control Unit (MFCU) are still addressing how this will work. The OMIG is considering regulations to narrow the suspension of Medicaid funds to the specific program where the allegation of fraud has been made as opposed to suspending payment of all Medicaid funds to the provider.

Abby Pendleton, an attorney with The Health Law Partners, spoke on the topic of Medicaid RACs (Recovery Audit Contractors). Medicaid RACs are a federal audit program new under the Affordable Care Act. To predict how they will be implemented, Ms. Pendleton shared information on the Medicare RAC program which will be the model for the Medicaid program. Private companies contracted by the Centers for Medicare and Medicaid Services, RACs are tasked with identifying and correcting improper payments, both overpayments and underpayments. These contractors are compensated on a contingency fee basis based on the principal amount collected from and/or returned to the provider.

The conference’s closing speaker was Richard Harrow. He spent 27 years as a Medicaid Fraud Control Unit (MFCU) prosecutor before joining a private law firm. Mr. Harrow shared the ins and outs of the MFCU investigative process and detailed the processes and tactics of MFCU prosecutors and investigators. Many thanks to Hiscock & Barclay, LLP, and O’Connell & Aronowitz, the 2011 conference sponsors.

You can access the presentations from the conference at the links below.

[\*Melissa Zambri Presentation\*](#)

[\*Abby Pendleton Presentation\*](#)

[\*Jim Sheehan Presentation\*](#)