

Recovery Technology Corporate Compliance goals:

- 1. Ensure that Recovery Technology complies with all federal and state statutes.
- 2. Ensure claims for services rendered are submitted accurately and timely.
- 3. Ensure agency practices protect against fraud, abuse and waste.
- 4. Ensure corporate leadership maintains up-to-date knowledge of law and standards applicable to Recovery Technology's scope of practice.
- 5. Ensure corporate leadership maintains up-to-date knowledge of corporate performance under this plan.
- 6. Ensure that services provided to Recovery Technology's consumers are reasonable and necessary.
- 7. Ensure that documentation of services provided to Recovery Technology consumers is timely, accurate and complete.
- 8. Guard against employees and contract workers providing or accepting improper inducements, kickbacks and/or self-referrals.
- 9. Guard against employees and contract workers behaving in an unethical manner.

Outcomes for 2020:

In February 2020, the Michigan Fidelity Assistance Support Team (MIFAST) conducted a review of Recovery Technology's ACT and IDDT programs. This review examined the degree to which these programs aligned with the evidence based models they are constructed on.

Results of the review were as follows: an ACT mean score of 3.46, an IDDT mean score of 3.54 and an overall ACT/IDDT score of 3.74. Results of the MIFAST review are used to identify areas for improvement of program fidelity. Recovery Technology's ACT/IDDT program will utilize these results as well as

recommendations made to enhance these programs over prior to the next MIFAST review.

In April 2020, the Michigan Department of Community Mental Health conducted a habilitation supports waiver audit at Lifeways Community Mental Health. This audit examines the degree to which services and documentation match the standards for the habilitation supports waiver program. During this audit, one of Recovery Technology's client files was chosen to be examined. There were no major concerns found with the file chosen and no remedial recommendations were made based on its review.

In October, 2020, a representative from Altarum Institute conducted a security risk analysis at Recovery Technology. This analysis is conducted on a yearly basis as a part of Recovery Technology's compliance with meaningful use and to proactively identify possible threats to electronic protected health information (EPHI).

Results of the security risk analysis identified five potential risk areas. As a result a corrective action plan was developed which identifies possible solutions to each of the five areas. The results of the analysis and the corrective action plan will be reviewed by the quality improvement team where actions will be taken to mitigate these risks.

In 2020 Recovery Technology program directors continued to conduct internal clinical audits on within individual departments. Results of these audits are given to clinicians to review. Copies of these audits are also given to Recovery Technology's

CEO for review. Any trends were brought to the QI team and staff meetings so that employees could be made aware the need to adjust practices to resolve errors.

Recovery Technology received several corporate compliance violations from Lifeways CMH in 2020. One complaint related to a clinician who had sent a client a notice of termination but failed to discharge the client in a timely manner. The clinician met with supervisors to address the issue and to identify other possible cases which may require additional actions prior to discharge.

In another corporate compliance inquiry, a clinician had sent a termination notice to a client but had dated the notice with an earlier date. The clinician met with the corporate compliance officer to discuss what had transpired and what had led to the problem. The proper procedure for sending notices was reviewed with the clinician as well as the importance of accuracy of notices when they are sent.

In an additional corporate compliance investigation, it was found that a clinician had used functionality of Lifeways Electronic Organizer (LEO) to verify the insurance information of a person who is not in the Lifeways system. Using LEO for this purpose violated the acceptable use agreement for LEO. As a result, the clinician met with the corporate compliance officer to address the matter and to review the acceptable use agreement.

There were no formal, internal corporate compliance complaints made within Recovery Technology during this year.

Monitoring of HHS-OIG's list of excluded individuals and entities was continued on a monthly basis for employees, medical staff and contractors. Professional license verification was continued on an annual basis. Criminal history checks through ICHAT were continued on an annual basis as well. No concerns were found in this area during 2020.

All current staff at Recovery Technology continue receive training on corporate compliance annually and as necessitated by audit results. All new employees were trained on policies and procedures related to corporate compliance upon hire.