



SHIAWASSEE HEALTH AND WELLNESS POLICY AND PROCEDURE MANUAL

Title:	Corporate Compliance Program
Section:	Corporate Compliance
Policy Number:	01
Issued By:	Director of Strategic Services
Approved by: Leadership Team	Effective Date: 07/27/09
Approved on: 08/25/2025	Last Revision: 04/15/2025
	Last Review: 04/15/2025
	Annual Policy Statement Review: 09/22/2025

POLICY STATEMENT:

It is the policy of Shiawassee Health and Wellness (SHW) to implement an active Corporate Compliance Program.

PURPOSE:

The purpose of this policy is to identify the duties, activities, and responsibilities of the Corporate Compliance Program as identified through the SHW Corporate Compliance Plan.

APPLICATION:

All SHW staff, interns, Board Members, and Contracted Provider.

DEFINITIONS:

Abuse - Provider practices that are inconsistent with sound fiscal, business or medical practices and result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary or that fail to meet the professionally recognized standards for health care

Corporate Compliance – ongoing process and framework for ensuring adherence to all applicable laws, regulations, and internal standards, including ethical guidelines in order to prevent, detect, and mitigate risks related to legal violations and unethical behavior.

Fraud – intentional deception or misinterpretation made by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or another person.

Waste – Overutilization of services, or other practices that result in unnecessary costs. Generally, not considered caused by criminally negligent actions, but rather the misuse of resources.

CCP – Corporate Compliance Plan

MSHN – Mid-State Health Network

SHW – Shiawassee Health and Wellness

PROCEDURE:

SHW shall:

1. Establish a Corporate Compliance Program that is in accordance with federal and state statutes, laws and regulations. SHW will furthermore adhere to regulations required by the Attorney General's Office, Office of Inspector General, Centers for Medicaid and Medicare, and relevant accrediting bodies.
2. Implement and maintain a Corporate Compliance Plan (CCP) which provides the framework for SHW to comply with applicable laws, regulations and program requirements, minimize organizational risk, maintain internal controls and encourage the highest level of ethical and legal behavior.
3. Develop and maintain policies and procedures necessary to comply with the SHW CCP and shall ensure effective processes for identifying and reporting suspected fraud, abuse and waste, and timely response to detected offenses with appropriate corrective action. Furthermore, SHW shall adhere to MSHN compliance-related policies and procedures.
4. Designate a Corporate Compliance Officer who is responsible for developing and implementing policies, procedures, and practices designed to ensure compliance with the SHW CCP.
5. Establish a compliance committee at the senior management level charged with overseeing the agencies compliance program.
6. Provide staff and board member training in compliance with the CCP and will maintain records of staff attendance. Trainings shall include but are not limited to: Federal False Claims Act, Michigan False Claims Act and Whistleblowers Protection Act.
7. Require all Board members, employees and contractors to comply with corporate compliance requirements including any necessary reporting to other agencies.
8. Complete biennial reviews of the SHW CCP and provide recommendations for revisions as needed.

COMPLIANCE:

Code of Federal Regulations, Section 42: 438.608 – Program Integrity Requirements
Department of Health and Human Services, Office of Inspector General, Publication of the OIG General Compliance Program Guidance (November 2023).

Michigan False Claims Act (Act 72 of 1997)

Michigan Whistleblowers Protection Act (Act 469 of 1980)

Deficit Reduction Act of 2005

Change Log:

Date of Change	Description of Change	Responsible Party
8/31/12	Revised	Corporate Compliance Committee
10/22/13	Revised	Dirk Love Corporate Compliance Officer
12/26/18	Format Change	Jamie Burke, Executive Assistant
5/12/20	Policy Review, procedure change	Dirk Love Corporate Compliance Officer
4/13/2022	Policy Review, Procedure review without changes	Dirk Love Corporate Compliance Officer
1/13/2023	Policy Review, Procedure review with changes	Dirk Love, CCO: Vickey Hoffman Compliance Specialist
4/1/2024	Policy Review, Procedure updates to include The Whistleblowers' Protection Act	Vickey Hoffman; Corporate Compliance Officer
4/15/2025	Policy Review, Procedure updates	Vickey Hoffman; Corporate Compliance Officer