

Memorandum: 2021 Compliance Plan and Office of Compliance Policies and Procedures Update

This update provides information from CalOptima's Office of Compliance:

- The Office of Compliance policies and procedures listed below are finalized and available on CalOptima's website: <u>www.caloptima.org</u>; and
- CalOptima's Compliance department has reviewed and made revisions to its Compliance Plan for calendar year (CY) 2021. A final version is attached and will be posted to the CalOptima website – <u>www.caloptima.org</u>. If you have any questions, please contact Silver Ho, Compliance Officer, at 657-235-6997 or by email at <u>sho@caloptima.org</u>.

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
Office of Com	pliance - Audit & Oversight (A&O)	
GG.1605	Delegation and Oversight of Credentialing and Recredentialing Activities	12/03/20
	This policy outlines the processes by which CalOptima shall ensure credentialing and recredentialing activities are performed by delegated entities in accordance with quality, state, and federal standards.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect	
GG.1619	Delegation Oversight	12/03/20
	This policy defines the process for oversight of delegated entities, including but not limited to health networks, Pharmacy Benefit Manager (PBM), and Managed Behavioral Health Organizations (MBHO), to ensure compliance with statutory, regulatory, contractual, and CalOptima policy requirements, and to ensure continuous improvement of member care, management and administrative processes.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.2015	Health Networks Claims Processing	12/03/20
	This policy outlines health network compliance with claims settlement practices.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect	
HH.2025	Health Network Subdelegation and Subcontracting	12/03/20
	This policy outlines the requirements and processes required for health network subdelegation and subcontracting.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect	
HH.2026	Claims Delegation and Oversight	12/03/20
	This policy ensures a delegated health network is compliant with statutory, regulatory, contractual, CalOptima policies and procedures, and other claims processing requirements.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect	
HH.2027∆	Annual Risk Assessment (Delegate)	12/03/20
	This policy outlines the annual risk assessment process conducted by CalOptima's Audit & Oversight Department to identify delegated First Tier Entities (FTE) specific functional areas vulnerable to potential compliance risk. Such areas are documented in CalOptima's risk assessment, which will influence the development of CalOptima's delegated FTE audit and monitoring work plan.	
	CalOptima revised this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and clarify the assessment process applies to first tier, downstream, and related entities as well as FTEs. Policy language was revised to permit for variation in frequency of monitoring and auditing based on risk-level.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.4001 ∆	Audit & Oversight Committee	12/03/20
	This policy outlines the functions and responsibilities of the Audit & Oversight Committee (AOC) responsible for oversight of CalOptima's internal departments and its First Tier, Downstream, and Related Entities (FDRs).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
Office of Com	pliance – Fraud, Waste, and Abuse (FWA)	<u> </u>
HH.1105∆	Fraud, Waste, and Abuse Detection	12/03/20
	This policy establishes a process to detect suspected Fraud, Waste, and Abuse (FWA) in a CalOptima program by a member, provider or prescribing provider, practitioner, a CalOptima employee, First Tier, Downstream, and Related Entities (FDR), billing intermediary, and CalOptima's health networks, in accordance with federal and state regulations.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.1107∆	Fraud, Waste, and Abuse Investigation and Reporting	12/03/20
	This policy establishes a process to investigate and report suspected Fraud, Waste, or Abuse (FWA) committed by a member, provider, a CalOptima employee, First Tier, Downstream, and Related Entities (FDR), and CalOptima's health networks involving a CalOptima program, in accordance with federal and state regulations and contractual requirements.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

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HH.5000 ∆	Provider Overpayment Investigation and Determination	12/03/20
	This policy establishes an effective system for the review of suspect claims to detect and prevent Fraud, Waste, and Abuse (FWA) within a CalOptima program, in accordance with federal and state regulations, and to identify resulting overpayments for recoupment.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.5004 ∆	False Claims Act Education	12/03/20
	This policy establishes CalOptima's process to inform CalOptima employees, members of the governing body and First Tier, Downstream, and Related Entities (FDR) of CalOptima's obligations for sharing information regarding compliance with the False Claims Act.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
Office of Com	l pliance – Privacy	1
HH.3000 ∆	Notice of Privacy Practices	12/03/20
	This policy identifies the required content of CalOptima's Notice of Privacy Practices (NPP) and the process by which the NPP is distributed to CalOptima members.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.3001∆	Member Access to Designated Record Set	12/03/20
	This policy defines the Designated Record Set (DRS) that contains Protected Health Information (PHI) for a member, maintained by CalOptima and the conditions under which the member, or their personal representative, may access, inspect, or obtain a copy of their PHI in the DRS.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3002∆	Minimum Necessary Uses and Disclosure of Protected Health Information and Document Controls	12/03/20
	This policy describes the conditions under which CalOptima shall control access to, request of, use of, or disclosure of Protected Health Information (PHI) to ensure that the data used is the minimum necessary to fulfill the request, or carry out the required function.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3003∆	Verification of Identity for Disclosures of Protected Health Information	12/03/20
	This policy defines the steps necessary for verification of identity of a person requesting Protected Health Information (PHI) prior to disclosure.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.3004∆	Member Request to Amend Records	12/03/20
	This policy defines the process by which members may request amendments to their Protected Health Information (PHI) maintained in the Designated Record Set (DRS) by CalOptima, or its business associates.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3005∆	Member Request for Accounting of Disclosures	12/03/20
	This policy defines the scope of a member's right to receive an accounting of disclosures of the member's Protected Health Information (PHI) made by CalOptima, including disclosures to or by its business associates.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3006∆	Tracking and Reporting Disclosures of Protected Health Information	12/03/20
	This policy defines the process by which CalOptima shall internally track and report disclosures of a member's Protected Health Information (PHI).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.3007∆	Member Rights to Request Restrictions on Use and Disclosure of Protected Health Information	12/03/20
	This policy describes the process by which a member may request CalOptima to restrict the use and disclosure of his or her Protected Health Information (PHI), and how CalOptima shall process such requests in accordance with applicable statutory, regulatory, and contractual requirements.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3008∆	Member Right to Request Confidential Communications	12/03/20
	This policy describes the process by which a member may request to receive confidential communications from CalOptima regarding Protected Health Information (PHI).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3009∆	Access by Member's Personal Representative	12/03/20
	This policy defines the parameters for recognizing a member's personal representative as having the right to access the member's Protected Health Information (PHI).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.3010∆	Protected Health Information Disclosures Required by Law	12/03/20
	This policy describes the manner in which CalOptima uses and discloses Protected Health Information (PHI) as permitted by the Health Insurance Portability and Accountability Act (HIPAA) and as required by law.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3011∆	Use and Disclosure of PHI for Treatment, Payment, and Health Care Operations	12/03/20
	This policy describes the requirements for the use and disclosure of member Protected Health Information (PHI) for treatment, payment, and health care operations.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3014∆	Use of Electronic Mail with Protected Health Information	12/03/20
	This policy describes CalOptima's procedures related to the use of electronic mail (email) to send information containing Protected Health Information (PHI).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.3015∆	Member Authorization for the Use and Disclosure of Protected Health Information	12/03/20
	This policy describes the circumstances and process for obtaining a member's (or from their personal representative) authorization for the use and disclosure of a member's Protected Health Information (PHI).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3016∆	Guidelines for Handling Protected Health Information Off-site	12/03/20
	This policy describes the process for handling Protected Health Information (PHI) created, accessed, or taken off-site from CalOptima offices.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3019∆	De-identification of Protected Health Information	12/03/20
	This policy describes the processes CalOptima must undertake, in accordance with the Health Insurance Portability and Accountability Act (HIPAA), to de-identify Protected Health Information (PHI).	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.3020∆	Reporting and Providing Notice of Security Incidents, Breaches of Unsecured PHI/PI or other Unauthorized Use or Disclosure of PHI/PI	12/03/20
	This policy describes CalOptima's policies and procedures for reporting security incidents, breaches of unsecured Protected Health Information/Personal Information (PHI/PI) and/or other unauthorized access, use, or disclosure of PHI/PI to its regulators and providing notice to affected members and media of breaches of unsecured PHI in accordance with contractual and regulatory requirements.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
Office of Com	pliance – Regulatory Affairs and Compliance (RAC)	1
HH.2002 ∆	Sanctions	12/03/20
	This policy describes the process by which CalOptima shall impose sanctions on a First Tier, Downstream, or Related Entity (FDR) to enforce effective correction of non-compliance with statutory, regulatory, contractual, or CalOptima policy requirements, fraud, waste, and abuse, or FDR's failure to satisfactorily implement corrective actions.	
	sanctions on a First Tier, Downstream, or Related Entity (FDR) to enforce effective correction of non-compliance with statutory, regulatory, contractual, or CalOptima policy requirements, fraud, waste, and abuse,	
	sanctions on a First Tier, Downstream, or Related Entity (FDR) to enforce effective correction of non-compliance with statutory, regulatory, contractual, or CalOptima policy requirements, fraud, waste, and abuse, or FDR's failure to satisfactorily implement corrective actions. CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no	
HH.2005∆	sanctions on a First Tier, Downstream, or Related Entity (FDR) to enforce effective correction of non-compliance with statutory, regulatory, contractual, or CalOptima policy requirements, fraud, waste, and abuse, or FDR's failure to satisfactorily implement corrective actions. CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	12/03/20
HH.2005∆	 sanctions on a First Tier, Downstream, or Related Entity (FDR) to enforce effective correction of non-compliance with statutory, regulatory, contractual, or CalOptima policy requirements, fraud, waste, and abuse, or FDR's failure to satisfactorily implement corrective actions. CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy. Programs: Medi-Cal; OneCare; OneCare Connect; PACE 	12/03/20
HH.2005∆	 sanctions on a First Tier, Downstream, or Related Entity (FDR) to enforce effective correction of non-compliance with statutory, regulatory, contractual, or CalOptima policy requirements, fraud, waste, and abuse, or FDR's failure to satisfactorily implement corrective actions. CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy. Programs: Medi-Cal; OneCare; OneCare Connect; PACE Corrective Action Plan This policy defines the requirements for CalOptima and its First Tier, Downstream, and Related Entities (FDRs) for development and submission of an Immediate Corrective Action Plan (ICAP)) or Corrective Action Plan (CAP) for areas of non-compliant performance, 	12/03/20

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HH.2007 ∆	Compliance Committee	12/03/20
	This policy describes the role and responsibility of CalOptima's Compliance Committee in ensuring and enforcing compliance with ethical standards, regulatory requirements, contractual obligations, the Compliance Program, including the Fraud, Waste, and Abuse (FWA) Plan and Code of Conduct, and CalOptima policies and procedures.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.2014 ∆	Compliance Program	12/03/20
	This policy establishes a compliance program to ensure and enforce compliance with ethical standards, contractual requirements, applicable federal and state statutes and regulations, and CalOptima policies.	
	CalOptima revised this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima revised policy Attachment A: FDR Compliance Attestation, to align with the Industry Collaboration Effort (ICE) FDR Attestation.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.2018∆	Compliance and Ethics Hotline	12/03/20
	This policy establishes the procedures whereby CalOptima shall receive, document, and manage calls made to CalOptima's compliance and ethics hotline.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.2019∆	Reporting Suspected or Actual Fraud, Waste, or Abuse (FWA), Violations of Applicable Laws and Regulations, and/or CalOptima Policies	12/03/20
	This policy establishes a structure whereby the CalOptima governing body, employees, and First Tier, Downstream and Related Entities (FDR) are able to report suspected misconduct or violations, in good faith, without fear of retaliation, or retribution.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.2020∆	Conducting Compliance Investigations	12/03/20
	This policy outlines the process for conducting and overseeing compliance investigations, or inquiries into allegations, of violations of the CalOptima Code of Conduct, any statute, regulation, or guideline applicable to federal and/or state health care programs, or of CalOptima's policies and procedures.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.2021∆	Exclusion and Preclusion Monitoring	12/03/20
	This policy outlines a process for verifying and monitoring the eligibility of employees (permanent, temporary, volunteer, and as-needed employees), members of the governing body, First Tier, Downstream, and Related Entities (FDR), non-contracted providers, and vendors to participate in CalOptima federal and/or state health care programs through state and federal exclusions, preclusion, and ineligible person/entity lists.	
	CalOptima revised this policy pursuant to the CalOptima annual review process to incorporate language to include medical group practices, physician medical groups, and providers with letters of agreement as entities and individuals subject to monthly exclusion and preclusion monitoring. Operational departments responsible for monitoring were clarified within the policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.2022 ∆	Record Retention and AccessThis policy outlines the requirements for CalOptima and its First Tier, Downstream, and Related Entities (FDRs) to retain and make available premises, contracts, books, documents, records, financial statements, equipment, computers, or other electronic systems, in accordance with federal and state regulations for the purpose of any audit, or investigation, of a CalOptima program.CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.Programs: Medi-Cal; OneCare; OneCare Connect; PACE	12/03/20
HH.2023 ∆	Compliance TrainingThis policy outlines CalOptima's compliance and Fraud, Waste, and Abuse (FWA) education and training requirements for employees, members of the governing body, and First Tier, Downstream, and Related Entities (FDR).CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima revised policy Attachment A: FDR Compliance Attestation, to align with the Industry Collaboration Effort (ICE) FDR Attestation.Programs: Medi-Cal; OneCare; OneCare Connect; PACE	12/03/20
HH.2028 ∆	Code of ConductThis policy outlines the process CalOptima utilizes to review, approve, and communicate its expectation that all employees, members of its governing body, and First Tier, Downstream, and Related Entities (FDR) conduct themselves in an ethical and legal manner and in compliance with the Code of Conduct.CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima revised policy Attachment A: FDR Compliance Attestation, to align with the Industry Collaboration Effort (ICE) FDR Attestation.Programs: Medi-Cal; OneCare; OneCare Connect; PACE	12/03/20

CalOptima Policy Number	Policy Title, Description, Revisions, Programs	Policy Last Revision Date
HH.2029 ∆	Annual Compliance Program Effectiveness Audit	12/03/20
	This policy outlines the process by which CalOptima's Office of Compliance determines the overall effectiveness of the Compliance Program.	
	CalOptima revised this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
HH.3012∆	Non-Retaliation for Reporting Violations	12/03/20
	This policy outlines CalOptima's commitment to compliance with applicable laws, regulations, and policies and its policy against intimidation, harassment, discrimination, or any other retaliatory action against individuals who report, or seek guidance related to, suspected or actual non-compliance with such laws and regulations, or unethical conduct.	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: Medi-Cal; OneCare; OneCare Connect; PACE	
MA.9124	CMS Self-Disclosure	12/03/20
	This policy outlines a process for self-disclosing incidences of significant Medicare program non-compliance to CalOptima's Centers for Medicare & Medicaid Services (CMS) Regional Account Manager and/or the Department of Health Care Services (DHCS) Contract Manager. This self-disclosing process ensures that corrective actions are taken timely when non-compliance incidents are identified	
	CalOptima reviewed this policy pursuant to the CalOptima annual review process to ensure alignment with the 2021 CalOptima Compliance Plan and current operations. CalOptima made no substantive revisions to this policy.	
	Programs: OneCare; OneCare Connect; PACE	

The 2021 Compliance Plan and final P&P update are posted to the Documentation Library on CalOptima's FTP site, as indicated below, for HN reference.

Folder: /users/Documentation Library/HN Reporting Binder/Reference Documents